

**Stony Brook University
The Graduate School**

Doctoral Defense Announcement

Abstract

Aggregating Clinical Methods to Repair Alliance Ruptures

By

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Efforts to identify empirically supported treatments (ESTs) have generated controversy. Much of the contention concerning ESTs, and the randomized controlled trial (RCT) methodology used to identify ESTs, centers on the generalizability to clinical practice. In response to these concerns, the APA Presidential Task Force on Evidence-Based Practice recommends the use of approaches to compliment RCTs (APA, 2006). One suggested approach is to examine the practices of expert clinicians. This study draws on clinical expertise to identify strategies to resolve tensions or breaks in the collaborative relationship between clients and therapists (i.e., alliance ruptures). While strong alliances contribute to positive outcome, alliance ruptures can lead to poor outcome. Although ruptures commonly occur, current treatments provide few strategies to repair ruptures. A promising way to identify strategies to address ruptures is through clinician-informed approaches. This study systematically collected, categorized, and identified clinician-generated strategies to address alliance ruptures. One hundred and ten social workers and psychologists provided descriptions of ruptures that occurred in individual outpatient therapy with adults. An independent group of clinicians ($N = 177$) reviewed six descriptions of ruptures and indicated how they would address the rupture during the session and in later sessions. These responses were classified into strategies to reflect the underlying function of the responses. A group of nominated expert clinicians rated the use of each strategy to address the rupture both during the current session and in later sessions using a procedure based on the *Expert Consensus Guideline Series* (e.g., Frances, Docherty, & Kahn, 1997). The expert ratings were averaged and confidence intervals were calculated to identify the relative effectiveness of the strategies. These results suggest that during the rupture, therapists favor exploring and empathizing with the client's feelings rather than the use of specific techniques. Moreover, therapists indicated, that during a rupture, there are a limited number of effective responses and many ineffective responses, whereas there are more effective options available in future sessions. Additionally, some differences in effectiveness ratings emerged related to stage of therapy and theoretical orientation. Recommendations for the application of this methodology and these results to future research are considered.

Date: December 5, 2007

Program: (Program): Clinical Psychology

Time: 4:30PM

Dissertation Advisor: Marvin R. Goldfried, Ph.D.

Place: Javits Lecture Center, Video Conferencing Room 223