

# THE IMPORTANCE OF THERAPEUTIC ALLIANCE FOR TRANSITION-AGED YOUTH



**T**ransitioning youth with mental illness are among the most difficult populations to maintain in treatment, as the transition stage of development is often characterized by further deterioration of mental health and functional outcomes.<sup>1</sup> Strong relationships with support systems and mental health service providers are important for a healthy transition to adulthood. During this critical developmental period, the therapeutic relationship can help youth navigate the challenges that come with the transition to adulthood and be a model for other healthy relationships in a youth's life.

Adolescence is a critical period to engage youth in treatment as many young people continue to face the mental health challenges they experienced in childhood, while additional disorders commonly conceptualized as adult disorders emerge. Almost 25% of youth have met criteria for a mental health disorder with severe impairment at some point in their lifetime.<sup>2</sup> Yet youth with mental illness experience a serious decline in access to treatment and often drop out of treatment.<sup>3</sup> Initial encounters with mental health services and providers therefore can have important implications for future service utilization.

## THE IMPORTANCE OF THERAPEUTIC ALLIANCE

Building a strong therapeutic alliance is considered a best practice for improving treatment outcomes and engaging and maintaining youth in mental health treatment.<sup>4</sup> Based on our experience and research, the therapeutic alliance is a multi-faceted construct, comprised of three elements of connection: emotional-affective; cognitive; and behavioral.<sup>5</sup> The emotional-affective connection is the "relational bond" that forms between client and service provider. Cognitive connection refers to the way treatment is

conceptualized by the client, such as agreement on goals and planned tasks, as well as being optimistic and motivated about the therapeutic process or viewing the service provider as credible. Lastly, the client's participation in treatment, collaboration on tasks, and openness in speaking with the service provider, is part of the behavioral connection.

Although all three components are important for a strong alliance between service provider and client, the emotional-affective connection is crucial for initial establishment of alliance.<sup>5</sup> The emotional-affective connection is particularly important when transitioning youth first enter treatment. Initially, adolescents and transitioning youth, consistent with developmental expectations, enter treatment feeling skeptical towards trusting therapists as these professionals are seen as similar to other adult authority figures who may impede youth progress toward autonomy.<sup>6</sup> If the emotional-affective connection is not established initially, then trust and comfort are negatively impacted and treatment cessation is more likely.<sup>5</sup> Additionally, clinicians must establish credibility by giving a good rationale for treatment in order for youth to have sufficient motivation to remain engaged in treatment.<sup>5</sup>

## BARRIERS TO THERAPEUTIC ALLIANCE

Many factors can jeopardize formation of the therapeutic alliance. One major threat to therapeutic alliance is the absence of a developmentally sensitive approach. Transition to adulthood presents a host of new challenges as greater independence is established and youth go to college or attend other post-secondary training, obtain employment, become financially independent, learn to budget and pay for expenses, and maintain a home. In addition to typical developmental challenges, transitioning youth with mental illness encounter additional obstacles such as lack of educational attainment, poverty, lack of family support, and homelessness.<sup>3,7</sup> Therapeutic alliance suffers if the service provider is not mindful of, or diminishes or ignores, the changes and outside pressures that occur during transition to adulthood for youth.<sup>5</sup>

Cognitive changes during this developmental stage present unique threats to the therapeutic alliance. During this period of cognitive development, young clients often ask many questions regarding the therapeutic process. Service providers report perceiving questions from adolescent clients as challenging their expertise, but providers should be mindful that requests for additional explanations should be expected and seen as interest and developmentally appropriate attempts to exercise autonomy, not disrespect.<sup>5</sup>

As minors, youth often do not enter treatment of their own volition and may therefore lack an understanding of the reason for, or importance of, treatment.<sup>8</sup> This lack of “buy-in” may result in increased resistance to treatment and eventual dropout;<sup>9</sup> addressing questions from youth and providing developmentally appropriate responses may help engage youth in treatment.

### **BUILDING A STRONG THERAPEUTIC ALLIANCE**

A service provider can apply many strategies to foster a strong, developmentally appropriate therapeutic alliance with transitioning youth. It is important for the service provider to be mindful that increased role exploration is normal for transitioning youth.<sup>10</sup> If a youth’s need for identity exploration is validated by the service provider, the therapeutic relationship can be enhanced and the youth’s work in therapy can be viewed as a continuation of identity discovery.<sup>5</sup> For example, a therapist can help a young adult balance her role of being a “good” daughter with spending more time with her friends, while also determining what sorts of long-term goals she may have for her career. Additionally, a stronger youth-service provider therapeutic relationship can be established if the youth feels validated throughout treatment.<sup>11</sup>

During this developmental stage, youth express an increased desire for autonomy. For the developing youth, acquiescing to treatment may be seen as a threat to independence.<sup>5,9</sup> However, the client’s initial negative perception of therapy can be overcome by collaborating with the youth to increase openness to treatment.<sup>5</sup> As previously discussed, service providers should view client questions as an opportunity to engage the youth in treatment and not as a challenge of their abilities.<sup>5</sup> It is important for the service provider to stress that treatment is a tool to empower the youth, rather than a way to diminish autonomy. Being sensitive to and addressing the biological and cognitive changes experienced by transitioning youth will also

strengthen the therapeutic relationship. Discussing changes the youth is experiencing and how they relate to mental health and treatment goals may assist the youth in their treatment and permit the youth to feel more comfortable and open with the clinician—provided the client is ready to discuss these changes.<sup>5</sup>

Provider attributes associated with positive alliance include being flexible, confident, warm, interested, empathetic, experienced, honest, respectful, and trustworthy.<sup>12</sup> Therapeutic techniques such as exploration, reflection, notation of past therapy successes, accurate interpretation, affirmation, understanding, expression of affect, and attending to clients’ experience have been found to lead to positive alliance.<sup>13</sup> Service providers can establish alliance by taking steps to collaborate with youth on identifying treatment goals.<sup>14</sup> The use of humor in treatment is especially useful when working with youth; simply getting clients to laugh may dramatically improve client-service provider relationships, since many youth associate a sense of humor with genuineness and trustworthiness.<sup>9</sup>

Ackerman and Hilsenroth found that service provider qualities such as being rigid, uncertain, overly critical, exploitive, distant, tense, aloof and distracted are hazardous to therapeutic alliance. Service provider techniques associated with ineffective treatment and lower alliance include: over or under structuring therapy; being overly managing; using silence inappropriately; and belittling the client.<sup>15</sup> Service provider behaviors such as overemphasis of information from past sessions, criticism, failure to acknowledge youths’ emotions, and misunderstanding of the client, also result in poor alliance.<sup>13</sup> Additionally, pushing the client to talk and diminishing the client by over-asserting credentials or superiority during treatment also negatively impact alliance.<sup>14,9</sup> Mutual respect between the service provider and transitioning youth will alleviate the youth’s perceived threat of diminished authority and encourage the youth to respond with greater ease.<sup>9</sup>

Family involvement can help (rather than hinder) the



therapist-youth alliance if there is adequate balance between the youth's need for autonomy and family treatment participation.<sup>5</sup> Family members can be potential allies in treatment; treatment retention is higher for adolescents if the parent feels that treatment is valuable and that the youth is improving.<sup>16</sup>

Since cultural competence may have a great impact on therapeutic alliance, it is important for service providers to be sensitive to issues such as stigma, as well as culturally preferred interpersonal styles, values, and beliefs. Service providers should be cognizant of stigma associated with mental health treatment and its influence on a client's view of the presenting problem and treatment process. Stigma can be diminished by providing culturally-adapted education about mental health treatment that can increase client understanding of therapy, resulting in lower probability of treatment cessation.<sup>17</sup> Taking time to learn about client cultural background and communication style has been shown to have positive outcomes, with service providers feeling more therapeutically confident afterwards.

## CONCLUSION

By being sensitive to issues and challenges of youth in transition and considering the recommendations outlined above, service providers may build strong therapeutic relationships with transitioning youth with mental illness. A strong therapeutic relationship is critical for engaging and retaining youth in mental health services that are vital for treatment and functional outcomes. Providing transitioning youth with a positive treatment experience during this critical period of development may lead to improved treatment outcomes for this at-risk population.

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