

ABSTRACT

Anorexia nervosa (AN) is one of the most lethal and debilitating psychiatric disorders with a long recovery rate, underscoring the need for efficacious treatment. Although research has made significant advances in individual and systemic treatment options for AN, none have examined the use of family-based treatment options with adults experiencing AN. The following study aims to explore the efficacy of Emotionally-focused family therapy (EFFT) in the treatment of AN with the adult population.

INTRODUCTION

- AN is among the most lethal psychiatric disorders with an estimated mortality rate of 5.6% per decade and a 57-fold increased risk for suicidality, making efficacious treatment highly important.¹
- AN is fairly chronic and one of the most challenging disorders to treat, with psychotherapy being the primary intervention.²
- Psychological interventions remain the treatment of choice, however there is no leading treatment for adults experiencing AN and low to moderate recovery as well as high relapse rates are common.³
- Given Starting Family-based therapy models have been successfully implemented with adolescents experiencing AN, however most of these have not been explored with adults experiencing AN.⁴
- Emotionally-focused family therapy (EFFT) and emotionally-focused couple therapy (EFCT) have shown promise to be a compelling framework in the treatment of some eating disorders in adult populations ^{5,6}, but to my knowledge none have examined EFFT's effectiveness in the treatment of AN with adults.

PRIMARY AIM AND HYPOTHESES

- This study seeks to build upon and extend previous proposed treatment frameworks by Johnson (1998) and Maier (2015) by examining the effectiveness of EFFT in reducing anorexia nervosa in adults.
- **RQ**: Is emotionally focused family therapy effective in reducing anorexia nervosa in adults?
- **H1**: EFFT is an effective treatment model to be used with adults experiencing anorexia nervosa.

Effectiveness of Emotionally-focused family therapy in adults experiencing Anorexia Nervosa

Lea Fingerhut **Seattle Pacific University** METHODS

Participants

□ The study sample will include adults (N = 30) ages 18+ who are currently meeting the DSM-V criteria for AN and have at least one family member present in family sessions throughout the duration of the study.

How recruited?

Through outpatient mental health agencies, medical clinics, hospitals and community centers in the Seattle metropolitan area.

Inclusion/Exclusion criteria

- Adults must be at least 18+ years old, meet the DSM-V criteria for AN and have at least one consistent family member present in family sessions.
- Participants will be excluded from the study if they are in concurrent treatment for eating disorders or have an active medical condition that may influence weight or eating.

Procedures

- Participants eating disorders symptoms will be assessed prior to the start of the study, at completion and at a 2-month follow-up after completion of the study.
- EFFT will be administered on a weekly basis for 60 min for a total of 15 family sessions.
- Sessions will be administrated by a licensed mental health clinician trained in EFFT.
- Treatment will utilize specific EFFT interventions tailored to anorexia nervosa.

MEASURES

- □ The Eating Disorder Examination Questionnaire (EDE-Q) addresses eating disorder concerns regarding weight, body shape, eating restrictions and frequency of eating disorder behaviors.
- □ The EDE-Q is a 28-item self-report questionnaire using 4 subscales (Restraint, Eating Concern, Shape Concern and Weight Concern) on a 7-point Likert scale with higher scores reflecting more problematic eating behaviors and attitudes.
- The EDE-Q will be given to participants at three different time intervals, at the entry (T1) and completion of the study (T2), as well as at the 2-month follow up (T3).
- Responses will be collected for each participant at T1, T2 and T3 to determine if a reduction of AN behaviors and attitudes occurred.





Q RQ: Is emotionally focused family therapy effective in reducing anorexia nervosa in adults?

- treatment and at a 2-month follow-up.
- month follow-up (T3).

Discussion

- mixed treatment outcomes (Byrne et al., 2017).
- treatment option.
- effectiveness.
- cultures.

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RESULTS

This data will be analyzed using an ANOVA to determine the extent to which symptoms of anorexia nervosa decreased between start of EFFT treatment, post-

□ It is expected that the ANOVA will show a decrease of AN behaviors and attitudes as measured by the EDE-Q after completion of EFFT treatment (T2) and at 2-

• AN is one of the most challenging disorders to treat and tends to be persistent with

□ If, as hypothesized, EFFT shows to be an effective treatment for adults experiencing AN, more clinicians could implement EFFT in their practice, offering a more systemic

• With implementation of EFFT in treatment, more clients suffering from AN will be able to seek family-based treatment beyond the adolescent years.

The results of this study may provide initial evidence that EFFT is successful in decreasing AN in the adult population, however future research could extend these findings by conducting randomized controlled trials to further solidify EFFT's

Additionally, the study sample was US-based, hence no evaluation can be drawn regarding EFFT's effectiveness across countries. Future research may investigate EFFT's effectiveness with adult clients experiencing AN in different countries and

References

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