



Therapeutic Alliance and Its Relationship to Treatment Outcomes in Autism



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Background:

- Individuals with autism spectrum disorder (ASD) have difficulty with emotion regulation (ER)¹⁻².
- Emerging research suggests mindfulness-based interventions may be efficacious in treating ER problems for clients with ASD³⁻⁴.
- Client-therapist alliance appears important to treatment outcomes for non-ASD samples⁵⁻⁶, although it is not clear whether this relationship also applies to clients with ASD.

Research Questions:

1. Does client-therapist alliance predict post-treatment ER?
2. Are there within-person variables that are associated with alliance strength?

Methods:

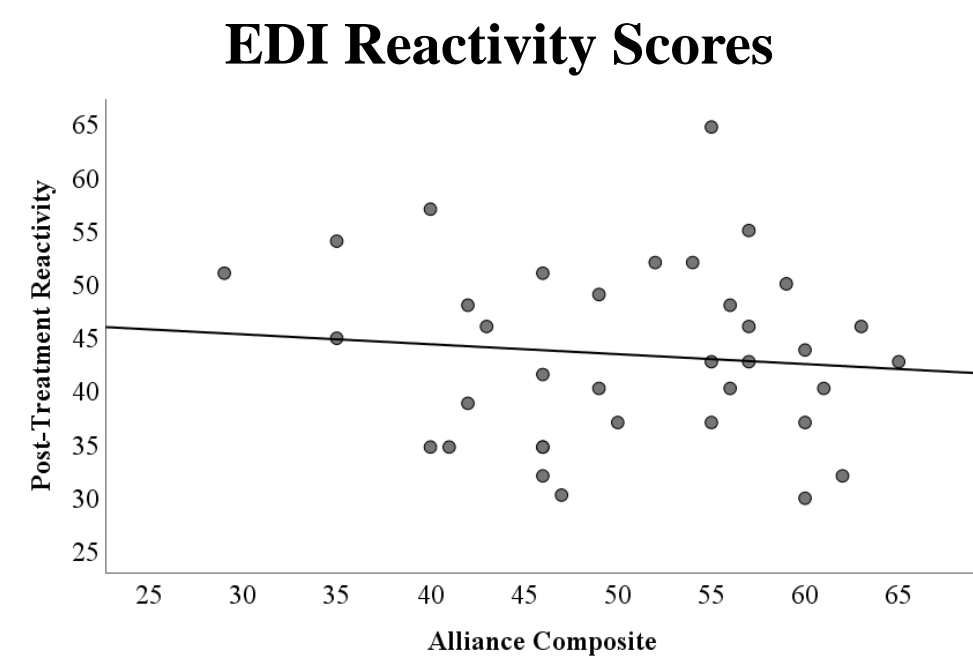
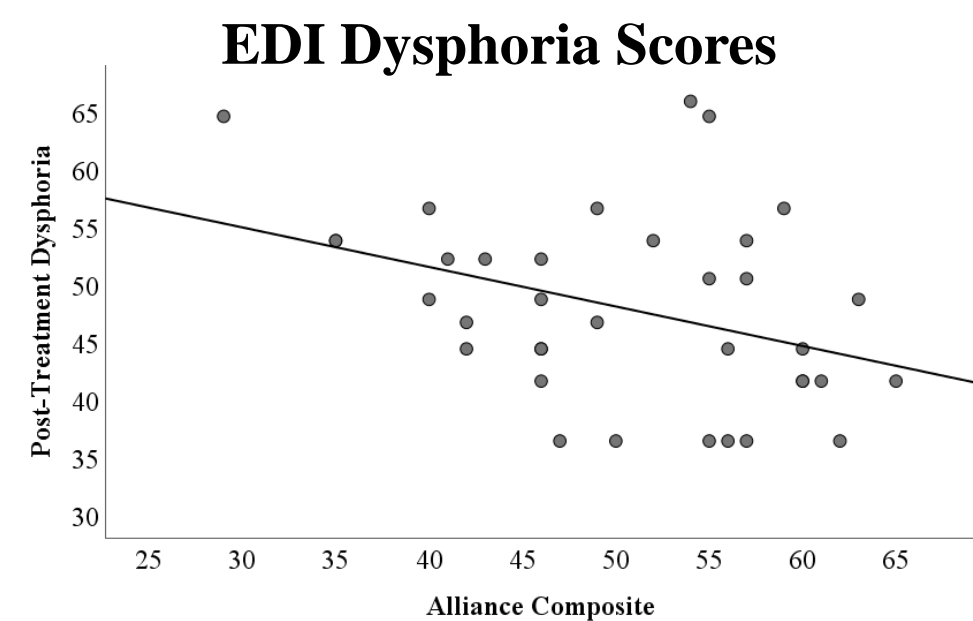
- 36 adolescents and young adults with ASD (mean age: 15.37 years; 83.80% male; 81.10% white)
- Emotional Awareness and Skills Enhancement⁷ (EASE)
 - 16-week one-on-one mindfulness-based intervention targeting ER
- **Measures**
 - Emotion Dysregulation Inventory⁸⁻⁹ (EDI)
 - Dysphoria T-score
 - Reactivity T-score
 - Vanderbilt Therapeutic Alliance Scales – Revised, Short Form¹⁰ (VTAS-R-SF): observational measure of alliance strength
 - Composite score of alliance strength at four timepoints in treatment (possible range: 0 – 80)

VTAS-R-SF Codes

1. Experiences therapist as understanding and supportive.
2. Identifies with therapist's method of working.
3. Acts trustful and non-defensive toward therapist.
4. Shares a common viewpoint about problem/causes/solutions.

Results:

- Stronger therapeutic alliance ($\beta = -.33, p = .025$) significantly predicted decreased post-treatment levels of dysphoria after controlling for baseline dysphoria.
- Therapeutic alliance ($\beta = -.15, p = .270$) did not predict post-treatment levels of reactivity after controlling for baseline reactivity.



Predictors of Alliance Strength

Depression
($r = -.35, p = .036$)

Age
IQ
Gender
Anxiety
ADHD

Discussion:

- Stronger alliance is predictive of decreased post-treatment levels of dysphoria for clients with ASD, suggesting alliance may be important for specific treatment outcomes.
- Baseline depression negatively predicted alliance strength.
 - It may be that certain depressive symptoms (e.g., social withdrawal, hopelessness, lethargy) prevent clients from forming stronger alliances.
- Results suggest important considerations for treatment development, including the benefit of increased alliance-building.