

Importance of Adolescent Autonomy in Anxiety Disorder Treatment: An Exploratory Study of Individual Therapy Versus Relational Therapy

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ABSTRACT

Adolescents, who guard their autonomy fiercely, frequently are reluctant to fully engage in family therapy. This also is true for adolescents being treated for anxiety disorders, which is the most common mental health condition in this age group, with a prevalence of 6.5%. Because anxiety disorders present young and frequently persist into adulthood, early treatment is imperative. While caregiver involvement is often an aid in therapeutic treatment, this study aims to investigate whether relational or individual therapy is more effective for adolescents being treated for anxiety disorders. The study hypothesizes that adolescents will have better outcomes in individual therapy.

INTRODUCTION

Anxiety disorders are the most common of all mental health conditions for adolescents, with a 6.5% prevalence rate (Schwartz et al, 2019). Given the important developmental need for autonomy during late adolescence (Levine et al., 2016), and with it a sense of independence and privacy, some clinicians experience difficulty achieving client engagement from teens when conducting relational therapy. Considering the lack of relationally-trained clinicians in comparison to individually-trained clinicians (Washington State's Behavioral Health Workforce, 2017) as well scheduling issues that can occur when involving more than one person, individual therapy may be more accessible overall. Individual therapy, from both relationally-trained and individually-trained clinicians, may create a better environment for client autonomy, which has been shown to be a vital part of therapeutic treatment (Ryan et al., 2008). With the growing field of relational/family therapy, little research has been done to show the differences in treatment efficacy between relational therapy and individual therapy for late adolescents experiencing anxiety disorders.

PRIMARY AIM AND HYPOTHESES

Research Question

Is relational therapy or individual therapy more effective for treating anxiety disorders in adolescents?

Hypothesis

Individual therapy is more effective for teens/late adolescents than relational therapy sessions.

METHODS

Participants

Participants

Adolescents diagnosed with a DSM-V anxiety disorder within the last two years. Participants will be recruited from the Seattle Children's Hospital inpatient psychiatric ward and through referrals from the Greater Seattle Therapists Facebook group.

Exclusion Criteria

Participants must not have active suicidal ideation. Participants must not have any comorbid conditions outside of those listed for participation, with the exclusion of depressive disorders.

Sample Size

150 adolescents between the ages of 13 and 17 years-old receiving either individual therapy or relational therapy for treatment of an anxiety disorder.

Procedures

- Participant responses to five assessments will be collected online through Qualtrics and will be analyzed with SPSS.
- Participants will complete eight sessions of either relational or individual therapy.

MEASURES

Comparative Measures

The following will be administered before the first treatment session and again at week 10, two weeks post treatment. Pre- and post-test mean scores will be compared:

- Beck Anxiety Inventory (BAI). 21-item Likert scale of anxiety symptoms.
- Difficulties in Emotion Regulation Scale (DERS). 36-item (e.g. "I am attentive to my feelings.")
- Experiences in Close Relationships-Relationships Structures Questionnaire (ECR-RS). 9-item (e.g. "I talk things over with this person.")

Pre-Test Assessments

- Computerized-Diagnostic Interview Schedule for Children will be used to confirm the diagnosis reported by participants.
- The Suicidal Ideation Questionnaire – Junior will be used to exclude participants with suicidal ideation. 15-item (e.g. "I thought about writing a will.")

RESULTS

Research Question

Is relational therapy or individual therapy more effective for treating anxiety disorders in adolescents?

A t-test regression will be used to compare pre-test/post-test mean data from the BAI, DERS, and the ECR-RS in the individual therapy and relational therapy groups, before treatment, and at week 10.

Sampling Procedures

- Study participants between the ages of 13-17 with diagnoses of an anxiety disorder will be recruited from the inpatient psychiatric ward at Seattle Children's Hospital.
- Researchers will also seek referrals from clinicians on the Greater Seattle Therapists Facebook group.

Discussion

Social Implications

If, as we hypothesize, delivering individual therapy to adolescents with an anxiety disorder is more effective than relational therapy, this is likely to result in a number of positive social changes, including improved social functioning, academic performance, and family dynamics for adolescents in treatment.

Clinical Implications

If our hypothesis is supported, clinicians will have better insight for designing treatment plans for adolescent clients with anxiety disorders. The need to only schedule sessions for the individual client, rather than including family or caregivers, creates potential for decreasing scheduling conflicts and increasing treatment adherence.

Implications for Future Research

This exploratory study provides guidance for clinicians when deciding the appropriateness of when to implement relational therapy or individual therapy for mental health treatment. Future studies also could examine the cost effectiveness of individual versus relational treatment for adolescents with anxiety disorders.