

Therapist's directive and nondirective behavior: Analysis of their effects in a parent training group

Fabiane Ferraz Silveira, M.S., Alessandra Turini Bolsoni-Silva, Ph.D and Sonia Beatriz Meyer, Ph.D

Abstract

The study described the interaction between therapist and clients in a group intervention with two mothers and a grandmother. Five out of thirteen taped sessions were designated for analysis. Main results: a) therapist's categories that stood out: approval, recommendation, interpretation, information and information request; b) clients' categories that stood out: report, agreement, relation, and opposition, c) the probability for recommendation coupled with use of approval exceeded the probability of occurrence of other combinations. Possible explanations for the results were offered and new research questions were raised.

Key words: parent training; therapeutic interaction; therapist's and client's behavior categories.

According to Meyer (2006) and Tourinho et al. (2007) the description of the effects of therapist and client's verbalizations' is a crucial condition in the process of identifying the factors that allow the effectiveness of the therapy. This contributes to mental health policies as well as improving services. In addition, it helps researchers and teachers to formulate not only new theories, but also new training for future therapists.

The literature that maps the therapist and client's behavior in an attempt to predict success and failure of the therapeutic process, gathers only a few studies regarding the category giving information; however, there is a variety of divergent positions when it comes to the categories orientation, interpretation and support. Keijsers, Schaap, Hoogduin and Lammers (1995) found that in a focal intervention with patients with panic disorder, the occurrence of theoretical information in the first session was negatively correlated with satisfactory results. Meyer (2009) systematized a database containing 495 therapy sessions of behavior-analytic psychotherapy with several therapists' categories, including giving information. She found that the average percentage of this category was 20% in the first session, declining to 6% up to 15% during the second to the forty-fifth session.

When orientation is provided, there are indicatives of an increase in client resistance (Patterson & Forgatch, 1985), and cooperation (Barbera & Waldron, 1994). Also there are indications of some discrete changes at the end of the intervention (Orlinsky, Grawe & Parks, 1994), as well as adverse effects pertinent only to the initial meetings with families (Harwood & Eyberg, 2004). These factors are equally shown.

In the famous 1985 study, Patterson and Forgatch observed an intervention with parents. They concluded that orientation and confrontation led to an increase in resistant behaviors. However, facilitation and support led to a decrease in such behaviors. Bischoff and Tracey (1995) define resistance as any behavior that indicates opposition to the therapist, the therapeutic process, or even to the session's agenda. According to Patterson and Chamberlain (1994) when clients are parents and have contact with the benefits achieved by the taught procedures, a decrease in resistance and increase in cooperation appears.

Barbera and Waldron (1994) examined pieces of tapes of second sessions with 12 families of juvenile offenders, finding that the category support represented the highest frequency (41%), followed by orientation (21%). Sequential analysis revealed that support resulted in cooperation for most clients,

and orientation on the other hand was not followed by resistance, but rather produced an increase in cooperation to half of the families. The authors' justification for this result lies in the fact that the therapist when orienting, addressed the whole family and not only one member, which was interpreted as beneficial by the clients.

Contrary to Barbera and Waldron's results (1994), the analysis of sections of second individual sessions with parents showed positive correlations between support and dropout, and questioning and dropout (Harwood & Eyberg, 2004). The authors observed a prevalence of closed questions rather than open questions in the group that dropped out of treatment. This suggests that a balance of open and closed questions during treatment is important. Although verbal support increased cooperation during the first session, they also concluded that verbal support can result in temporary effects or insufficient adherence.

Literature indicates that the use of interpretation and empathy predicts significant changes at the end of therapy (Orlinsky et al., 1994). However, there are still some diverging conclusions regarding dropout (Piper et al., 1998; Yano, Almeida & Meyer, 2008). Orlinsky et al. (1994) examined successful and unsuccessful individual interventions, observing that the categories interpretation and support/empathy occurred with greater frequency in interventions that obtained positive results. Piper et al. (1998) found a greater number (23%) of early interventions with a predominance of interpretation rather than support (6%). In the same direction, a recent study indicates that interpretation given in the first five sessions contribute to adherence of the client to the therapeutic process (Yano et al., 2008).

In Zamignani's (2007) study, a high frequency and duration of interpretation, recommendation, and approval were observed, with a gradual increase throughout the phases of therapy. The researcher's explanation for the increase of recommendation and interpretation at the intermediate stage correspond to therapists' behaviors expected at this stage of the therapeutic process: raising hypotheses and carrying out the intervention.

Meyer (2009) observed a gradual increase of the therapist's recommendations, reaching a value of 19% in the fourteenth session. After that moment, a decrease occurred reaching 14% at the end of first year and 7% at the end of the second year. As for the occurrence of interpretation, in the first sessions of behavior analytic therapy it was low and tended to increase, reaching almost 25% around the tenth session, and achieving stability in the twenty-fifth session.

According to Bischoff and Tracey (1995) the client's resistant behavior occurs when therapists use directive interventions, which is described as any verbalization that directs the session, or confronts the client, such as orientation and interpretation. Resistance is less probable to occur with nondirective interventions, which can be described as supportive verbalizations (Bischoff & Tracey, 1995).

According to Keijsers et al. (1995) the primary issue to be investigated is not the negative effects of therapist's directive behavior, but rather under what conditions, the therapist's behavior is accepted, and the therapist's advice is followed, by the client.

For Hill (2001) measures of frequency of therapist's behavior do not allow cause-effect conclusions. The author recommends that contextual aspects, including client's behavior should be added to the analysis. Similarly Tourinho et al. (2007) considers that the data produced from categorizations of participants behaviors can be analyzed in conjunction with other variables of the therapeutic process such as measures of results and information on previous sessions.

Sequential analysis is a methodological tool that allows the study of changes in therapeutic interaction (Lichtenberg & Heck, 1986). Sequential analysis can be used to examine client's verbalizations preceding and following a therapist's specific behavior and can reveal patterns of interactions (Harwood & Eyberg, 2004).

The purpose of this study was to describe interaction patterns between therapist and clients in a parent group intervention.

Method

Participants

Two mothers and a grandmother here denominated as P1, P2 and P3 and a female behavior-analytic therapist, with three years experience in parent training programs participated. P1 was a 31-year-old biological mother, married, housewife, with incomplete high school, and low average socioeconomic status. P2 was a 39-year-old biological mother, married, housewife, with incomplete high school and low average socioeconomic status. P3 was a 51-year-old grandmother, divorced, housewife, with incomplete high school, and low average socioeconomic status.

Procedure

Fourteen group sessions of parent training were conducted. Theoretical references used during the intervention included Behavior Analysis and its derivatives, Social Skills Training (Del Prette & Del Prette, 1999), The Collaborative Model of Intervention (Webster-Stratton & Herbert, 1993), and Goldiamond's Constructional Approach Intervention (2002).

In order to describe the interaction patterns between therapist and clients the following steps were taken:

a) Five out of fourteen sessions were randomly selected (5, 6, 10, 13 and 14) for a total of ten hours of footage;

b) The client and therapist categories were analyzed using the software The Observer XT 7.0 and the Multidimensional Behavioral Coding System developed by Zamignani (2007). The therapist categories that were analyzed were the following: Information request (IRQ), Empathy (EMP), Information (INF), Reflection request (RRQ), Recommendation (REC), Interpretation (INT), Approval (APP), Discordance (DIS), and other. Each category had different subcategories of analysis. For example, the category Recommendation had the subcategories Advice, Model, Incentive, Structuring activity and Permission. The client categories that were analyzed were the following: Request (REQ), Report (REP), Improvement (IMP), Goal (GOA), Relation (REL), Agreement (AGR), Opposition (OPO), and others.

c) The Observer XT 7.0 executed the lag sequential analysis for the sessions 6, 10 and 13 taking the therapist behaviors Recommendation to group (REC G), Recommendation to P1 (REC P1) and Recommendation to P2 (REC P2) as the criterion codes. The therapist's behavior Recommendation to P3 was not included in the analysis due to its low frequency. To execute the lag analysis, Sackett, Holm, Crowley and Henkins (1979) proposed that any behavioral events can be viewed as a starting point or criterion code within the interaction. As reported by Lichtenberg and Heck (1986) "after initially computing the unconditional probability of occurrence of each of the events, the conditional probability of each possible event (including itself) is calculated as a function of the successive lags (steps) of each event from criterion" (p. 6). Four levels of analysis were carried out; "lag - 1", "lag + 1", "lag + 2" and "lag + 3". The categories that presented a higher difference between the conditional and unconditional probabilities were included in the results table. When the unconditional probability of an event was higher than the conditional probability, the event was not included.

Results and Discussion

The frequency and duration of therapist categories observed during the therapy sessions are shown in Figure 1; sequential analysis is shown in Table 1; and the percentage of each client category (per patient) is shown in Figures 2, 3 and 4.

Considering both measures of frequency and duration, there was a predominance of five out of eight examined categories (Figure 1). They are Approval, Information, Information request, Recommendation and Interpretation. The high percentage of Approval (37%) is supported in the literature (Borrego & Urquiza, 1998; Follete; Naugle & Linnerooth, 1996; Zamignani, 2007), which considers the social reinforcement provided by the therapist as the main factor responsible for changes. Other explanations are related to the adopted referential, the collaborative intervention approach (Webster-Stratton & Herbert, 1993) and the constructional approach (Goldiamond, 2002).

The high occurrence of Recommendation validates the results of other studies (Meyer, 2009; Zamignani, 2007) but contradicts the position of Orlinsky et al. (1994) who established associations between Recommendation and only discrete behavioral changes.

The introduction of the measure of duration revealed a significant presence of Interpretation, common to the results of other studies (Orlinsky et al., 1994; Zamignani, 2007).

The significant presence of Information can differ from the results of other studies, especially because the intervention contains a specific part of the session for therapist providing theoretical information to the clients.

Additional results demonstrate that the categories Recommendation, Information and Reflection request, were presented with a higher frequency when addressing the group as a whole; while, Approval, Information request, Interpretation, Empathy and Discordance occurred most frequently when addressing the clients individually.

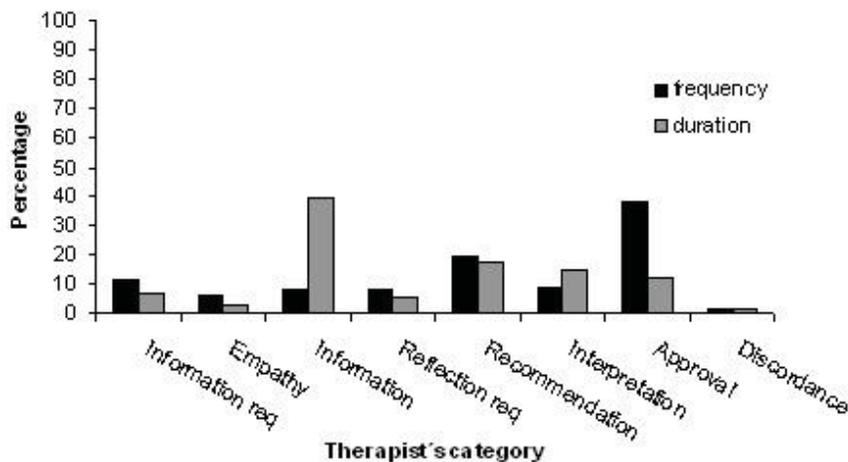


Figure 1. Frequency and duration of therapist category (percentage), compared to total therapist verbalizations observed in all sessions studied.

The results of Table 1 contain abbreviations, such as “T-APP-P1”. The first element represents an abbreviation of the participant who emitted the behavior. The second element is the behavior itself and the last element specifies the participant to which the behavior was directed. For instance, in “T-APP-P1” the therapist presented an approval to P1.

In Table 1, when looking at the criterion code REC G, it is observed that the therapist exhibited several Recommendations when addressing the group, mainly in session 13. It can be hypothesized that group recommendation produces weaker negative effects than individual recommendation.

Regarding the criterion code REC P1, changes can be observed during the intervention; the therapist's behavior changed gradually from using only Recommendation, to Recommendation with Approval and Reflection request. In the criterion REC P2, Recommendation was more likely to occur when preceded by Approval and Empathy, which have potential reinforcing effect. Regarding criterion code REC P3, the hypothesis is that the occurrence of therapist Approval between Recommendations could have contributed to client Agreement; this, in turn, contributed to new Interpretation and Recommendation by the therapist.

Sequential analysis was chosen based on the statements of Keijsers et al. (1995), who defend the importance of investigating under what condition directive interventions produce positive results. The results of the sequential analysis demonstrated some regularities in the interactions established, that is, the Recommendations provided by the therapist had a higher probability of being preceded by Approval and Empathy. Subsequent to Recommendation there are new Recommendations but alternated with Approval. Recommendation alternated with Approval seems to have the potential to minimize aversive effects of the therapist's Recommendations as shown in the literature (Bischoff & Tracey, 1994; Harwood & Eyberg, 2004; Orlinsky et al., 1994).

Table 1. Sequential analysis of sessions 6, 10 and 13 at levels lag-1, lag+1, lag+2 and lag+3. The criterion codes are the therapist behaviors: Recommendation to group (REC-G), Recommendation to P1 (REC-P1) and Recommendation to P2 (REC-P2). Client categories are shown in italics, and the unconditional probability is shown in parentheses.

Lag -1		Criterion code	Lag + 1		Lag + 2		Lag + 3	
SESSION 6								
Category	CP	Criterion	Category	CP	Category	CP	Category	CP
T-INF-G	0,14 (0,07)	REC-G	T-REC-G	0,14 (0,10)	T-APP-P1	0,08 (0,09)	T-REC-G	0,17 (0,10)
T-APP-P2	0,21 (0,08)	REC-P2	<i>P2-AGR-T</i>	0,12 (0,07)	T-REC-P2	0,17 (0,08)	<i>P2-REP-T</i>	0,17 (0,03)
SESSION 10								
T-APP-P3	0,15 (0,19)	REC-G	T-REC-G	0,15 (0,08)	T-APP-P2	32 (0,11)	T-APP-P1	0,2 (0,14)
T-REC-P1	0,23 (0,02)	REC-P1	<i>P1-IMP-T</i>	0,15 (0,01)	<i>P1-REL-T</i>	0,15 (0,08)	T-APP-P1	0,15 (0,14)
T-APP-P3	0,36 (0,19)	REC-P2	<i>P3-AGR-T</i>	0,28 (0,21)	T-APP-P2	0,21 (0,11)	T-APP-P1	0,16 (0,14)
SESSION 13								
T-INF-G	0,16 (0,05)	REC-G	T-REC-G	0,15 (0,13)	T-REC-G	0,12 (0,13)	T-REC-G	0,12 (0,13)
T-APP-P1	0,26 (0,11)	REC-P1	T-RRQ-G	0,16 (0,04)	T-REC-P1	0,21 (0,03)	T-APP-P1	0,37 (0,11)
T-EMP-P2	0,07 (0,02)	REC-P2	T-RRQ-P2	0,14 (0,02)	T-APP-P2	0,21 (0,04)	T-REC-G	0,11 (0,13)

CP- conditional probability, INF-information, APP- approval, REC- recommendation, EMP-empathy, RRQ-reflection request, INT-interpretation. AGR-agreement, REP-report, IMP-improvement, REL-relation G-group, clients P1, P2 e P3.

Figure 2 shows that the predominant categories of P1 were: Report, Agreement and Relation, and that they were consistent in the measures of occurrence and duration. It is important to mention the significant presence of Relation and Agreement, in an intervention with a high occurrence of the directive categories Information, Interpretation and Recommendation. Such result is divergent to the studies that highlight the negative aspects of such therapist categories (Bischoff, & Tracey, 1995; Patterson &

Forgatch, 1985). The therapist's verbalizations directed to P1 were neither more frequent nor of longer duration compared to the other clients. Therefore it has been hypothesized that the therapist intervened most often with the clients who presented problems of greater severity. It is believed that clients whose cases are less severe and who have a larger repertoire of child-rearing practices can benefit from group interventions; the therapist does not need to address each client individually but rather can address the whole group.

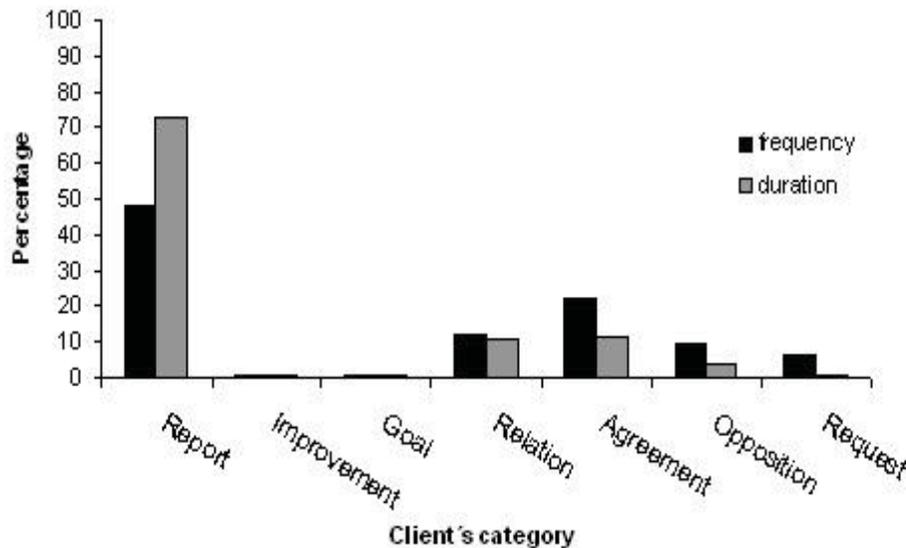


Figure 2. Frequency and duration of P1 client's category (percentage), compared to total P1 verbalizations observed in all sessions studied.

Similar to the other clients, P2 exhibited the categories Report, Agreement and Relation with greater frequency and duration; and unlike the other clients, P2 also exhibited Opposition with a great frequency and duration, as illustrated in Figure 3. The results from the sequential analysis (Table 1) demonstrated that the Recommendations to P2 were alternated with Approval, Empathy and Reflection request, which may have contributed to the presence of subsequent Agreement.

During the course of the intervention a topographic alteration was observed in P2's Oppositions: she no longer opposed the therapist with jokes and irony, but with direct criticism, which was considered a progress. This result can be related to the therapist's reactions: high frequency of Empathy and Approval, alternated with Recommendation, Interpretation and Reflection request; and the low occurrence of Discordance. The change in Opposition can also be related to P2's overall improvement described by her.

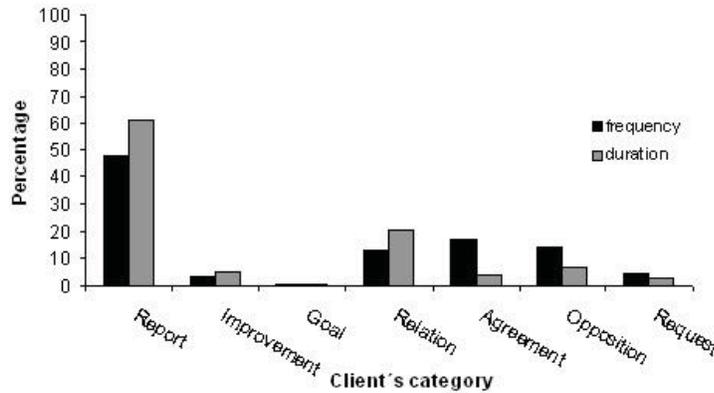


Figure 3. Frequency and duration of P2 client's category (percentage), compared to total P2 verbalizations observed in all sessions studied.

Considering both measures of frequency and duration, in Figure 4 appears a predominance of Report, Agreement and Relation, which are the same results obtained by P1. The therapist presented a high frequency of Approval, Interpretation and Information, as well as a low frequency of Recommendation when addressing P3.

The results of the sequential analysis (Table 1) indicate that Relation preceded Approval addressed to P3, and this Approval was subsequently followed by Agreement, Reflection request, Interpretation and, above all, more Approval.

Despite the good results achieved by P1, it is assumed that P3 was the client who benefited the most from the intervention since P1 already presented a wide repertoire of child-rearing practices prior to the intervention. Regarding P2, only some objectives were achieved, possibly due to the fact that the case was the most severe and the client presented a lack of behavioral variability. Even with the difficulties described in the pre-intervention evaluation, the participant P3 acquired the necessary repertoire possibly because of the conditions of the sessions, and the therapist's use of Approval, Information and Interpretation when addressing to her.

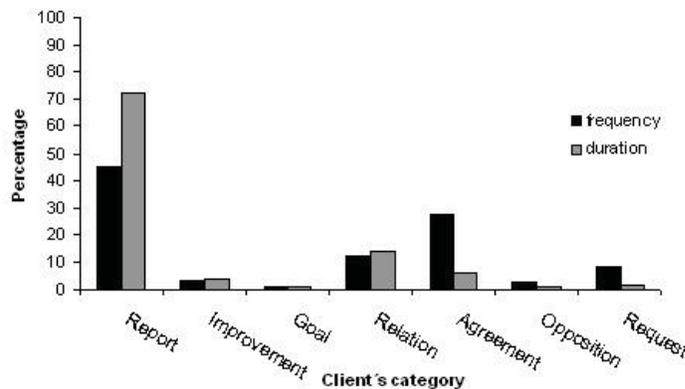


Figure 4. Frequency and duration of P3 client's category (percentage), compared to total P3 verbalizations observed in all sessions studied.

Final Considerations

The results suggest that the therapist, when interacting with the clients in a collective way, presented Information and Reflection request with a higher frequency. However, when interacting with clients individually, the therapist prioritized the categories Approval, Interpretation, Information request, Empathy and Discordance. These results led to the conclusion that, in group interventions, when the therapist is requesting reflection, and using Interpretation and Recommendation, he should alternate with Empathy and Approval, in order to reduce the likelihood of adverse effects of the first categories.

In addition, it is believed that when dealing with clients who present repeated Opposition, the therapist may present a higher frequency of Empathy and a lower frequency of Discordance, as well as Interpretation and Recommendation, with Approval and Empathy. Therefore, the therapist should use these behaviors frequently in order to reduce Opposition.

Overall, this study brings to light the methodology that can be enhanced through further research: the use of videotaped sessions, utilization of behavioral coding system submitted to empirical tests; the analysis of all videotaped sessions; use of technological resources to collect and analyze data, as well as performance of sequential analysis that led to fine tuning the relations between the therapist and client behavior. This would not be possible solely through analysis of frequency and duration measures.

However, new research questions should be highlighted: the use of other axes of the behavioral coding system (Zamignani, 2007); group intervention analysis with participants presenting different characteristics and studies including other group intervention types.

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Author contact information:

Fabiane Ferraz Silveira, M.S.
São Paulo State University-UNESP
Mailing address: Rua Mem de Sá 465
13403-046 Piracicaba/ SP
Brazil
fabianeferrazsilveira@yahoo.com.br

Alessandra Turini Bolsoni-Silva, Ph. D
Department of Psychology, São Paulo State University – UNESP
Av. Eng. Luiz Edmundo Carrijo Coube 14-01
17033-360 Bauru-SP
Brazil
bolsoni@fc.unesp.br

Sonia Beatriz Meyer, Ph.D
Department of Clinical Psychology, University of São Paulo-USP
Av. Portugal 372 apt. 113
04559-000 São Paulo- SP
Brazil
sbmeyer@usp.br