



**SCHOOL OF PSYCHOLOGY**  
**DOCTORATE IN CLINICAL AND COMMUNITY PSYCHOLOGY**  
**MAJOR RESEARCH PROJECT**

<b>Title</b>	Therapist competence, case conceptualisation and therapy outcome in cognitive behavioural therapy.
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<b>Nominated journal</b>	Journal of Consulting and Clinical Psychology
<b>Word count</b>	Manuscript = 7,879 (with Appendices = 10,974)

This manuscript has been submitted in partial fulfilment of a Doctoral degree in Clinical and Community Psychology at the University of Exeter.

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## **Abstract**

Clients rarely present with prototypical presentations for which an “off the shelf” cognitive-behavioural therapy (CBT) approach can be used, and the most frequently cited rationale for case conceptualisation is matching clients’ unique presentations and therapy goals with available theory and research. In this, it is argued that case conceptualisation guides therapy by ensuring that individual cognitive and behavioural processes are targeted, thereby maximising therapy efficacy. Therefore, therapists who are competent in case conceptualisation should achieve better outcomes. However, little is known about the relationship between competency in case conceptualisation and general CBT competence, or how competency in case conceptualisation is linked to therapy outcome. Forty audiotapes selected from an ongoing study (CoBaIT: Cognitive Behavioural Therapy as an adjunct to Pharmacotherapy for Treatment Resistant Depression in Primary Care: a randomised controlled trial) were rated for competency in case conceptualisation and competence in CBT using the Collaborative Case Conceptualisation – Rating Scale (CCC-RS) and Cognitive Therapy Scale – Revised (CTS-R) respectively. The assessment of competence was carried out by independent groups of researchers with expertise in these assessments, blind to treatment outcome. Therapy outcome was measured using The Beck Depression Inventory II (BDI-II). The results showed that 1) competence in case conceptualisation shared a strong and positive relationship with general CBT competence and, 2) that competence (in case conceptualisation and general CBT competence) was associated with better treatment outcome for depression. The results highlight competence in case conceptualisation as an important facet of therapist CBT competence, and indicate that investing in the training and selection of therapists competent in case conceptualisation as well as CBT competence has the potential to enhance treatment outcomes.