



The Value of the Therapeutic Relationship in Clinical Practice



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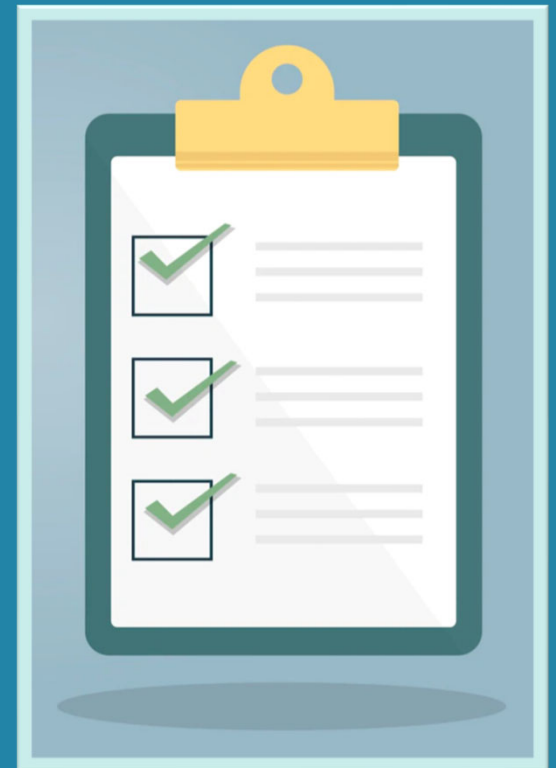
Disclosures

I have no actual or potential conflict of interest in relation to this program/presentation



The Value of the Therapeutic Relationship: Learning Objectives

- Attendees will be able to name and describe the key characteristics of a quality therapeutic relationship
- Attendees will be able to list the fundamental ethical concepts that underlie a quality therapeutic alliance.
- Attendees will be able to name & describe strategies that enhance communication and connection in the clinical relationship.



CRCC Code of Ethics

Sections Addressed Today:

- A.1: Counseling Relationship: Welfare of those served
- A.3: Counseling Relationship: Client Rights
- A.5: Counseling Relationship: Roles and Relationships with Clients
- A.4. Avoiding Value Imposition
- B.1. Respecting Client Rights
- C.1. Advocacy
- D.1. Professional Competence
- D.2. Cultural Competence/Diversity
- G.1: Informed consent



Why Talk, “The Therapeutic Relationship”?

- We KNOW (feel, experienced):
- A quality relationship has the power to promote positive change, growth, healing
- Conduit, Space, Pathway

*Who has impacted you in life?
What stands out?*

- Knowledge of this relationship → Underlies Why We Do, What We Do
- Research agrees: Influences Outcomes, Engagement, Interaction in Treatment



What Does the Research Say?



“Research shows that the therapeutic relationship is one of the strongest predictors of successful treatment**”

“The quality of the therapeutic relationship has been found to predict treatment compliance and outcomes across a range of client/patient diagnoses and treatment settings**”

“Research on the power of the therapeutic relationship has accumulated over 1,000 findings that include its ability to predict adherence, compliance, concordance, and outcomes across a wide range of diagnoses and treatment settings”*

*Orlinsky, Ronnestad, & Willutski (2004) **Hall et al (2010)

Also Known As..



“The Therapeutic Alliance”
“The Therapeutic Use of Self”
“The Helping Alliance”
“The Working Alliance”
“The Clinical Relationship”

Defining, “The Therapeutic Relationship”

- The ongoing relationship between:
 - A clinician and...
 - A person in treatment
- Purpose → to support the client’s therapeutic / treatment goals
- A helping relationship
- A resource to the client
- A relationship of service

(Medical Dictionary, 2009)



Describing The Therapeutic Alliance...

“...an interactive relationship with a patient and family that is caring, clear, boundaried, positive, and professional...” (Ridling, Lewis-Newby & Lindsey, 2011)

The collaborative and affective bond between a healthcare professional and a client or patient (Garske and Davis, 2000)

It is the means by which a therapist and a client hope to engage with each other and effect beneficial change in the client



Person-Centered Approach



- Focus is on the client
 - Obvious?... Not always
- Fosters individual empowerment
- Encourages individual ownership of one's situation
- Promotes client as an active participant of their own care
- Values & Promotes Autonomy

A Closer Look: Therapeutic Relationship Components

- Professional & appropriate
 - Boundaries
 - Self-Awareness
- Purposeful & Goal-Oriented
- Power Dynamics
 - Awareness of
 - Understanding
 - Acknowledgement



The Therapeutic Relationship

THEMES in the Literature:



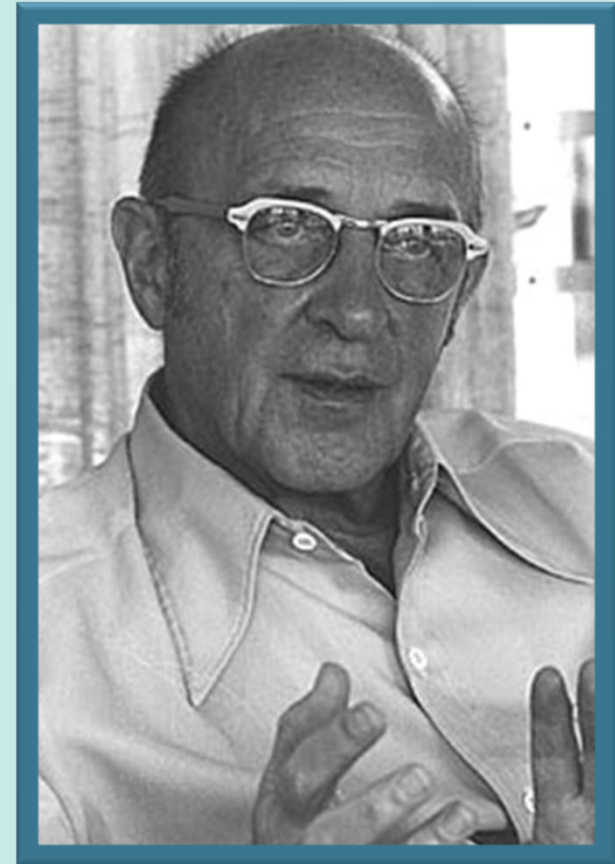
1. Collaborative in nature
2. The affective bond between clinician & person in treatment
3. Agreement: Agreed upon plan, goals, tasks, etc.

Carl Rogers (1902 – 1987)

- Psychologist
- Founder in field of *Humanistic Psychology*
- Founder, “Client-Centered” approach

Said, a quality therapeutic relationship has these 3 critical “Active Components”...

1. Empathy
2. Congruence
3. Unconditional Positive Regard



Rogers (1965)

Congruence & Collaboration

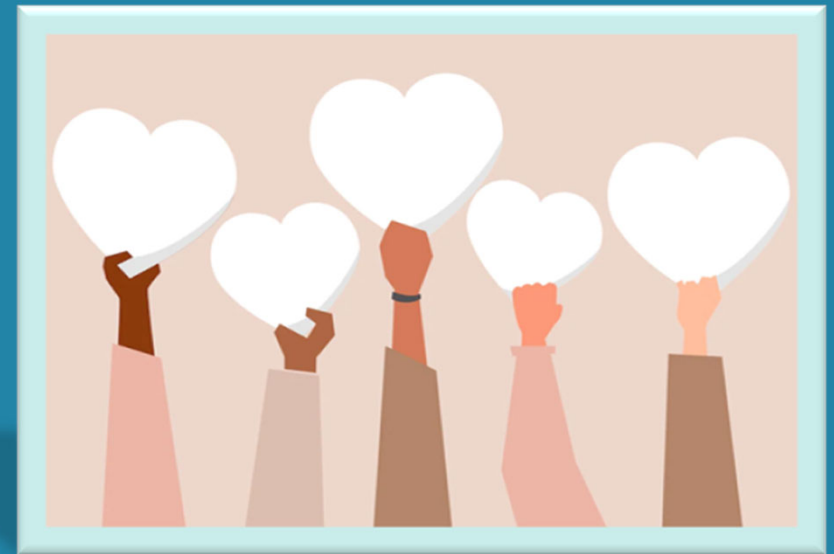
“An accurate matching of a person’s experience...”

- “In harmony with”
- Coinciding with...
- Discussed & Agreed Upon Goals, Plans...
- “On the same team”
- Shared “work”
- Shared Decision Making



Building a Bond

- **Rapport: Vital component in quality relationships**
 - Understanding
 - Care, concern
 - Kindness
 - Quality Communication
- Empathy
- Compassion
- Respect
- Authenticity
- Acceptance
- Nonjudgement
- Caring



Trust & Safety

- A SAFE place/space is critical
 - History of trauma?
- Trust
- Consistency
- Reliability
- Something & someone to “Count on”



Hamovitch, Choy-Brown & Stanhope (2018); Baier, Kline & Feeny (2020)

Attunement

- The reactiveness we have to another person
- Being “in tune with”



Hamovitch, Choy-Brown & Stanhope (2018); Baier, Kline & Feeny (2020)

Attunement

“When we attune with others, we allow our own internal state to shift, to come to resonate with the inner world of another. This resonance is at the heart of the important sense of “feeling felt” that emerges in close relationships.”

- *Dr. Dan Siegel MD; clinical professor of psychiatry at the UCLA School of Medicine and Executive Director of the Mindsight Institute*

A Bit of Data...

The Value of the Therapeutic Relationship

There is consistent evidence that the quality of the therapeutic alliance is linked to the success of psychotherapeutic treatment across a broad spectrum of types of patients, treatment modalities used, presenting problems, contexts, and measurements***

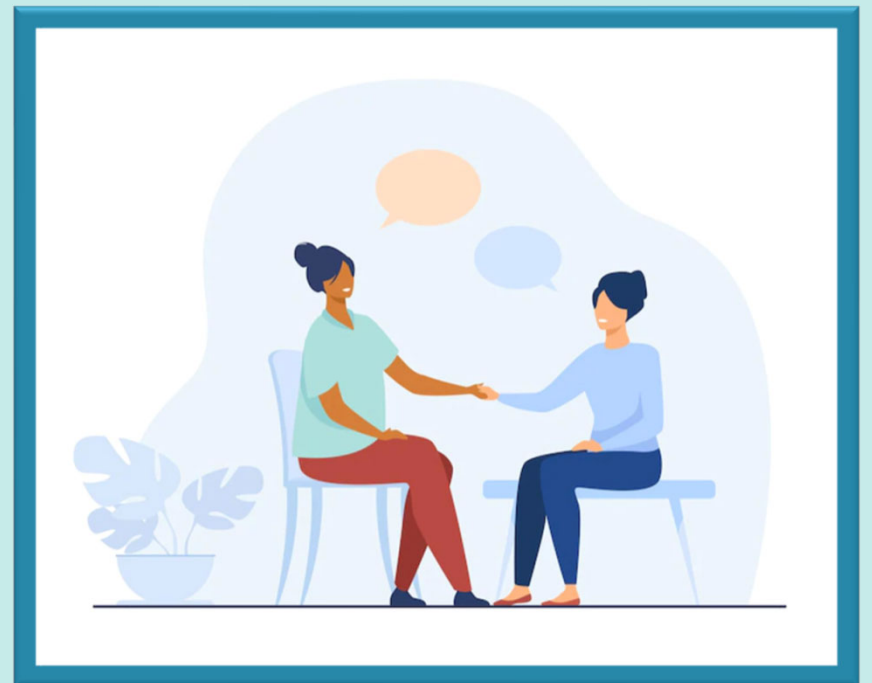


“...Studies have linked strong therapeutic relationships with improving medication adherence, treatment retention, patient activation—or readiness to take on a role in one’s own mental health, and mood while reducing distress*”



*Flückiger, Del Re, Wampold & Horvath (2018)

Research tells us that the relationship between the therapist and client is a key factor in the success and helpfulness of therapy, regardless of the theoretical orientation**



Ardito & Rabellion (2011) *Stubbe D. E. (2018)

The RESEARCH, cont...



The therapeutic alliance is one of the most frequently researched elements contributing to the effectiveness of therapy...

...It functions as a microcosm in which clients are able to work through deep-seated issues, build trust, take risks, and learn how to relate in healthy ways*

What Can We Do?...



**How to Build a
Quality
Therapeutic
Relationship...**

Notes on a Quality Therapeutic Relationship:

- Ongoing
 - Process
 - Nurtured
 - Fostered over time
- Unique
 - Every individual
 - Every Situation



Person-Centered Treatment

Asking Ourselves Throughout the Treatment Process...

- Is my client informed of this? Aware of this?
- Are they in agreement with this plan?
- Does this support my client's stated goals? Values? Preferences?
- Is this supporting the best interests of my client? (or is it supporting the best interest of someone / something else?)
- Is this in alignment with my clients' interests/ needs?



EMPATHY

/empəTHē/

noun

the ability to understand and share the feelings of another.



Brene Brown on: “Empathy”



<https://brenebrown.com/videos/rsa-short-empathy/>

<https://www.youtube.com/watch?v=1Evwgu369Jw>

Empathy Attributes

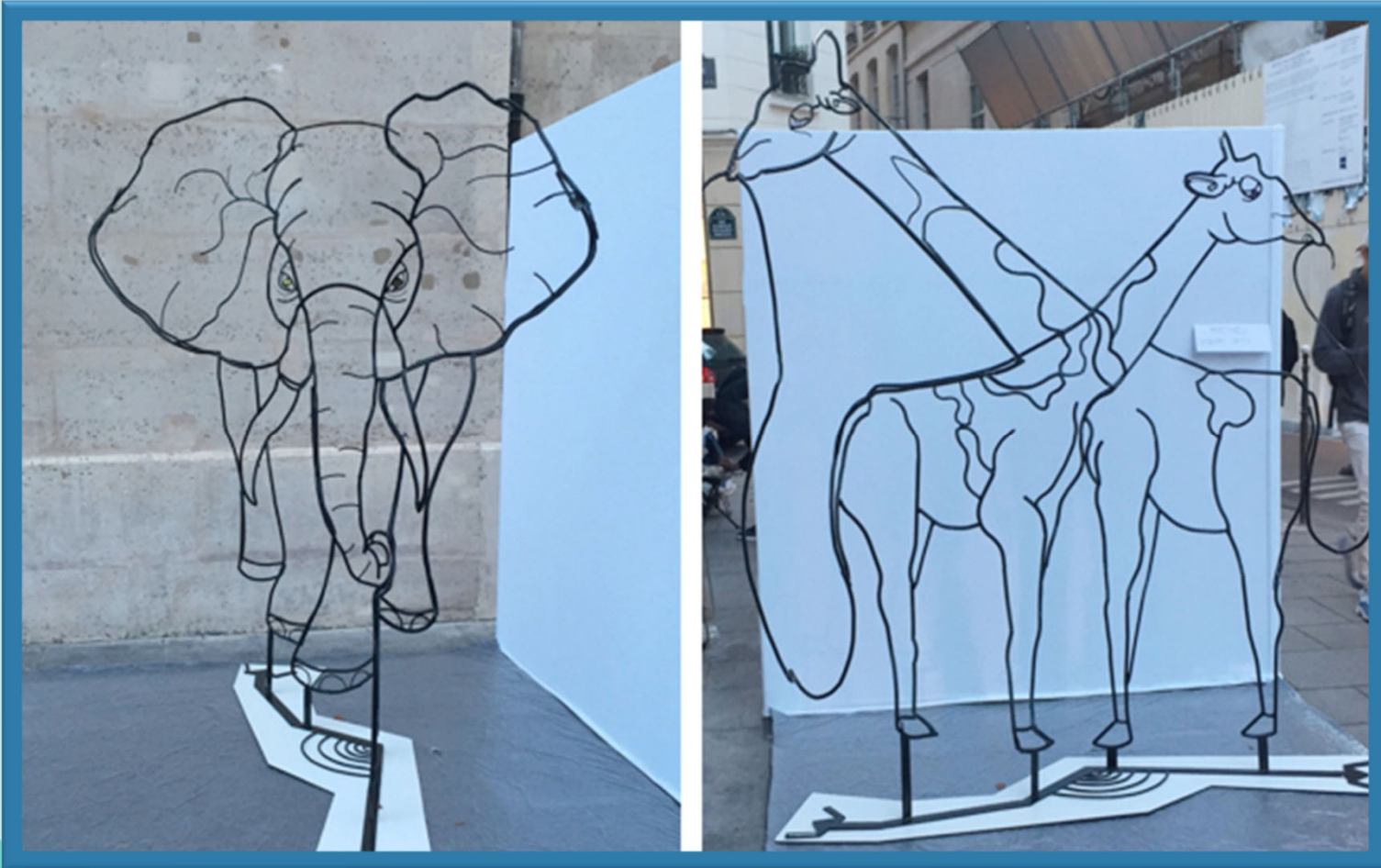
From Nursing Scholar, Theresa Wiseman

1. Perspective taking
2. Nonjudgement
3. To acknowledge, understand another's feelings
4. To communicate that understanding of that person's feelings





Perspective-Taking



Motivational Interviewing

A collaborative, person-centered form of guiding to elicit and strengthen motivation for change



- Focuses on exploring and resolving ambivalence
- Centers on motivational processes within an individual that facilitates change
- Does not impose change
- Internally-driven method
- Supports change in a manner congruent with the individual's values

Motivational Interviewing

- Partnership / Collaborative
- Nonjudgement
- Acceptance
- Compassion
- Empathy



“Stages of Change”

Prochaska & DiClemente (1984)

PRE-CONTEMPLATION

Build awareness for my need to change

CONTEMPLATION

Increase my pros for change and decrease my cons

PREPARATION

Commit and plan for change

ACTION

Implement and revise my plan as needed

MAINTENANCE

Integrate change into my lifestyle



Zimmerman, Olsen, Bosworth, 2000

“Meet them where they’re at” (Where else??)



- Assessment
 - *Where ARE they at?*
- Attunement
- Non-Judgement
- Kindness
- Compassion
- Empathy
- Self-Awareness
- Acceptance
- Validation

Motivational Interviewing: OARS

O PEN-ENDED QUESTIONS

A FFIRMATIONS

R EFLECTIONS

S UMMARIES



Open-Ended Questions



- Do you need help with ____?
- How can I help you with ____?

- Do you want things to be different?
- How would you like things to be different?

- Have you tried to make a change before?
- What have you tried before to make a change?

- Do you want to do _____ next?
- What do you want to do next?

Open-Ended Questions

Help me understand ___?

What are the good things about ___? and what are the less good things about it?

When would you be most likely to ___?

What do you think you will lose if you give up ___?



Affirmations

- Using affirming responses / statements
- Build confidence
- Increase Self-Efficacy



How to Use...

- Emphasize a strength
- Notice & appreciate a positive action
- Comment positively on an attribute
- A statement of appreciation
- Reinforce a positive behavior
- A compliment
- An expression of hope, caring, support

Statements of Affirmation

“I appreciate that you are willing to meet with me today”

“You are clearly a very resourceful person”

“You handled yourself really well in that situation”

“That’s a good suggestion”

“That really shows courage and strength when you...”

“I appreciate your openness and honesty today”

“I like the way you said that”

“You’re a strong person”

“I am impressed by how you were able to focus on the positive in that very challenging situation”

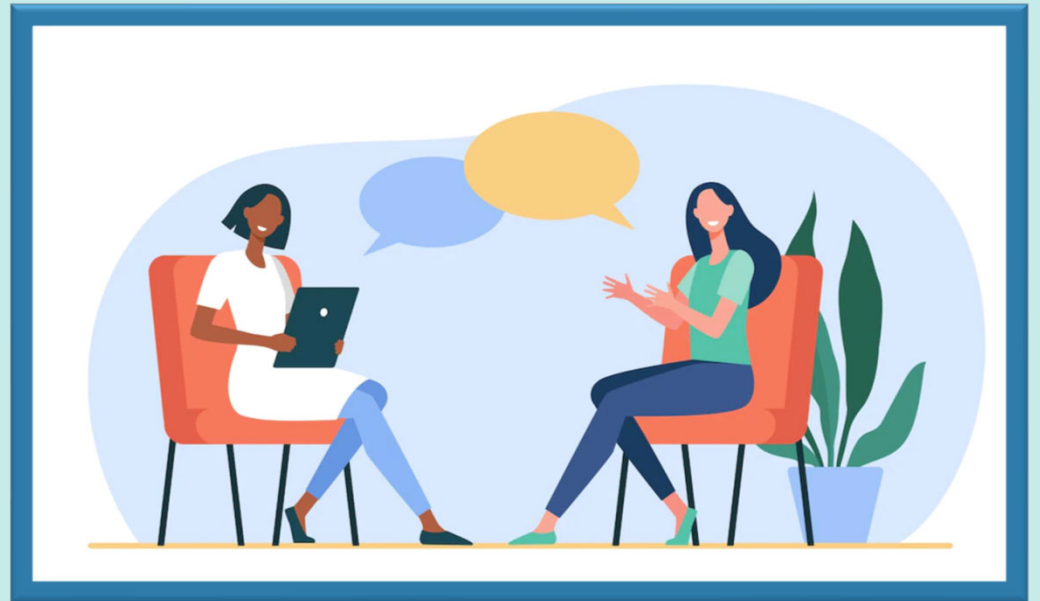
Reflections & Reflective Listening




- Active Listening
 - Attunement
 - Attending
- Seeking to understand
- Determining the meaning of what is being said
- Reflecting back in your own words
- Seeking confirmation

Reflections

- **Serves to deepen your understanding**
 - Deepen the connection
 - Enhance the therapeutic relationship
- **Helps avoid harmful assumptions & misunderstandings**
- **Provides validation**
- **Builds trust**
- **Fosters rapport building**





“Most people do not listen with the
intent to understand; they listen
with the intent to reply.”

Stephen R. Covey

TheIStudio.com

Reflections

“I don’t want to take these pills. I ought to be able to handle this on my own.”
“You don’t want to rely on a drug to feel well. It seems to you like a crutch.”



“It seems as though....”
“I get a sense that...”
“It sounds like...”
“I hear you saying that...”

Summarizing

- Drawing together the content of what was said, and reflecting it back
- Helpful at pivotal points in conversations in treatment
 - After an experience in shared
 - When concluding a session
- Shows attentiveness
- Fosters trust, safety
- Builds rapport
- Shows your engagement
- Can be used to summarize progress or growth



Summarizing



“Let me stop and summarize what we’ve just talked about. You’re not sure that you want to be here today and you really only came because your partner insisted on it...

At the same time, you’ve had some nagging thoughts of your own about what’s been happening, including how much you’ve been drinking recently, the change in your physical health and your missed work. Did I miss anything?

I’m wondering what you make of all those things.”

Motivational Interviewing: DARES

DEVELOP DISCREPENCY

AVOID ARGUMENTATION

ROLL WITH RESISTANCE

EXPRESS EMPATHY

SUPPORT SELF-EFFICACY



Developing Discrepancy

- Listen for & bring attention to any discrepancies we hear
 - Between client's "status quo" and stated goals or values, etc...
 - Between words and behaviors
- Gentle confrontation
- Direct, honest, nonjudgmental
- Non-shaming
- Not controlling

"I hear you saying that you would like for this to happen, yet on the other hand you are engaging in this behavior that doesn't 'line up' with that goal"

"Help me understand how these things fit together?"



Rolling with Resistance



- Resistance is what happens when we expect or push for change when the client is not ready for that change
- It is a defensiveness (whether conscious or unconscious) against change
- When resistance emerges, there are good reasons the person is not ready to change
- The reasons may not be clear to us (or even to the resistant person), but they exist
- Ignoring resistance &/or fighting with resistance gets us nowhere

Rolling with Resistance



- Resistance to change is natural, expected
- Rolling with resistance enhances the therapeutic bond
 - Whereas fighting resistance tends to harm the bond
- Must have awareness of when resistance arises in treatment
 - What does it look like?

What To Do...

- Acknowledging & validating the client's experience
- Using empathy, compassion and understanding
- Non-judgement of their perspective
- Promotes trust, safety in the relationship (versus fear, shame, resentment)

Supporting Self-Efficacy

- Refers to building an individual's confidence in their abilities to change, grow, heal, etc.
- Empowering our clients
- Eliciting and providing HOPE
- Using encouragement & validation
- Strengthens the therapeutic relationship



Motivational Interviewing Tools for the Therapeutic Alliance

- Asking Permission
 - Autonomy
 - Empowerment
 - Respect
- Giving all the information
- Ensuring comprehension



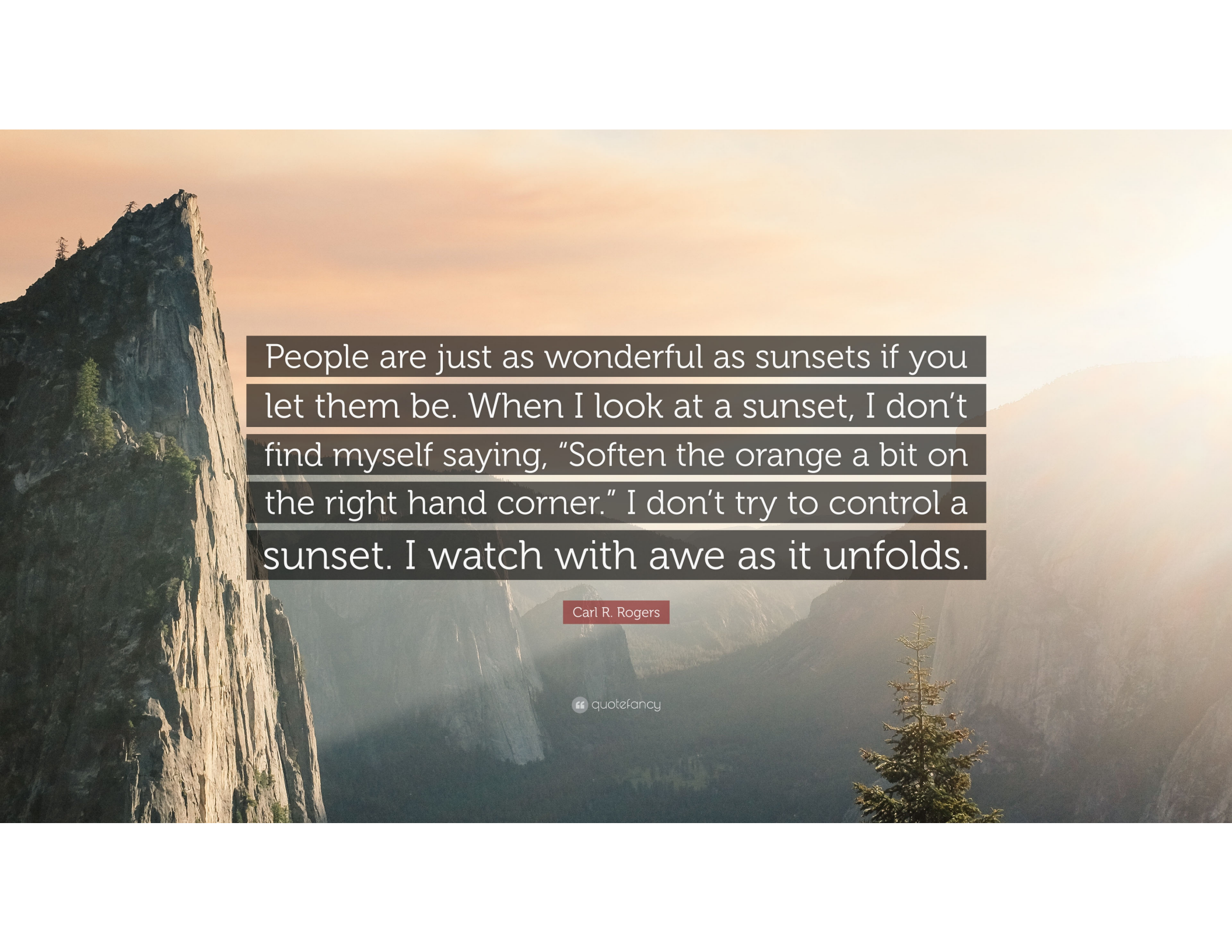
Unconditional Positive Regard



The curious paradox is that when I accept myself just as I am, then I can change.

Carl Rogers

- Carl Rogers, Humanistic Psychologist (1902 – 1987)
- Focused on the “Therapeutic Relationship”
- Developed “Client Centered Therapy”
- First to use term “client” vs “patient”
- Providing unconditional acceptance and support of another person, without any judgement, and regardless of what they say or do
- Showing unconditional respect and value for our client(s)
- Distinguished from always agreeing with or condoning

A scenic view of a mountain peak at sunset. The sky is a mix of orange, yellow, and light blue. The mountain is dark and rocky, with some greenery on the lower slopes. The quote is overlaid on a dark, semi-transparent background.

People are just as wonderful as sunsets if you let them be. When I look at a sunset, I don't find myself saying, "Soften the orange a bit on the right hand corner." I don't try to control a sunset. I watch with awe as it unfolds.

Carl R. Rogers

 quotefancy

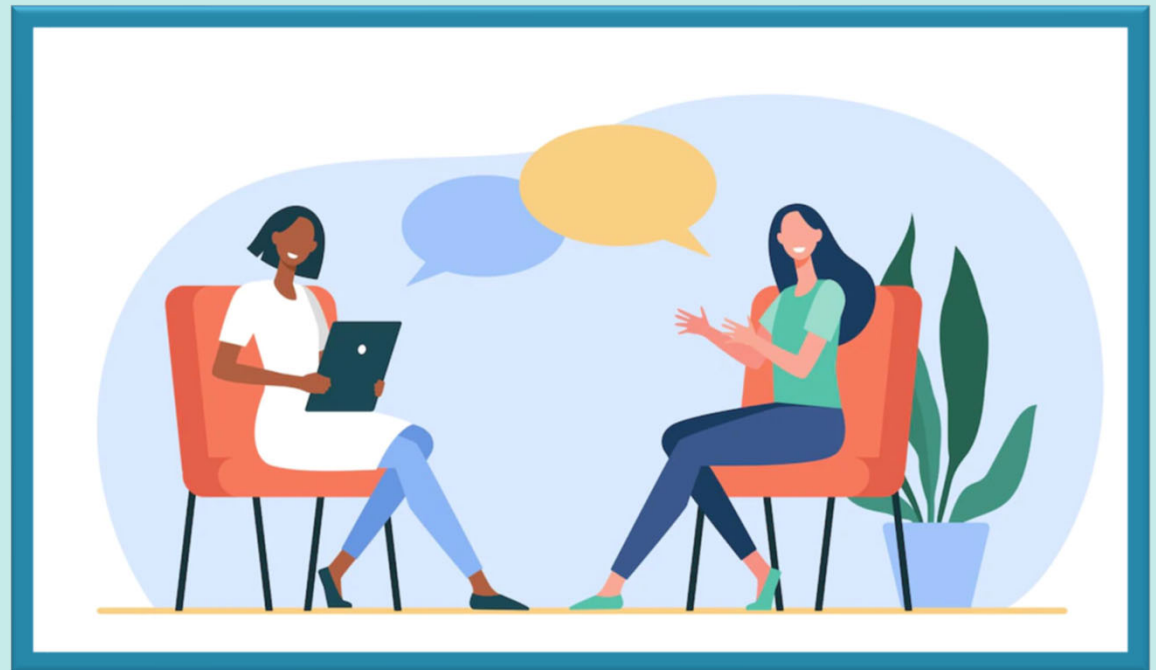
Self-Awareness – A Critical Component

- Aware of own beliefs, perspectives
- Unconscious bias
- Cultural competence
- Empathy
- Perspective taking
- Transference – be aware



Communication

- Reflective listening
- Attunement
- Advocacy
- Non-verbal communication
- Talk about the **PROCESS** of Treatment
- Informed Consent
- Clarity
- Comprehension



Ongoing Communication & Collaboration



- Regularly Encourage & Elicit Feedback
- Review & Discuss Ongoing
- Communicate your appreciation & value of their honest, input and feedback, whether positive or negative

Review / Discuss Ongoing:

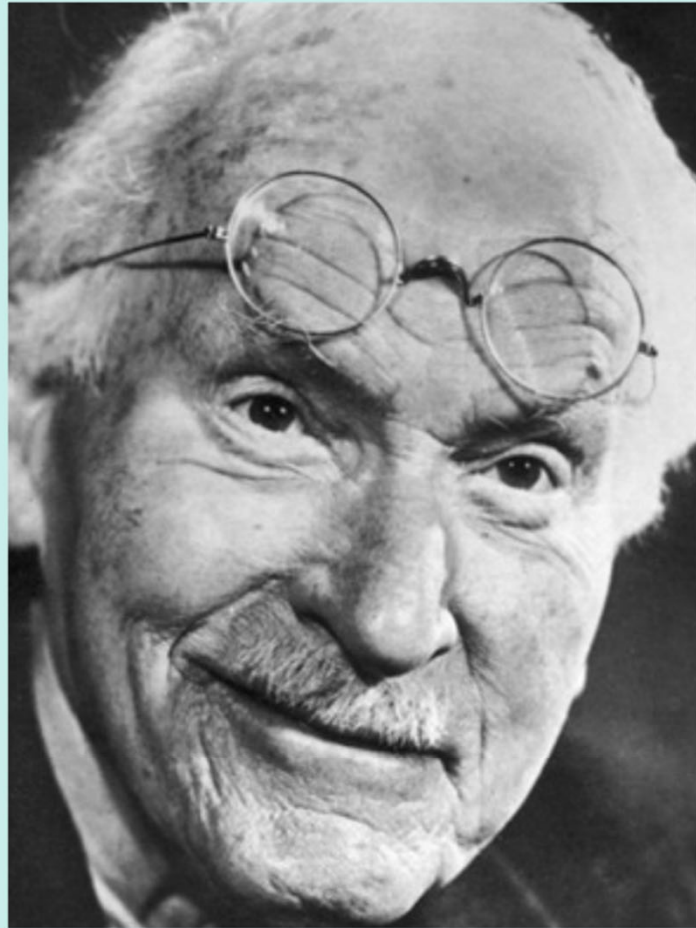
- The Therapeutic Relationship
- The treatment process
- The relationship
- The treatment plan/ goals
- Satisfaction with treatment
- The therapeutic relationship
- Communication practices
- Concerns
- Progress in therapy
- What's working, what's not?
- Modifications
- Options

Dr John Norcross PhD, ABPP

Board Certified Psychologist, Clinical Professor of Psychiatry, past APA President & Author



Source: www.youtube.com/watch?v=QKHAOQQO_xpE



Until you make the unconscious
conscious, it will direct your life and
you will call it fate.

— *Carl Jung* —

Thank You!



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Resources

- Link to Dr. John Norcross video on the “Significance of Therapeutic Relationship”
 - https://www.youtube.com/watch?v=QKHAOQO_xpE
- Link to empathy video (Brene Brown):
 - <https://brenebrown.com/videos/rsa-short-empathy/> and here:
 - <https://www.youtube.com/watch?v=1Ewgu369Jw>
- Book: “The Therapeutic Relationship, 2nd ed.” by Petruska Clarkson
- Website: www.motivationalinterviewing.org
- Book: “The Gift of Therapy” by Irvin Yalom
- Book: “Client-Centered Therapy” by Carl Rogers

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