The role of therapeutic alliance in therapy outcomes for youth in residential care

Effectiveness of Psychotherapy
- Children & adolescents
  - Casey & Berman (1985)
  - Weisz, Weiss, Alicke, & Klotz (1987)
  - Kazdin, Bass, Ayers, & Rodgers (1990)
  - Weisz, Weiss, Han, Granger, & Morton (1995)

Dodo Bird
- Dodo bird
  - Psychotherapy equivalence for adults (Wampold, 2001)
  - Evidence for equivalence for children/adolescents in less clear (Weisz et al., 1995)

Common Factors & Therapeutic Alliance
- Common Factors (Lambert, 1992)
  - Client, Relationship, Placebo
- Therapeutic Alliance (TA)
  - Bordin (1979): Bonds, agreement on goals, and collaboration on tasks
- TA & Outcome
  - Martin et al. (2000)
  - Early alliance seems to be most predictive

TA in Child Therapy
- Virtual absence of alliance studies in children and adolescents
  - TA conceptually may not fit with child/adolescent therapy
  - Children are not self-referred
  - Shirk & Karver (2003) meta-analysis

Current Study
- Outcomes of children in residential care referred for therapy
- Investigate the effects of therapeutic alliance on outcomes
Overview of Boys Town

- Highly developed social skills curriculum
- Motivation system
- Self-government
- Emphasis on normalization
- Family-Teachers are the active treatment
- De-emphasizes mental illness
- Behaviorally-oriented model emphasizes critical elements of most parent training programs

Therapy

Referral
- No formal process
- Predoctoral psychology interns attended daily/weekly MDT meetings
- In a few instances, youth themselves would request to see a therapist
- Phone calls, hallway conversations, back-alley deals

Therapy

Clients
- N = 79
- Age: 15.7
- Gender: 53% male; 47% female
- Ethnicity: 54% Caucasian; 20% African American; 8% Hispanic
- LOS: 273 days (at time of referral)
- Referral Problem: Often nonspecific, ill-defined:
  - Externalizing behavior problems
  - Affective problems
  - Peer Problems
  - School problems
  - Sexual issues
  - Clinical exotica

Therapist
- N=7
  - 7 predoctoral interns
  - 5 School Psychology interns, 2 clinical
  - 5 Ph.D., 2 Psy.D.
  - All from APA approved programs
  - Orientation: 5 CBT; 1 Behavioral; 1 Dynamic

Process
- In the overwhelming majority of cases, type of therapy was not specified by supervisors, though elements of therapy was
- Therapy ranged from manualized to dynamic, but typically was nonspecific with EST treatment elements embedded throughout (i.e., somewhere between “therapy as usual” and university-based therapy)
- Weekly supervision with Ph.D. psychologist
- Weekly supervision with LMHP
- Twice weekly group supervision

Outcome Measures
- Symptom Screener (Doucette & Bickman, 2000)
  - 35 items
  - 4 choice Likert response set (Never–Almost Always)
- Youth, Clinician, Clinical Supervisor, and Family Teacher forms
- 1 week recall for Youth/Clinicians; month recall for supervisors and Family Teachers
- Internalizing (16 items), Externalizing (19 items), Total

Presented at the 17th Annual RTC Conference, Tampa FL, 2/29 – 3/3 2004. For more information, contact Michael Handwerk: handwerkm@boystown.org
Therapy

- Daily Incident Report (Handwerk et al, 2000)
  - Total
  - High Risk
  - Aggression
  - Lethality
  - Problem Behavior
  - School Behavior
  - Sexual Issues

Therapeutic Alliance Measure

- Working Relationship Scale (Doucette & Bickman, 2000)
  - 35 items
  - 4 choice Likert response set (SD-SA)
  - Youth & Clinician versions
  - Resistance (10-30), Liking/Acceptance (10-30), Working/Collaboration (12-36)

Number of Therapy Sessions

<table>
<thead>
<tr>
<th># of Sessions</th>
<th>Percentage</th>
<th>Cum. %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>2-4</td>
<td>9</td>
<td>14</td>
</tr>
<tr>
<td>5-7</td>
<td>18</td>
<td>32</td>
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<td>8-10</td>
<td>21</td>
<td>53</td>
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<tr>
<td>11-13</td>
<td>8</td>
<td>61</td>
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<tr>
<td>14-16</td>
<td>7</td>
<td>68</td>
</tr>
<tr>
<td>17-19</td>
<td>9</td>
<td>77</td>
</tr>
<tr>
<td>20-22</td>
<td>8</td>
<td>85</td>
</tr>
<tr>
<td>&gt;23</td>
<td>15</td>
<td>100</td>
</tr>
</tbody>
</table>

Results: Do youth improve?

- Depends:
  - Who you ask
  - When you ask
  - What outcome data used

Symptom Screener Subscales: Youth

First 10 Therapy Sessions

Symptom Screener Subscales: Clinician

First 10 Therapy Sessions

Source: Symptom Screener
Completed by Youth After Each Session

Source: Symptom Screener
Completed by Clinician After Each Session

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**Problem Behaviors**

Youth With Complete Data

**School Problems**

Youth With Complete Data

**Sexual Issues**

Youth With Complete Data

**Substance Abuse**

Youth With Complete Data

**Total Incidents: Weekly**

**Length of Therapy & Outcome**

- # of therapy sessions correlated .26 with pre-post DIR change scores
- # of therapy sessions correlated .24 with Youth pre-post SS change scores
Demographic Variables & Outcome
- No significant difference in LOT, SS first, SS last, or SS change or DIR Change
  - Gender
  - Ethnicity

Do Youth Improve?
- Youth report significant and clinically meaningful improvement
- Clinicians report significant improvement, probably not clinically meaningful
- Family-Teachers report few significant reductions in symptoms, and probably not clinically meaningful reductions
- Clinical Supervisors report significant improvements on Total and Internalizing symptoms, but probably not clinically meaningful reductions
- Objective data indicate significant improvement in several areas while youth are in therapy, but gains are lost at follow-up

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Objective data indicate significant improvement in several areas while youth are in therapy, but gains are lost at follow-up

Youth & Clinician TA

Correlations at first therapy session

<table>
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<tr>
<th>WRS-Y</th>
<th>Resistance</th>
<th>Liking/Accept</th>
<th>Work/Coll</th>
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<td>Resistance</td>
<td>.14</td>
<td>.30</td>
<td>.28</td>
</tr>
<tr>
<td>Liking/Accept</td>
<td>.23</td>
<td>.40</td>
<td>.39</td>
</tr>
<tr>
<td>Work/Coll</td>
<td>.29</td>
<td>.33</td>
<td>.29</td>
</tr>
</tbody>
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Correlations for Total TA first and last session

| Youth         | .25       |
| Therapist     | .57       |

WRS Subscales: Youth
First 10 Therapy Sessions

WRS Subscales: Clinician
First 10 Therapy Sessions

Youth & Clinician TA

Correlations at first therapy session

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<td>.29</td>
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| Therapist     | .57       |

TA Results

- Low to moderate agreement between clinicians and youth
- Youth reported significant improvement on the Total & Working/Collaboration subscale (first-last) (average 3-5 points)
- Clinician ratings showed significant improvement on the Total, Working/Collaboration and the Liking/Acceptance subscales (first-last) (average of 4-6 points)
- Modest relationship between first and last session TA for youth
### Relationship Between TA & Outcome: Youth TA

<table>
<thead>
<tr>
<th>MR Change Score</th>
<th>Youth SS Change Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth TA Total-First</td>
<td>-0.12</td>
</tr>
<tr>
<td>Youth TA Total-Last</td>
<td>-0.03</td>
</tr>
<tr>
<td>Youth TA W/C-First</td>
<td>-0.07</td>
</tr>
<tr>
<td>Youth TA W/C-Last</td>
<td>-0.19</td>
</tr>
<tr>
<td>Youth TA Resist-First</td>
<td>0.01</td>
</tr>
<tr>
<td>Youth TA Resist-Last</td>
<td>0.28*</td>
</tr>
<tr>
<td>Youth TA Liking-First</td>
<td>-0.13</td>
</tr>
<tr>
<td>Youth TA Liking-Last</td>
<td>-0.18</td>
</tr>
</tbody>
</table>

### Relationship Between TA & Outcome: Therapist TA

<table>
<thead>
<tr>
<th>MR Change Score</th>
<th>Youth SS Change Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Therapist TA W/C-First</td>
<td>-0.03</td>
</tr>
<tr>
<td>Therapist TA W/C-Last</td>
<td>-0.05</td>
</tr>
<tr>
<td>Therapist TA Resist-First</td>
<td>-0.03</td>
</tr>
<tr>
<td>Therapist TA Resist-Last</td>
<td>0.04</td>
</tr>
<tr>
<td>Therapist TA Liking-First</td>
<td>-0.02</td>
</tr>
<tr>
<td>Therapist TA Liking-Last</td>
<td>-0.02</td>
</tr>
<tr>
<td>Therapist TA Total-First</td>
<td>-0.04</td>
</tr>
<tr>
<td>Therapist TA Total-Last</td>
<td>-0.03</td>
</tr>
</tbody>
</table>

### Relationship between TA & outcome

- **Youth-rated TA:**
  - Only 1 of the 3 WRS subscales or Total (first or last) were significantly correlated to either youth or clinician SS change scores or the DIR change score.
- **Clinician-rated TA:**
  - None of the 3 WRS subscales or Total (first or last) were significantly correlated with youth or clinician SS change scores or the DIR change score.

### Conclusions

- **Outcomes**:
  - Therapy can be effective adjunctive form of intervention.
  - But need integration of therapeutic goals, activities, exercises within the family/residential context.

- **TA/Relationship**:
  - We can be insensitive, uncaring with adolescent clients.
  - No measure of specific techniques or therapist variables utilized (we don’t know what went on the therapy room).
  - Why was TA not related to outcome?
    - Our correlations were not out of line with those found by others, suggesting that perhaps other factors are important.
    - Restriction of range issues
      - SS screener
      - TA alliance
    - Unique setting (many caring adults) and clients
    - TA may be more important between therapist and caretaker.

- **Methodological**:
  - Although having youth complete forms every visit seems ideal, youth rated completing the SS & TA forms as cumbersome.
  - Considering methods to provide clinicians with feedback on the TA scale.
## Opinion survey regarding outcome and TA forms

<table>
<thead>
<tr>
<th>Item</th>
<th>SD</th>
<th>D</th>
<th>A</th>
<th>LA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Important my therapist to know how I feel</td>
<td>3</td>
<td>14</td>
<td>46</td>
<td>37</td>
</tr>
<tr>
<td>Responses are private</td>
<td>3</td>
<td>11</td>
<td>43</td>
<td>43</td>
</tr>
<tr>
<td>I read every question carefully</td>
<td>12</td>
<td>15</td>
<td>41</td>
<td>32</td>
</tr>
<tr>
<td>Forms are easy to read</td>
<td>14</td>
<td>9</td>
<td>37</td>
<td>40</td>
</tr>
<tr>
<td>It doesn’t take long to fill out</td>
<td>9</td>
<td>21</td>
<td>24</td>
<td>26</td>
</tr>
<tr>
<td>Important questions not asked about relationship</td>
<td>43</td>
<td>40</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>Important questions not asked about behavior</td>
<td>9</td>
<td>33</td>
<td>6</td>
<td></td>
</tr>
<tr>
<td>Forms are a waste of time</td>
<td>15</td>
<td>18</td>
<td>50</td>
<td></td>
</tr>
<tr>
<td>Process for completing is sample</td>
<td>14</td>
<td>20</td>
<td>37</td>
<td>29</td>
</tr>
<tr>
<td>I was honest in outcomes</td>
<td>9</td>
<td>11</td>
<td>34</td>
<td>46</td>
</tr>
<tr>
<td>Embarrassing</td>
<td>32</td>
<td>47</td>
<td>12</td>
<td>8</td>
</tr>
<tr>
<td>Filling out forms helped therapy</td>
<td>37</td>
<td>29</td>
<td>26</td>
<td>9</td>
</tr>
</tbody>
</table>