

The field of counseling psychology identifies with developmental models for counselor training and supervision (e.g., Loganbill, Hardy, & Delworth, 1982; Stoltenberg, McNeill, & Delworth, 1998). A core assumption of a developmental model is that with time and an environment conducive to learning assimilation and integration of new counselor skills occurs. A recent clinical judgment meta-analysis, however, found that counseling and other psychologists may only marginally improve in their judgment accuracy with more clinical or educational experience. In a synthesis of judgments made by 4,607 clinicians Spengler and colleagues (2009) found a small experience-judgment accuracy effect of  $d = .12$ . An effect of this size means that with more experience counseling psychologists can expect to acquire only a 13% improvement in their decision-making accuracy about such issues as diagnosis, prognosis, and treatment choices. Ridley and Shaw-Ridley (2009) called this finding “sobering and instructive” and challenged counseling psychology to move with “urgency” towards better models of training and education (p. 400).

The purpose of the present study is to extend the results of Spengler et al.’s meta-analysis beyond the time period they reviewed from 1970 to 1996. To test the robustness of the experience-judgment accuracy effect we synthesized clinical judgment research based on more recent research from 1997 to 2010. Training models have changed and evolved: for example, there is now an increased emphasis on social justice and multicultural training (Altmaier & Hansen, 2012; Fouad, Carter, & Subich, 2012 a, b). It may be that these changes in training environments have had a positive impact on clinical judgment, which is most frequently researched in relation to bias, prejudice and cognitive errors (Garb, 1998). It could be that with increased attention in training programs on social justice and multicultural sensitivity that counseling and other psychologists may be less prone to biased and inaccurate decision-making documented in the clinical judgment literature.

We tested the same moderators as Spengler et al. with the addition of profession type (psychology, psychiatry, social work, counseling, psychiatric nursing) and comparisons of experienced clinicians (graduate students or professionals) with true novices (e.g., untrained undergraduates). Past research has suggested that the greatest gain in judgment accuracy may occur in the range of no experience to some experience (Lambert & Ogles, 2004; Lambert & Wertheimer, 1988; Skovholt, Rønnestad, & Jennings, 1997). Lambert & Wertheimer (1988) compared persons with no clinical experience with those who had considerable experience. This study had one of the largest effects ( $d = 1.71$ ) in the Spengler et al. meta-analysis. Spengler et al. noted, “The issue of the limited range of experience for these cross-sectional comparisons has been a frequently stated limitation (Skovholt et al., 1997) and warrants consideration in future research” (p. 382). We also sought to test for differences between various mental health professionals based on our assumption that training models may moderate the experience-judgment accuracy effect. Our hope is to improve clinical decision-making through this type of self-reflection and synthesis afforded by meta-analyses.