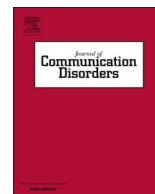


Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

Journal of Communication Disorders

journal homepage: www.elsevier.com/locate/jcomdis

Parent perspectives on the clinician-client relationship in speech-language treatment for children

Kerry Danahy Ebert

Rush University, 1016D Armour Academic Center, 600 S. Paulina St., Chicago, IL, 60612, United States



ARTICLE INFO

Keywords:

Alliance
Rapport
Caregiver
Speech
Language
Therapy
Intervention
Thematic analysis

ABSTRACT

Few studies have explored clinician-client relationships in speech-language treatment for children, although evidence indicates that these relationships may be important. Parents play a unique role in clinician-client relationships and their views have yet to be considered in the speech-language pathology literature. This study explored parents' perspectives on the clinician-client relationship in speech-language treatment for children using both quantitative and qualitative information. An online survey collected responses from 159 parents with children enrolled in speech-language services. Respondents were asked to complete a rating of the clinician-client relationship, provide information on length of treatment and treatment setting, and respond to open-ended questions about what enhances the clinician-client relationship. Length of treatment was unrelated to the parent rating of the clinician-client relationship. However, ratings did vary by treatment setting; parents of children enrolled in treatment services in schools provided lower ratings than parents with children enrolled in other settings. Thematic analysis of parent views on what enhances the clinician-client relationship yielded four main themes: qualities of the speech-language pathologist (SLP), session characteristics, the child-SLP bond, and communication. The most frequent subthemes in the analysis related to characteristics of the sessions: the integration of play and fun, and a child-oriented approach to sessions. These results provide insight into the development of clinician-client relationships in children's speech-language treatment, with implications for both clinicians and researchers.

1. Introduction

There is ample evidence that clinician-client relationships influence the success of behavioral treatments (Flückiger, Del Re, Wampold, Symonds, & Horvath, 2012). In other words, a productive working relationship between a clinician and a client is a key component of treatment-induced change (Bordin, 1979). Bordin (1979) conceptualized this working relationship as consisting of three parts: the emotional bond between clinician and client; their congruence on common goals; and their collaboration on tasks used to work towards those goals. Although these ideas originated in counseling psychology, a variety of other fields have endorsed the importance of the clinician-client relationship to treatment progress and outcomes (e.g., Eveleigh et al., 2012; Ferreira et al., 2013; Kim, Yates, Graham, & Brown, 2011).

When children are the recipients of treatment, clinician-client relationships become somewhat more complex: parents are considered to play a key role both in the relationship and in the ultimate success of treatment (e.g., Accurso, Hawley, & Garland, 2013; Lamers, Delsing, van Widenfelt, & Vermeiren, 2015). Parents not only form their own relationship with the treating clinician but also develop a perspective on the relationship between the child and the clinician, and both may influence treatment (Shirk, Karver, &

E-mail address: Kerry_ebert@rush.edu.

<https://doi.org/10.1016/j.jcomdis.2018.03.005>

Received 15 September 2017; Received in revised form 12 March 2018; Accepted 14 March 2018

Available online 15 March 2018

0021-9924/ © 2018 Elsevier Inc. All rights reserved.

Brown, 2011).

Several studies suggest that the importance of clinician-client relationships extends specifically to speech-language pathology (Ebert & Kohnert, 2010; Fourie, Crowley, & Olivera, 2011; Plexico, Manning, & DiLollo, 2010). However, little attention has been given to parental perspectives on these relationships within the speech-language pathology literature. The purpose of this study was to explore factors that may influence the strength of the clinician-client relationship from the viewpoint of parents. Both quantitative and qualitative data are considered.

1.1. Clinician-client relationships in children's treatment

The majority of existing research on clinician-client relationships in behavioral treatment for children comes from the field of counseling psychology. Although there are far fewer studies on the impact of such relationships on treatment outcomes for children than there are for adults, the effect of the clinician-client relationship is nonetheless established: two recent meta-analyses (McLeod, 2011; Shirk et al., 2011) found significant correlations between measures of the clinician-client relationship and treatment outcome measures. In other words, stronger relationships are connected to better outcomes for children. In these meta-analyses, clinician-client relationships are typically measured by scales based on Bordin's model; that is, goals, tasks, and bond are all included in the clinician-client relationship measures (Shirk et al., 2011). It is also important to note that the association between clinician-client relationship measures and treatment outcomes is nearly equal when parent's views are considered separately from children's views (McLeod, 2011). Thus, there is ample reason to believe that parent perspectives are important.

There may be specific mechanisms by which clinician-parent relationships influence treatment outcomes for children. At least two studies have suggested that measures of the clinician-parent relationship predict specific outcome measures such as attendance at treatment sessions and discontinuation of therapy without the clinician's agreement (Accurso et al., 2013; Hawley & Weisz, 2005). Such findings make sense, as parents are often responsible for arranging treatment sessions and transporting children to them; parents who do not develop a strong working relationship with the clinician appear less likely to bring their children to services. In contrast, the clinician's ability to develop a successful working relationship with the *child* may affect different outcome measures. In particular, measures related to symptom relief are more closely linked to the clinician-child relationship. One study (Hawley & Weisz, 2005) found that older children (aged 7 to 16 years) receiving counseling services experienced greater symptom reduction when they felt a stronger working relationship with the clinician.

Parents may also play an important role in interpreting this clinician-child relationship. They may be able to provide insight into the child's behavior with and feelings about the clinician, particularly for children whose developmental stage limits their ability to recognize and express their own views on the clinician-client relationship. Children as young as 4 years have been shown to complete clinician-client rating scales reliably in counseling psychology (Accurso et al., 2013); however, this finding does not negate the value of parent insight as well (Shirk et al., 2011).

Although much of the work from counseling psychology on clinician-child and clinician-parent relationships may extend to speech-language pathology, there may be differences between the two fields as well. For example, communication disorders are likely to negatively impact children's ability to express their views on the clinician-client relationship. This may increase the importance of parent perspectives on the relationship. Alternatively, it is possible that relationships play a smaller role when the targets of treatment are speech or language disorders, rather than psychological ones. Thus, it is important to have field-specific research on clinician-client relationships in children's speech-language treatment.

In fact, the study of clinician-client relationships in speech-language pathology is in its infancy. The importance of these relationships has been acknowledged in the literature (e.g., Kovarsky, Schiemer, & Murray, 2011; Manning, 2010) but few empirical investigations exist. Moreover, most work has been qualitative and focused on clinician-client relationships in adult treatment (e.g., Plexico et al., 2010). In a recent effort to enable quantitative work in this area, Ebert (2017) adapted a tool for measuring clinician-client relationships (including goals, tasks, and bond) to fit speech-language treatment for children. The tool was then used in a preliminary validation study with 22 school-age children enrolled in speech-language treatment, their parents, and their speech-language clinicians. Results provided preliminary evidence that parallels findings in counseling psychology: parent ratings of the clinician-client relationship significantly predicted children's later attendance at therapy, even within this small sample (Ebert, 2017).

1.2. Determinants of clinician-client relationships

If clinician-client relationships play a crucial role in children's speech-language treatment, it is in turn crucial to understand the factors that influence the development and strength of clinician-client relationships. Such research is inherently complicated, but there are again some insights from the field of counseling psychology, and fledgling work in speech-language pathology. One factor that may play a role in the strength of clinician-client relationships is the length of treatment. Kendall et al. (2009) found that ratings of the clinician-client relationship in children treated for anxiety disorder increased steadily across the first 8 to 10 treatment sessions. These increases were apparent in both parent and child ratings of the relationship, and in both cases leveled off after the initial increase. Similarly, Kazdin, Whitley, and Marciano (2006) found increases in child ratings of the clinician-client relationship within the first 8 weeks of treatment for behavioral disorders. Although parent ratings in this study also increased, the difference over time was not significant.

Clinician experience may also play a role in the formation of clinician-client relationships. Although it might be expected that clinicians with more experience would be more skilled at forming strong working relationships with clients, Accurso and Garland

Download English Version:

<https://daneshyari.com/en/article/7267984>

Download Persian Version:

<https://daneshyari.com/article/7267984>

[Daneshyari.com](https://daneshyari.com)