



Psychotherapy & Counselling  
Federation of Australia

# Evidence-Informed Practice Statement

## **Purpose of this statement**

This statement has been developed to support the professionalism of PACFA, by positioning the organisation and its members in the contemporary paradigm of professional practice that is underpinned by evidence. It informs potential funders and employers about PACFA's position with respect to evidence use amongst psychotherapists and counsellors, and advises members of PACFA's recommendations for their practice.

## **Definition of Evidence-Informed Practice**

PACFA defines Evidence-Informed Practice as an approach to practising psychotherapy and counselling that is informed by current theory, empirical research evidence and expertise from clinical practice, which reflects the impact of client characteristics, including culture, life experience and preferences, on treatment outcomes.

## **PACFA's commitment to Evidence-Informed Practice**

PACFA is committed to advancing evidence about the effectiveness of psychotherapy and counselling and its use in professional practice. Through its diverse activities, from Continuing Professional Development (CPD) to publication of the peer-reviewed journal PACJA, and other research publications including systematic reviews, PACFA seeks to promote evidence-informed practice. PACFA also strongly encourages all of its members to prioritise evidence-informed practice, both organisations and individuals who offer training or CPD, and practitioners. PACFA recommends the use of appropriate standardised outcome measures by practitioners, to ensure that they receive systematic feedback on the effectiveness of their services, and the systematic use of this feedback to improve practice.

## **Background to this statement**

Evidence-Informed Practice is a term increasingly applied to approaches that draw from evidence from both scientific research and quality reflective practice (Dodd & Savage, 2016). While development of the evidence base for psychotherapy and counselling has earlier been influenced by the science-practitioner model of clinical psychology, more recently, Common Factors (CF) research has altered the landscape in supporting the integration of the science-practitioner with reflective-practitioner models (Day, 2015). These Common Factors can be categorized broadly as client factors and extra therapeutic events, relationship factors, expectancy and placebo effects and technique/model factors, with the latter contributing only 15% of impact (Asay & Lambert, 1999; Wampold, 2015).

PACFA acknowledges that a current lack of empirical evidence for any specific psychotherapy and counselling approach or intervention does not mean that it is necessarily ineffective or inappropriate. The increasing evidence on Common Factors overrides past reliance on technique or modality as major factors in therapeutic effectiveness. Rather, the evidence showing equivalence of effect justifies an assumption of effectiveness for "bona-fide" approaches (Wampold, 1997) as a starting point. PACFA has chosen to use the term Evidence-Informed Practice for these reasons and because it is considered to be more compatible with the full breadth of research approaches that are valued in our field, including Indigenous methodologies, inclusive research approaches and case study research.

## References

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25 May 2019