One size doesn’t fit all: the nature and context of the therapeutic relationship in the treatment of adults with anorexia nervosa

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Overall aim of the study

What is nature, process and context of the therapeutic relationship from the perspective of adults with anorexia nervosa?
Methods

**Constructivist Grounded Theory**
- Broad/open investigation
- Concept driven analysis and theory development
- Structured but flexible data gathering and analysis process
- Reflexivity of the researcher
- Study carried out over 3 phases

(Charmaz 2014, Birks and Mills 2015)

**Online Research Methods (ORM)**
- Protects participant anonymity
- Accesses participants from wide geographical area
- Accesses hard to reach health populations
- Use of a dedicated website TherRel
- Collected elicited written accounts of participant experiences
- Also used existing autobiographies and online blogs as data

(Gambling and Long 2012, James and Busher 2009, Walker 2013b)
Letting go: balancing the paradox of control in the therapeutic relationship

Individual goal negotiation

One size doesn’t fit all

Seeing the individual not the diagnosis
Seeing the whole person

Developing trust in the therapeutic relationship

They just got me: feeling understood
Letting go: balancing the paradox of control in the therapeutic relationship

Central feature of anorexia nervosa and the therapeutic relationship

Manifests around goal planning

Collaborative approach is seen as more successful

Elements of choice, negotiation and shared responsibility

Balanced within context of the treatment setting and stage of treatment

Needs to be considered individually

Perception of equality within the relationship, rather than a struggle for control

Process of letting go or relinquishing control in order to gain control within therapy

High levels of trust required
Developing trust in the therapeutic relationship

**Therapist actions**: reliability, consistency around appointments and plans

**Therapist interpersonal style**: demonstrating acceptance, not judging, listening, showing respect

Reciprocal trust

Time

Specialist knowledge - authoritative not authoritarian  (Evans and Waller 2012)
They just got me: feeling understood and the role of empathy in the therapeutic relationship

- Therapist warmth and compassion (*human-ness*)
- Non-judgemental approach of the therapist
- Feeling understood and accepted as a person first, not just as a diagnosis
- Understanding based on knowledge: of the individual and of anorexia nervosa
- Therapist belief and realistic hope for the potential for change
- Understanding but authoritative (not collusive)
- Therapist gender?
Letting go: balancing the paradox of control in the therapeutic relationship

Individualised, negotiated goal setting

One size doesn’t fit all

Seeing the individual not the diagnosis

Understanding the whole, unique person

Developing trust in the therapeutic relationship

*They just got me*: feeling understood
What the participants said:

The therapist made an effort to ‘get to know me’ and allowed me to just speak and tell her ‘my story’ during the first session.

It was essential for me to feel I had some control over my treatment, although I was aware that control was one of the problems that had to be addressed.

Feeling that they understood was a powerful moment. I had never felt like that before and I didn’t realise that I ever would. It really makes you feel like someone is on your side and that you aren’t alone in whatever it is you are going through.
I feel this approach was tailor-made to my needs and that if someone had needed a more softly, softly approach that’s what they would have got. It felt as if we were a team, trying to reach the same goal.

In short term therapy it’s really hard to build a relationship...I don’t feel I can trust them and there’s no way they can see me as an individual.

It’s important to acknowledge that patients with the same illness are still different and not to assume things just because you have experienced a similar patient before.
Conclusions

- Balancing control by working in collaboration
- Developing trust through therapist actions, interpersonal style and specialist knowledge
- Understanding and accepting the individual not the “anorexic”

Findings have relevance to severe and enduring anorexia nervosa where the individuality of the treatment approach and the therapeutic relationship is viewed as key to engagement.

The findings concur and add to other studies where the therapeutic relationship is highlighted as being important by adults with anorexia nervosa.

MOSIAC Trial (Schmidt et al 2015)
   (Lose et al 2014)
   (Zainal et al 2016)
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TherRel webform
https://healthcarestudies.cf.ac.uk/therrel
References


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