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Therapist Relational Skills and Client Resistance in a Short Motivational Programme for Offenders

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Hagan Ross Provan

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ABSTRACT

Developing a better understanding of client resistance, and better evidence-based practice principles for dealing with resistance, have the potential to increase the efficacy of psychotherapy. There has been very limited research into client resistance, and even less which has investigated the link between therapist behaviours and resistance. The limited research to date has been conflicting and has primarily focused on narrowly operationalised definitions of resistance, as well as limiting measurement of therapist behaviours to therapist technical skills rather than interpersonal skills. There is little research investigating specific therapist relational skills that contribute to or reduce the likelihood of client resistance, and how this in-session interpersonal dynamic takes place.

This study utilised a multi-method design to investigate the relationship between a number of therapist relational skills (therapist empathy-perspective taking, therapist empathy-attunement, and therapist resistance) and client resistance. Resistance was defined as oppositional behaviour within the session, or lack of engagement with the other member of the dyad, and perceived as the outcome of an interpersonal process. DVDs of therapy sessions were accessed from a Short Motivational Programme run by the Department of Corrections in New Zealand. Each of the DVDs was coded on a minute by minute basis, using measures of therapist interpersonal skills and client resistance. The study also measured the working alliance. The analysis combined: a group analysis of broad patterns across the dyads; a single case analysis involving a visual analysis of graphed data, supplemented with descriptive statistics; and a narrative analysis of client-therapist dialog.

The results showed that therapist resistance and client resistance were strongly and positively related. The relationship between the two variables was also found to be temporally proximal at the level of a one minute segment. There was also a strong, but inverse relationship, between therapist empathy and client resistance, and again, the relationship was temporally proximal at the level of the one minute segment. Therapist resistance, especially, was closely synchronised to client resistance in terms of the timing of onset and cessation, and was also synchronised in terms of the level (intensity) of the two measures. The findings provide evidence for the idea that client resistance is often the result of an interpersonal dynamic, rather than simply an intrapersonal characteristic, and can be contributed to by poor therapist relational skills. The results showed that either therapist or client resistance can appear first, and tend to elicit resistance from the other member of the dyad (and lack of perspective taking by the therapist), which in turn elicits further resistance from the other dyad member. This appears to set in place a conflictual interpersonal dynamic that tends not to cease until the therapist stops resisting the client’s message, and takes a more empathic-perspective taking stance. The results also suggested that therapist perspective taking and therapist resistance may be specific interpersonal dynamics contributing to successful/unsuccessful therapist confrontations.
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