

You will be better soon: Manipulating Patients to Continue Psychotherapy Treatment

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Abstract

Psychotherapy is demonstrated to be beneficial for most patients with minor and major psychological problems such as depression, schizophrenia, mood disorder, and anxiety. Patients may not respond to psychotherapy. However, how to deal with such clients is decided by their psychotherapists, and it is unclear when they should terminate the psychotherapy session. Although specific rules are mentioned concerning ending the therapy, there are no strict rules limiting psychotherapists.

In addition, objectively measuring the therapeutic output is not easy, considering that psychological tests may not be very consistent. Moreover, since there are no clear indications that patients were psychologically improved, a psychotherapist who works in a private clinic may not accept that the clients were substantially improved since terminating therapy can reduce their profit. Thus, they consciously or subconsciously want their patients/clients to continue psychological treatment for a long time.

Thus, our goal of the manuscript was to criticize the potential delaying behavior of psychotherapists to make a profit.

In conclusion, clinicians should be aware of the process of psychological improvement and quit the treatment when they realize it is not helpful. Moreover, health policies should be designed to monitor private psychological clinics. Furthermore, in case of potential client manipulation, psychotherapists should assess whether they can adequately treat clients suffering from psychological problems.

Keywords: Psychotherapy duration; Manipulating patients; Private clinical practice; Psychotherapy ethics; psychotherapy sessions.

Abbreviations: APA: American psychiatry association.

Introduction

Although psychotherapy is found to be practical and essential, the therapeutic change in psychotherapy is not apparent [5]. Psychotherapy is demonstrated to be beneficial for many clients, and it does not lead to severe side effects such as tardive dyskinesia that potentially affect patients on antipsychot-

ics [4]. However, there are many challenges concerning how to measure therapeutic change. Decisions concerning the termination of psychotherapy include two possibilities. First, clients are substantially improved. Secondly, psychotherapists cannot help patients. Considering that there is no clear sign or measurement of psychological healing, it may lead psychotherapists to continue treatment.

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Some American Psychological Association (APA) members expected thirty to forty psychotherapy sessions to achieve therapeutic change [3]. But, it is essential to understand earlier whether patients improve or not. Therefore, it is vital to suggest specific periods to report the development of clients. A few studies investigate the duration of therapy and the outcome of treatment. A previous study indicates that duration of therapy was inversely correlated with therapy outcome [2]. Considering this, it is essential to create health policies to assess psychological treatment objectively. In addition, dissatisfaction with therapy was reported by many clients as necessary in the decision to terminate [1]. However, there is a possibility that psychotherapists can convince the clients that their contribution is substantial. They can convince them that they are suffering from severe psychological problems. Thereby, such manipulations can even lead patients to deteriorate. Since clients with psychological problems have a reduced understanding of their psychological stability, they can be easily convinced that they need therapy. Psychotherapists who manipulate clients also make others believe that psychotherapy is useless.

To improve the quality of psychological therapies, objective reporting systems should be developed. Psychotherapists should scientifically report the progress of psychotherapy in short periods (once in three months). Once they have reached the minimum necessary duration (40 sessions), psychotherapists should be asked to list specific positive behavioral changes. In addition, their reports mentioning the positive solid be-

havioral changes (e.g., quitting smoking) should be confirmed by the clients. In this way, a psychologist can maximize their benefit, and the manipulation of patients can be prevented.

Conclusion

In conclusion, relevant health organizations should monitor the psychotherapy process, especially after a specific duration (e.g., six months). Furthermore, in case of potential client manipulation, psychotherapists should assess whether they can adequately treat clients who may suffer from psychological problems.

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