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### Individual Differences in Psychotherapy Change Among Ethnic Minority Patients

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First Advisor  
Michael J. Constantino

Second Advisor  
Maureen Perry-Jenkins

Third Advisor  
Linda M. Isbell

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#### Abstract

There is limited research on ethnic minorities in psychotherapy, particularly with regard to the process of change. Most existing studies subscribe to a "uniformity myth" in which individual differences across and within minority groups are often masked or ignored because of an assumption of shared characteristics and experiences. The primary aim of this study was to address the gap in research on individual differences in psychotherapeutic

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change by analyzing a large sample of adult patients ( $N = 2,272$ ) of varying ethnicity who received psychotherapy across various naturalistic settings. The treatment settings all participated in a national practice-research network, administering the same outcome measure (the Treatment Outcome Package) at regular intervals throughout treatment. I used latent class growth curve modeling to examine whether patients of a particular ethnicity (Caucasian, Hispanic, African American) had multiple depression and panic change trajectories over time. I then explored whether patient characteristics (e.g., age, gender, patient socioeconomic status) predicted membership in one or another trajectory group. Several different trajectories emerged for each ethnicity, and patterns of change in depression and panic symptoms were predicted by some patient socio-demographic variables. Taking the Hispanic group as an example, two classes emerged in the depression model; patients in one class had low symptoms at pretreatment and improved over time, while patients in the other group started with moderate symptoms and failed to improve over time. The odds of having low baseline symptoms and then responding to treatment were higher for patients who were married or who had higher income. In the panic model, two groups emerged with low panic symptoms at pretreatment, but these groups varied in treatment response with one group improving in treatment and the other worsening during treatment (this heterogeneity would have been masked with a one class analytic model). Also, patients who were younger or employed were more likely to be in the responding group than in the worsening group. Such knowledge of different change trajectories, as well as predictors of latent class membership, can help to identify individuals' change prognosis, which, in turn, can help to facilitate the development of sensitive and helpful interventions.

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