

The Sluggish Rise of Psychotherapy Metrics

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Description:

In line with the trend of using big data and AI to better understand human behavior and emotions, psychotherapy metrics are on a slow and somewhat shaky rise in the world of psychotherapy. Various clinics and programs have incorporated FIT, or "feedback-informed treatment," techniques carried out through algorithms from historical data in relation to long-form surveys taken by therapy clients on a computer tablet before or after sessions. The data is then portrayed as a graph that quantifies symptoms, which can point to signs of progress or deterioration.

While patients seem to respond openly to the surveys, and though the resulting data seems to offer the therapist useful insight, many therapists are struggling to accept and use this data in their work--arguing that instinct is greater the machine.

Importance:

While psychotherapy has been proven to help many people with a variety of ailments, the field has not seen large growth in therapist effectiveness in terms of improved client outcomes. This might be attributed to a lack of performance feedback or progress awareness for therapists. While doctors have tools to assist their analyses, therapists are expected to be the tools themselves, and analyze human nuances through experience, cognitive skills and instinct.

Psychotherapy metrics can act as a tool for therapists looking to gain insight where their blind spots don't allow. Past studies have shown patients to be weary of opening up to therapists so as not to disappoint them face-to-face, and in turn found patients to be more comfortable and authentic in their answers when interacting with an automated computer survey.

However, many therapists struggle with the implication of not being "good enough," or allowing a machine to help better understand humans. During various

implementations of FIT programs in clinics, many therapists dropped out, and a large majority chose to ignore the data entirely.

Implications:

There is underlying implication that data and algorithms are becoming exceedingly better at predicting human cognition and behavior than the naked, instinctual eye of even a well-trained observer.

Therapists seem to suffer certain insecurities regarding their own value in relation to hard data, and are likewise uncomfortable with feedback or criticism. The insistence by therapists to adhere to tradition in the field, and to keep away from potentially advantageous technological tools, points to a recession in psychotherapy until new techniques are accepted.

Patients have shown greater comfort and candor when interacting with a computer interface. This hints a variety of things: the gravity of human-to-human connection can hinder psychotherapy practices; the technologically acquainted generation may be growing more amicable with machines than humans; patients may feel safer with anonymity and prefer to speak *through* the machine to express themselves to the therapist.

*Perhaps the generation gap between older psychotherapists and younger patients must be given more attention. It is worthwhile to consider that therapists from previous generations may be unable to provide relatable help to a newer generation with completely different needs, and an alternative sense of interaction.

Opportunities:

- A chance to bring AI and data into the realm of psychotherapy. This insinuates mutual growth between the field and the technology itself -- i.e. AI can improve its understanding of emotional and psychological health while helping and interacting with patients. Algorithms also become more complex and developed the more often they are used in the field.

- Catching signs of deterioration or relapse in patients early on, and the ability to track progress or stability over time.

- Development of a proper feedback system for therapists, and tracking therapist progress in the field based on patient improvement.

Threats:

- Algorithms and machines can be faulty and suffer from glitches. This could be dangerous if the system insinuates incorrect progress or decline, and in turn the therapist offers incorrect treatment, or triggers an unwanted response.

- Because it may be easier for patients to be sincere in an automated survey due to the lack of confronting or intimidating face-to-face contact, it may be equally easy for a patient to lie in an automated survey.

- This may encourage false belief that an algorithm or survey can completely breakdown the intricacies of human conditions.

- Should this acquired data grow exponentially over the course of FIT development, the data could be offered to the public or to corporations, and potentially be used against us, or for unwanted marketing campaigns, etc.