**Title**: Understanding Therapy Utilization Among Autistic Adolescents: A Focus on Common Factors and Barriers

**Authors**: Marian. A. Castro1 & Jessica. M. Schwartzman 1,2,3

**Introduction**: Research demonstrates the positive impact of psychotherapy on mental health outcomes in neurotypical adolescents. Though autistic adolescents experience higher rates of depression and anxiety, few treatment options are available for this population. In the present study, we investigated psychotherapy utilization among autistic adolescents and used a common factors approach (i.e., certain core elements to any psychotherapy are critical to effective therapeutic outcomes, regardless of the specific modality used). Specifically, we investigated adolescent ratings of common factors including therapeutic alliance, treatment expectations, and the specific skills learned in therapy. As parents play a key role in treatment access and engagement, we also examined parent ratings of adolescent experiences in therapy.

**Method**: Participants were recruited from the community as part of a longitudinal investigation of mental health outcomes among autistic adolescents (14-17 years old) without intellectual disability (K23-MH131852; PI: Schwartzman); data collection is ongoing. Given current enrollment rates, we plan to collect and analyze data from 45 autistic adolescents and 45 parents by April 2025. Here, we present findings from the first 10 autistic adolescents and 10 parents recruited (N=20). In a study visit, adolescents and their parents provided demographic data and completed a mixed-methods questionnaire about adolescent psychotherapy experiences. The questionnaire collected quantitative (e.g., Likert-scale) and qualitative (i.e., free text response) data from adolescents and their parents about many aspects of psychotherapy including acceptability (e.g., usefulness, likelihood of recommending to others, etc.), therapeutic alliance, and facilitators and barriers to engaging in psychotherapy, among other topics. Descriptive statistics (e.g., mean, median, range, etc.) were used to examine quantitative data, while conventional content analysis was employed to understand the qualitative data.

**Results**: Participants included 10 autistic adolescents (M=15.9 years old, SD=1.9, Range: 14-17; 2 cisgender female, 5 cisgender male, 3 gender diverse) and 10 of their parents. Results showed that most adolescents (n=6; 60%) received psychotherapy at the time of assessment, with supportive/talk therapy and social skills interventions as the most reported types of psychotherapy. Most adolescents perceived psychotherapy to be logical [Med = 7 (logical), Range: 5-9 (somewhat logical – very logical)], useful [Med = 7 (useful), Range: 5-9 (somewhat useful – very useful)], and helpful in improving their functioning (Med = 70% improvement, Range: 20-100%).

Similarly, most parents perceived their child’s psychotherapy to be logical [Med = 8 (logical), Range: 4-9 (slightly logical – very logical)], and useful [Med = 7 (useful), Range: 4-9 (slightly useful – very useful)]. Parents reported greater neutrality regarding improvements in the child’s functioning (Med = 50% improvement, Range: 20-80%) than adolescents.

Of adolescents receiving psychotherapy (n=6), breathing exercises and interpersonal skills were the most reported skills learned in therapy. Interestingly, perspective taking skills and challenging negative thoughts were the most reported skills learned in therapy from parent perspectives. In terms of therapeutic alliance, most families reported a strong bond between adolescents and therapists (Adolescent ratings: M=38.71, SD=4.07; Parent ratings: M=37.78, SD=7.36) and moderate agreement between adolescents and therapists about treatment goals (Adolescent ratings: M=29.29, SD=3.04; Parent ratings: M=28.00, SD=4.95). Of adolescents not receiving psychotherapy at the time of assessment (n=4), two adolescents expressed interest in psychotherapy, but they faced barriers in accessing therapy (i.e., financial limitations, lack of family support).

**Discussion:** Findings show that most adolescents found therapy logical, useful, and effective, which aligns with existing literature on its benefits. On average, adolescents reported strong therapeutic alliances with therapists, emphasizing their role in positive outcomes. Though parents viewed therapy as logical and useful, they also reported greater neutrality regarding their child's improvements. This discrepancy may indicate misalignment between parents’ expectations and their child’s therapeutic experiences, suggesting a need for enhanced communication to bridge this gap. Parents reported different skills learned in therapy compared to their children, highlighting the importance of considering family dynamics in treatment planning and evaluation. Findings also show financial barriers as a significant challenge for those not receiving therapy, highlighting the urgent need for policy changes to enhance access. Additionally, some adolescents expressed interest in therapy, but they faced obstacles such as lack of family support; this finding points to the role of parental involvement in facilitating access to mental health services. Initiatives that educate families about available resources and support may mitigate access issues.

**References:** Adams, D., & Young, K. (2021). A systematic review of the perceived barriers and facilitators to accessing psychological treatment for mental health problems in individuals on the autism spectrum. Review Journal of Autism and Developmental Disorders, 8(4), 436-453.

Karver, M. S., De Nadai, A. S., Monahan, M., & Shirk, S. R. (2018). Meta-analysis of the prospective relation between alliance and outcome in child and adolescent psychotherapy. Psychotherapy, 55(4), 341.

Levickis, P., McKean, C., Wiles, A., & Law, J. (2020). Expectations and experiences of parents taking part in parent–child interaction programmes to promote child language: a qualitative interview study. International journal of language & communication disorders, 55(4), 603- Wood, J. J., Ehrenreich-May, J., Alessandri, M., Fujii, C., Renno, P., Laugeson, E., ... & Storch, E. A.

Wampold, B. E. (2017). What should we practice? A contextual model for how psychotherapy works. The cycle of excellence: Using deliberate practice to improve supervision and training, 49-65.

Wood, J. J., Ehrenreich-May, J., Alessandri, M., Fujii, C., Renno, P., Laugeson, E., ... & Storch, E. A. (2015). Cognitive behavioral therapy for early adolescents with autism spectrum disorders and clinical anxiety: A randomized, controlled trial. Behavior therapy, 46(1), 7-19.

Children’s Hospital Los Angeles

2 Keck School of Medicine, USC

3 Vanderbilt University Medical Center