

Studies Conducted in Psychology Training Centers in Latin America: A Scoping Review

Background

Mental health has been classified as one of the major problems of contemporary times. According to the World Health Organization (WHO), there are currently around one billion people diagnosed with some type of mental disorder. This is especially relevant considering the high mortality and disability rates among people with this kind of condition; for example, the probability of premature death in people with major depression or schizophrenia is 40% to 60% higher than in the general population, due to concomitant physical health problems that, because of the mental illness, are not properly treated; or significant facts such as suicide being the second leading cause of death among young people worldwide (Organización Mundial de la Salud, 2022). This has consequences even beyond the health field; for example, the global economic impact caused by mental disorders is expected to reach 16.3 billion dollars for the period between 2011 and 2030 (World Economic Forum & Harvard School of Public Health, 2011).

These facts are worsened in regions with emerging economies; where, due to poverty, precarious healthcare, high prevalence of childhood maltreatment, among others, there is a greater risk of suffering from mental health problems (Organización Mundial de la Salud, 2022). Latin America, due to its characteristics, falls within this classification. This leads to, according to figures presented by the Pan American Health Organization (PAHO), in 2019, the average number of years lived with disability (YLD¹) in the Americas being 1,769 years per 100,000 inhabitants on average (Pan American Health Organization, 2021).

This situation -already alarming in itself- is worsened by the lack of care received by people with mental health problems in low- and middle-income countries; since, according to data collected by the WHO, between 76% and 85% of people with severe mental disorders do not receive the specialized care they require (Organización Mundial de la Salud, 2022).

¹ “Years Lived with Disability” (YLD) is an indicator created by the World Health Organization to determine the number of years that people live with a disease or health condition that affects their quality of life. It is calculated by multiplying prevalence by the disability weight, which is a value between 0 and 1, estimated according to the severity of the condition experienced (World Health Organization, 2020)

One of the main causes of the deficient care received in these territories is the lack of sufficient qualified personnel (Organización Mundial de la Salud, 2022), which has led several government agencies throughout the region, in their different action plans, to allocate resources to address this issue. In Colombia, for example, the National Mental Health (Ministerio de Salud y protección social de Colombia, 2018) and the Strategy for the Promotion of Mental Health (Consejo nacional de política económica y social, 2020) emphasize, as an essential requirement for improving the population's mental health, the need for more competently trained mental health professionals. Similarly, in Mexico, the General Health Law establishes mental health as a priority intervention area and stipulates the training of personnel in this field as a duty of the State (Congreso de los Estados Unidos Mexicanos, 2022); which is implemented through the Specific Action Program on Mental Health and Addictions 2020–2024, where training goals are outlined for doctors, psychologists, and psychiatrists, in order to reduce the care gap (Secretaría de salud de México, 2022). In the case of Brazil, following the guidelines of Law 10.216 of 2001, which determines the model of mental healthcare (Dispõe sobre a proteção e os direitos das pessoas portadoras de transtornos mentais e redireciona o modelo assistencial em saúde mental, 2001), the Psychosocial Care Network (Rede de Atenção Psicossocial - RAPS) was created, a national public network that articulates the different levels of care, which has recently been strengthened with post-pandemic strategies aimed at expanding the specialized human talent in mental health (Ministério da Saúde, 2025). In Chile, similar strategies are highlighted with the Law on the Recognition and Protection of the Rights of People in Mental Health Care (Del reconocimiento y protección de los derechos de las personas en la atención de salud mental, 2021), which gave rise to the National Mental Health Plan 2017–2025, in which the need to strengthen the primary care network is specified. These cases, while representative, are not the only ones in the region, where the training of qualified human resources is presented as an indispensable requirement to overcome the widespread problems in mental health.

In response to the need for qualified mental health professionals, and understanding that clinical training goes beyond purely theoretical aspects, centers have emerged where care functions are integrated with training functions specifically, in this case, for psychologists. These centers are usually affiliated with higher education institutions (HEIs) that offer undergraduate or postgraduate programs in the field of clinical psychology. In some institutions, mainly in Europe, these centers have even evolved into “university clinics” with a higher level of structure, personnel, and service coverage (García-Vera & Sanz, 2009; Saúl et al., 2009).

These centers fulfil -or should fulfil- a dual role: providing a space for the training of new professionals through practical experience, but within a controlled environment supervised by specialists (thus preventing iatrogenic procedures); while at the same time contributing to the improvement of community mental health by offering high-quality psychological care, usually at reduced costs or, in some cases, even free of charge to populations who might otherwise have limited access to such services (Dyason et al., 2019).

In addition to these essential elements, training centers constitute an especially favorable environment for research, insofar as they represent a source of data that would be difficult to obtain in other contexts. These data allow for the exploration of questions such as: What makes psychotherapy effective? Can psychotherapy outcomes be modified based on the training of the psychotherapists? Or, are psychotherapy competencies innate or can they be learned? (Dyason et al., 2019). Moreover, given their nature, these centers do not employ the strict inclusion/exclusion criteria typical of randomized controlled trials, which allows for studies that provide information not only about the effectiveness but also the efficacy of the interventions performed (Neufeldt & Nelson, 1998). Furthermore, they are important because they allow psychology students in training to become aware of the value of research and how it enriches -and even becomes indispensable- for proper clinical practice, particularly evidence-based practice (Borkovec, 2004).

Why it is important to do this review

Beyond the obvious social relevance of generating knowledge about the functioning of psychological care centers -given the existing problems on this topic in developing countries- there is also academic significance. Although the subject addressed by this review is not new, as there are several studies on the matter (Borkovec, 2004; Dyason et al., 2019; Neufeldt & Nelson, 1998), the vast majority of these have been carried out in North American and Western European countries. For example, of the 33,909 articles retrieved from Web of Science (WoS) in the last five years using the keyword “Psychotherapy,” only 1,328 come from Latin America. And when using “Psicoterapia” as the keyword, only 51 articles appear.

This becomes problematic because there is insufficient information about, for example, the effectiveness of treatments in cultures different from those of the countries where these treatments originated -typically North America or Western Europe- which, by no means, constitute a representative sample of the world population (Henrich et al., 2010). It is important to acknowledge, however, that several efforts have been made to adapt psychotherapeutic procedures based on the ethnic or sociocultural particularities of the populations served. But, as

expected, the publications that result from these studies overwhelmingly report interventions conducted with migrant populations living in developed countries (Naeem, 2019; Rathod et al., 2018), which raises the question of whether these studies truly help fill the existing knowledge gap. Taking this into account, there is a consensus among scientists in the field that the lack of information from developing countries must be addressed if significant improvements in psychotherapeutic practice are to be achieved (Winfred et al., 2024).

Thus, it becomes evident that there is a need not only to conduct more research on this topic in these countries, but also to bring visibility to the research that is already being carried out and which, possibly, is not being widely disseminated. For this purpose, review articles are particularly suitable; however, it should be noted that these are also scarce in the region. For instance, if one searches WoS for articles classified as “review” produced in the last five years using the keyword “Psychotherapy,” of the 3,922 results obtained, only 202 come from Latin America. It is worth mentioning that 120 of those are from Brazil, while the output from the rest of the region is quite low.

While the scenario presented here clearly demonstrates the inequality between research on this topic in Latin America and in other regions of the world, the lack of information becomes even more evident when the search is further narrowed down to the focus of this study: training centers for psychotherapists. When the keyword “training” is added to the review search using the AND operator, the number of results from the Latin American context is reduced to just 24 studies.

Objectives

Main

To characterize the research carried out in psychology training centers linked to Latin American higher education institutions, based on the data obtained from the activities conducted in these.

Secondary

To describe the methodological particularities (objectives, design, samples, instruments, variables or categories used) of studies conducted in psychology training centers associated with Latin American higher education institutions.

To identify the findings reported in studies conducted in psychology training centers associated with Latin American higher education institutions

Methods

To create the methodological structure of the project, the SPIDER framework was used (Cooke et al., 2012). This decision was made because, although the most commonly used frameworks for systematic reviews in the health context are PICO or PICOS (Higgins et al., 2019), these are specifically designed for conducting meta-analyses, which does not align with the characteristics of the present study, which has an exploratory scope. It is worth noting that the SPIDER framework fulfills all the elements established by the PRISMA protocol for reporting systematic reviews, particularly the extension designed for conducting scoping reviews: PRISMA–ScR (Tricco et al., 2018), which will be used to structure the final document resulting from this review. In that sense, Table 1 presents the specific components that give structure to the research.

Tabla 1. Research Question Design Using the SPIDER Framework

<i>Sample</i>	Training centers for psychologists affiliated with Latin American higher education institutions
<i>Phenomenon of interest</i>	Research utilizing data obtained within the center, published in peer-reviewed indexed journals
<i>Design</i>	Any research including empirically obtained data. Namely: experimental, quasi-experimental, N=1 designs, descriptive, and correlational studies. Research following ad hoc designs will also be considered.
<i>Evaluation</i>	Characteristics and results of studies, grouped according to UNESCO codes into the following categories: professional training (5802.07), psychotherapy (6103.07), and educational methods (6104.02).
<i>Research</i>	Quantitative, qualitative, or mixed-methods studies

Inclusion criteria

- Published in peer-reviewed, indexed journals
- Reports of research findings
- Conducted using data obtained from training centers for psychologists affiliated with Latin American higher education institutions
- Published in English, Spanish, or Portuguese

Exclusion criteria

- Systematic reviews, reflective studies, or any other type of publication that is not a report of research findings
- Studies conducted with data not obtained from training centers

No maximum publication age will be established for the articles, given that there is no prior research of this nature. For this reason, the relevance of the present review lies precisely in its ability to account for what has been done so far, thus creating a baseline for future investigations.

Data Collection and Analysis

Search will be conducted in databases that include peer-reviewed publications addressing the topic of interest. Specifically:

- Web of Science (WoS) Core Collection
- Elsevier Scopus
- PubMed
- PsycINFO

In addition, databases that, although not regularly consulted in this type of review, are especially important for this study due to their focus on disseminating research conducted in Latin America and the Caribbean will also be included. These are:

- Dialnet
- SciELO

Conducting the search in Dialnet requires an additional process, as the search engine does not allow the use of very long or complex search equations. For this reason, the search for articles in this database is carried out without relying on its search engine. Instead, the OAI-PMH protocol is used to collect metadata from all articles published in Dialnet. The script retrieves records in XML format, extracting from each one the title, authors, source, and links. It uses the `resumptionToken` parameter to navigate through all result pages until the complete set of articles has been collected. Finally, the dataset is iterated over to search for the desired word combinations by applying the logical operators AND and OR.

Although the use of the *Latindex* and *Redalyc* databases was initially considered, given that they contain important information from Latin American countries, they were ultimately excluded due to issues with the functionality of their search engines, namely:

In the case of *Redalyc*, its search engine does not operate with boolean operators. Therefore, since the AND operator cannot be applied, the number of results retrieved—19,844 (most of them unrelated)—exceeds the analysis capacity of the research team.

As for *Latindex*, its search engine also does not support boolean operators; moreover, it only retrieves results when the search terms appear in the text in the exact same order in which they are entered into the search field. Consequently,

many articles potentially containing relevant information would inevitably be excluded.

Table 2 presents the search strategies used in each data base

Table 2. Search Strategies for the Different Databases

<i>WoS</i>	<p>TS=(Psychotherapy OR Psychotherapist OR "Clinical psychology " OR Psicoterapia OR Psicoterapeuta OR "Psicología clínica") AND TS=(Training OR Formation OR Entrenamiento OR Formación) AND TS= (Institution OR Clinic OR Center OR Facility OR University OR Clínica OR Centro OR Universidad OR Institución OR hospital) AND TS=(“Latin America” OR "América Latina" OR Latinoamérica OR Argentina OR Bolivia OR Brasil OR Brazil OR Chile OR Colombia OR Ecuador OR Guyana OR Paraguay OR Perú OR Surinam OR Uruguay OR Venezuela OR Belice OR Costa Rica OR "El Salvador" OR Guatemala OR Honduras OR México OR Nicaragua OR Panamá OR Cuba OR "República Dominicana" OR Haití)</p>
<i>SCOPUS</i>	<p>TITLE-ABS-KEY (Psychotherapy OR Psychotherapist OR "Clinical psychology" OR Psicoterapia OR Psicoterapeuta OR "psicología clínica") AND TITLE-ABS-KEY (Training OR Formation OR Entrenamiento OR Formación) AND TITLE-ABS-KEY (Institution OR Clinic OR Center OR Facility OR University OR Clínica OR Centro OR Universidad OR Institución OR hospital) AND TITLE-ABS-KEY (“Latin America” OR "América Latina" OR Latinoamérica OR Argentina OR Bolivia OR Brasil OR Brazil OR Chile OR Colombia OR Ecuador OR Guyana OR Paraguay OR Perú OR Surinam OR Uruguay OR Venezuela OR Belice OR "Costa Rica" OR "El Salvador" OR Guatemala OR Honduras OR México OR Nicaragua OR Panamá OR Cuba OR "República Dominicana" OR Haití)</p>
<i>PubMed</i>	<p>(Psychotherapy[tiab] OR psychotherapist[tiab] OR "clinical psychology"[tiab] OR psicoterapia[tiab] OR psicoterapeuta[tiab] OR "psicología clínica"[tiab]) AND ("Education"[Tiab] OR "Education, Professional"[Tiab] OR training[tiab] OR formation[tiab] OR entrenamiento[tiab] OR formación[tiab]) AND (Institution[tiab] OR clinic[tiab] OR center[tiab] OR facility[tiab] OR university[tiab] OR clínica[tiab] OR centro[tiab] OR universidad[tiab] OR institución[tiab] OR hospital[tiab]) AND ("Latin America"[Tiab] OR "América Latina"[tiab] OR Latinoamérica[tiab] OR Argentina[tiab] OR Bolivia[tiab] OR Brasil[tiab] OR Brazil[tiab] OR Chile[tiab] OR Colombia[tiab] OR Ecuador[tiab] OR Guyana[tiab] OR Paraguay[tiab] OR Peru[tiab] OR Surinam[tiab] OR Uruguay[tiab] OR Venezuela[tiab] OR Belice[tiab] OR "Costa Rica"[tiab] OR "El Salvador"[tiab] OR Guatemala[tiab] OR Honduras[tiab] OR Mexico[tiab] OR Nicaragua[tiab] OR Panama[tiab] OR Cuba[tiab] OR "República Dominicana"[tiab] OR Haiti[tiab])</p>
<i>PsycINFO</i>	<p>XB (psychotherapy OR psychotherapist OR "clinical psychology" OR psicoterapia OR psicoterapeuta OR "psicología clínica")</p>

<i>SciELO</i>	<p>AND XB (training OR formation OR entrenamiento OR formación) AND XB (institution OR clinic OR center OR facility OR university OR universidad OR clínica OR centro OR institución OR hospital) AND XB ("Latin America" OR "América Latina" OR Latinoamérica OR Argentina OR Bolivia OR Brasil OR Brazil OR Chile OR Colombia OR Ecuador OR Guyana OR Paraguay OR Perú OR Surinam OR Uruguay OR Venezuela OR Belice OR "Costa Rica" OR "El Salvador" OR Guatemala OR Honduras OR México OR Nicaragua OR Panamá OR Cuba OR "República Dominicana" OR Haití) ("Psychotherapy" OR "Psychotherapist" OR "Clinical psychology" OR Psicoterapia OR Psicoterapeuta OR "psicología clínica") AND ("Training" OR "Formation" OR "Entrenamiento" OR "Formación") AND ("Institution" OR "Clinic" OR "Center" OR "Facility" OR "University" OR "Clínica" OR "Centro" OR "Universidad" OR "Institución" OR "hospital") AND ("Latin america" OR "América Latina" OR "Latinoamérica" OR "Argentina" OR "Bolivia" OR "Brasil" OR "Brazil" OR "Chile" OR "Colombia" OR "Ecuador" OR "Guyana" OR "Paraguay" OR "Perú" OR "Surinam" OR "Uruguay" OR "Venezuela" OR "Belice" OR "Costa Rica" OR "El Salvador" OR "Guatemala" OR "Honduras" OR "México" OR "Nicaragua" OR "Panamá" OR "Cuba" OR "República Dominicana" OR "Haití")</p>
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Considering that not all articles specify in their title, abstract, and/or keywords the location where the study was conducted (e.g., “Chile” or “Latinoamérica”), a second search will be performed across the WoS, SCOPUS and SciELO databases. In this search, terms related to the place of origin will be excluded from the search equation, and country-based filtering will be applied directly through the search engine.

In the other databases, where affiliation can be specified within the search equation, this element will be included. In this regard, the new search equations for those databases are presented in Table 3.

Table 3. Search Strategies including author(s) filiation

<i>PubMed</i>	<p>(Psychotherapy[tiab] OR psychotherapist[tiab] OR "clinical psychology"[tiab] OR psicoterapia[tiab] OR psicoterapeuta[tiab] OR "psicología clínica"[tiab]) AND ("Education"[Tiab] OR "Education, Professional"[Tiab] OR training[tiab] OR formation[tiab] OR entrenamiento[tiab] OR formación[tiab]) AND (Institution[tiab] OR clinic[tiab] OR center[tiab] OR facility[tiab] OR university[tiab] OR clínica[tiab] OR centro[tiab] OR universidad[tiab] OR institución[tiab] OR hospital[tiab]) AND ("Latin America"[MeSH Terms] OR "South America"[MeSH Terms] OR "Central America"[MeSH Terms] OR "Caribbean Region"[MeSH Terms] OR "Argentina"[MeSH Terms] OR "Bolivia"[MeSH Terms] OR "Brazil"[MeSH Terms] OR "Chile"[MeSH Terms] OR</p>
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	"Colombia"[MeSH Terms] OR "Ecuador"[MeSH Terms] OR "Guyana"[MeSH Terms] OR "Paraguay"[MeSH Terms] OR "Peru"[MeSH Terms] OR "Suriname"[MeSH Terms] OR "Uruguay"[MeSH Terms] OR "Venezuela"[MeSH Terms] OR "Belize"[MeSH Terms] OR "Costa Rica"[MeSH Terms] OR "El Salvador"[MeSH Terms] OR "Guatemala"[MeSH Terms] OR "Honduras"[MeSH Terms] OR "Mexico"[MeSH Terms] OR "Nicaragua"[MeSH Terms] OR "Panama"[MeSH Terms] OR "Cuba"[MeSH Terms] OR "Dominican Republic"[MeSH Terms] OR "Haiti"[MeSH Terms])
<i>PsycINFO</i>	XB (psychotherapy OR psychotherapist OR "clinical psychology" OR psicoterapia OR psicoterapeuta OR "psicología clínica") AND XB (training OR formation OR entrenamiento OR formación) AND XB (institution OR clinic OR center OR facility OR university OR universidad OR clínica OR centro OR institución OR hospital) AND AD ("Latin America" OR "América Latina" OR Latinoamérica OR Argentina OR Bolivia OR Brasil OR Brazil OR Chile OR Colombia OR Ecuador OR Guyana OR Paraguay OR Perú OR Surinam OR Uruguay OR Venezuela OR Belice OR "Costa Rica" OR "El Salvador" OR Guatemala OR Honduras OR México OR Nicaragua OR Panamá OR Cuba OR "República Dominicana" OR Haití)

Selection process

The documents retrieved through the search -carried out by two of the authors and two research assistants- will be stored in the Zotero reference manager. Once duplicates are removed, the remaining documents will be reviewed by the first, second, and third researchers Following the inclusion and exclusion criteria defined by the SPIDER framework, they will determine which articles are to be included or excluded, recording the reason for each exclusion made. In case of any disagreement among the reviewers, the fourth author will resolve the conflict.

Data extraction

Once this review is completed, the selected articles will be coded in a data sheet according to the following criteria: Title, bibliographic reference, country, objectives, design, sample, variables for quantitative studies and categories for qualitative studies, results and conclusions.

Risk of Bias Assessment

Three members of the research team will individually review all selected studies in order to assess the quality of the articles and the risk of bias. For this purpose, the McMaster Critical Review Forms for Quantitative and Qualitative Studies will be used (Law et al., 1998; Letts et al., 2007). For each article, the number of positively scored criteria will be calculated. The results of this assessment will be systematized in a data sheet created for this purpose.

Data analysis

Once all the information has been coded, the data will be analysed by all the authors. This analysis will aim to reveal trends in all the categories used for the articles coding and the quality of the investigations; or any other pattern that may emerge from the reviewed articles.

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