The therapeutic alliance in family therapy



There is a wide range of therapeutic alliance definitions. However, it is possible to come up with or identify a common basis for the most of them. It is related to an emotional connection between the clients and the therapist. Therapists and their clients share goals related to therapeutic as well as tasks which is a clear indication of a mutual collaboration between the two parties (McGoldrick, 2005). Therapeutic alliance in this case may be perceived as a structure supporting this process and its improvements, which in the end is an essential element towards its implementation. The therapeutic alliance may be referred as the working, relationship, and helping alliances that is perceived as crucial constituent of triumphant therapy. As a result, these terms have been used up by studies interchangeably in reference of an alliance between the therapists and clients. Therefore, in this research paper the alliance is referred to as the therapeutic alliance.

Researchers have referred to this alliance as the quality as well as strength of a collaborated relationship between the clients and therapists in a therapy session. There are positive bonds between the clients and therapist, which are effective and are included in this concept. This positive bond includes factors such as liking, respect, mutual trust, and caring among others (Friedlander, 2006). Another crucial aspect is a consensus about the vigorous loyalty towards the goals of therapy and a clear means on how these goals can be attained effectively. It is clear that this alliance is a conscious aspect representing the relationship between clients and their therapists. Studies in this case have found a relationship that is positive between alliance in therapeutic, as well as modalities in treatment and uncountable techniques

used in therapy set up. The recent research that was undertaken in this area took the alliance as a common factor that has a possibility in therapy outcomes all through therapeutic alliance. The research came out with the findings that there is a prediction in therapy outcomes in terms of plethra that have a different set up all through the entire population.

A number of literature reviews represented in this research has doubts regarding the positive relationship between therapeutic alliance and its outcomes. In respect to the therapeutic alliance quality, an extensive study in this area has been conducted on the effects perceived between a numbers of areas. These areas are: client's therapists, and perspectives from outside observers. The studies end up acquiesce ting a mixer of findings. In a research conducted on 44 couples who used to receive a therapy in a university clinic, the result showed the existence of some significant outcomes according to the therapeutic alliance. People, who were involved in the study, had age ranging from 23 to 69 years. Another requirement was that the couples had to be in cohabitation for not less than a year. According to the study, 27 percent of the selected sample had been remarried and had children from their previous marriages. In addition, an approximate of 60 percent had a high school degree, while 62 percent of men and 76 percent of women in the complete sample confessed that they had not received any form of mental health treatment. After the interview, the interviewees had a chance to have a therapist session.

The working inventory was used during the process of measuring the therapeutic alliance. Both of the spouses in the family, after attending the session for several times, together with the therapist, used this inventory.

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Therapy outcome was measured. According to the interviews' results, data collection was composed. The findings indicate the following: therapists' ratings obtained from the alliances recorded a lower average compared to family couples' ratings. The therapist alliance ratings showed a likelihood of extrapolate outcomes.

In another case, researchers were interested with several characteristics of their clients. Researchers looked up for factors such as marital status, demographic innformation, and quality. The quality of the early relationship as well as experiences within a family, spouses influence on the formation of a therapeutic alliance. The researcher's first approach was to measure the symptomatology that was pretreatment to the family members.

Data collection was done by use of both treatment easement system and the marital satisfaction inventory. The focus was on each of the spouses' report and functionality in the family origin. Those who were selected in this sample were required to under go a therapy session. As a result, administration and measure of the therapeutic alliance was done after the first and the last weeks of session (Lebow, 2005). The researchers come out with several findings after the research process. According to study, it was clear that individuals who underwent the therapy had no symptoms that were related to the alliance formation, especially in couple therapy. Another result showed that high levels in nuptial distress had a lower score prediction in men where else there were true links for women. These findings bring in the complex as well as the right nature in the therapeutic alliance.

The key objective of this paper was to try to analyze the relationship that exists between therapist, the therapeutic alliance effectiveness, and the part that they play in transforming the family therapy. It was hypothesized that the effectiveness in therapist and therapeutic alliance would be in one way or the other linked to conjoint treatment. This was in respect to the information based on the research conducted to show the relationship between therapeutic alliance and its outcome in a family therapy (McCardle, 2011). Finally, this research left behind some questions that require answers about what might account for different findings that were represented in the case of men and women. Therefore, the research has shown that therapeutic alliance female ratings have the ability to predict over changes that might occur in female spouses on the case of change in the relationship satisfaction.