Guided Recovery: An Interpretative Phenomenological Analysis of Service Users’ Experiences of Guided Self-Help for Bulimic and Binge Eating Disorders

Carolyn R. Plateau, National Centre for Sport and Exercise Medicine, School of Sport, Exercise and Health Sciences, Loughborough University
Faye A. Brookes, National Centre for Sport and Exercise Medicine, School of Sport, Exercise and Health Sciences, Loughborough University, Vincent Square Eating Disorders Service, Kensington & Chelsea
Matthew Pugh, Vincent Square Eating Disorders Service, Kensington & Chelsea

The efficacy of Cognitive Behavioral Therapy–based Guided Self-Help for mild to moderate bulimia and binge eating disorders has been well supported. However, limited research has explored in-depth individual experiences of this treatment approach. In-depth semi-structured interviews were conducted with 4 individuals who had completed Cognitive Behavioral Therapy–based Guided Self-Help (CBT-GSH) for bulimic or binge eating disorders. The interviews were transcribed verbatim and subsequently analyzed using Interpretative Phenomenological Analysis (IPA). Three superordinate themes emerged: Autonomy and volition; A dynamic relationship: the guided and the guide; and The unwanted friend. The reciprocal nature of the guide/guided relationship was identified as integral to the success of the therapeutic approach. However, participants expressed initial uncertainty towards the therapeutic process, and experienced an uncomfortable dissonance between a lack of volition in therapy seeking and the need to continually self-prescribe CBT-GSH. The findings affirm the central role of the guide in promoting motivation to engage with therapy and highlight the potential benefits of in-session weighing. However, it may be necessary to provide additional support on commencing CBT-GSH to address concerns about the therapeutic approach in this group.

Keywords: cognitive behavioral therapy; eating disorder; low-intensity interventions; motivation; satisfaction

1077-7229/13/© 2018 Association for Behavioral and Cognitive Therapies. Published by Elsevier Ltd. All rights reserved.
Guided Self-Help for Eating Disorders

The advantages and efficacy of CBT-GSH have been widely researched and supported, with evidence to support the efficacy and cost-effectiveness of CBT-GSH for BN and BED (Lynch et al., 2010; Sanchez-Ortiz & Schmidt, 2010; Sysko & Walsh, 2008), and particularly for patients with mild to moderate BED (Beintner, Jacobi, & Schmidt, 2014). For example, a recent metaregression demonstrated an overall effect in favor of CBT-GSH compared to controls in reducing eating disorder psychopathology (a moderate effect size equating to half a point on the EDE-Q/EDE was observed) and in reducing binge abstinence (19% increased likelihood of abstinence for those receiving CBT-GSH; Traviss-Turner, West, & Hill, 2017). Moderators of improvement suggest that abstinence from binge eating is most likely in participants with a BED diagnosis (Traviss-Turner et al., 2017). Current guidelines emphasize the importance of identifying and incorporating patient perspectives into therapeutic approaches in order to successfully treat eating disorders (NICE, 2004; Peterson, Becker, Treasure, Shafran, & Bryant-Waugh, 2016). Indeed, qualitative studies can complement outcome-based research through enhancing our understanding of the participant motives, expectations, concerns, and experiences of engaging in therapy. In addition, qualitative research may help to reveal components of CBT-GSH that are more or less acceptable and/or helpful, which could facilitate improvements to delivery and potentially efficacy of the treatment. At present, a small body of qualitative research has attempted to explore the patient experience of CBT-GSH, and studies have yet to adopt interpretative methodologies to understand how patients experience CBT-GSH. Interpretative Phenomenological Analysis (IPA) is commonly used within health psychology to facilitate the exploration of the personal meanings that individuals assign to their illness experiences (Brocki & Wearden, 2006; Smith & Osborn, 2008). It draws upon phenomenological origins in that it involves a detailed examination of the participant’s lived experiences, and is concerned with individual subjective experiences, rather than attempting to formulate objective accounts (Smith, Flowers, and Larkin, 2009). IPA is grounded in hermeneutics—recognizing the central role of the researcher in generating interpretive insights, but also acknowledging that interpretations are bounded by the abilities of participants to articulate their experiences (Brocki & Wearden, 2006;
دریافت فوری
متن کامل مقاله
امکان دانلود نسخه تمام متن مقالات انگلیسی
امکان دانلود نسخه ترجمه شده مقالات
پذیرش سفارش ترجمه تخصصی
امکان جستجو در آرشیو جامعی از صدها موضوع و هزاران مقاله
امکان دانلود رایگان ۲ صفحه اول هر مقاله
امکان پرداخت اینترنتی با کلیه کارت های عضو شتاب
دانلود فوری مقاله پس از پرداخت آنلاین
پشتیبانی کامل خرید با بهره مندی از سیستم هوشمند رهگیری سفارشات