

Using research to strengthen the working alliance and reduce therapy drop out

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Therapists are often not very good at accurately identifying the strength of the working alliance

What do clients think helps strengthen the alliance?

Positive regard:

- Greeting the client with a smile
 - Making encouraging statements
 - Making positive comments about the client
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- In the Duff and Bedi (2010) study, these three behaviours alone accounted for 62% of the variance in alliance scores

Incorporating client preferences strengthens alliance

Age/ gender etc of therapist

Type of therapy approach

Nature of therapy process (in-session tasks)

Clients who have their preferences attended to are half as likely to drop out of therapy!

Rapid allocation reduces likelihood of drop out

Premature termination/ therapy drop out

A major problem in psychotherapy (17%-47%)

Some instances of drop out are because client has got what they want from therapy

Some instances are unavoidable e.g. sudden change in circumstances

How do you feel when clients suddenly end without warning? What goes through your mind?

Therapist factors influencing drop out

Therapists tend to (inaccurately) ascribe drop out to client factors and often do not see their role in treatment failure (e.g. interpretation)

Therapist hostility, not providing client with information, low support/ warmth, lack of flexibility in approach, lack of attention to early symptom relief

Strategy 1: Role induction/ pre therapy preparation

- Teach clients how to be clients!
- Provide information about the rationale and nature of therapy and how you work
- Anticipate and provide information about common problems (e.g. feeling embarrassed or inhibited or dealing with anger towards therapist)

Strategy 2: Collaborative treatment rationale

- Ask the client for their thoughts about the nature and origin of their problems and the best way to address these
- Explain your thinking about how the client has got to be in the situation they are in (origin and maintenance of problems)
- Explain your rationale and outline of therapy

Strategy 3: Start with a time-limited short term contract

- Begin therapy by agreeing a relatively short period of time with your client (which can be reviewed and renegotiated)
- 16-20 weeks is a good length of time for this (around 50% of clients will have got what they want by then)
- Review progress at week 4

Strategy 4: Consider appointment reminders

Text or email reminders of appointments can be highly effective

Many psychodynamically oriented therapists resist this idea, although it can be argued that regular attendance is more important than clever interpretations about client resistance

- **Strategy 5: Enhance motivation**
- Support the client's sense of hope that therapy will benefit
- Ensure that the client is willing to put in effort and make a sacrifice
- Check that the client knows how they will benefit from making changes
- Work with the client's ambivalence and fear of change

Strategy 6: Actively elicit and respond to client feedback

Use post-session feedback measures routinely and adjust the therapy according to client feedback

Use outcome measures regularly throughout therapy and pay attention to symptomatic improvement within the first four sessions

Strategy 7: Facilitate affect expression

Help clients to express difficult / negative feelings, including doubts and negative feelings about therapy

Also help clients to identify and express positive emotions. Be willing to laugh in sessions

Strategy 8: Pay attention to alliance ruptures

Develop your ability to recognise and repair alliance ruptures

Thank you!

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