

Why the context matters

4th March 2020

Michael Hyland

Professor of Health Psychology, Plymouth Marjon University

Aim of talk

- The contextual model of psychotherapy
- The reformulated contextual model
- Why and how the context matters to all forms of health related activity – from therapy to tourism to everyday life

Orientation

- Practice based on theory
- Theory tested with data
- All theories are based on metatheoretical assumptions that are not tested
- Paradigm shift is defined in terms of a change in metatheoretical assumptions

The current paradigm: The medical model and specific theories of psychotherapy

- The medical model
 - Specific pathophysiology
 - Fault correction model – treatments are fault-specific
- Specific theories of psychotherapy
 - Freud – repressed trauma,
 - Behaviourist – incorrect associations,
 - Existential – lack of meaning,
 - Cognitive – erroneous cognitions

The common factors or contextual model

- Rosenzweig, S. (1936). Some implicit common factors in diverse methods of psychotherapy. At last the Dodo said, 'Everybody has won, and all must have prizes.' *American Journal of Orthopsychiatry*, 6(3), 412-415. <https://doi.org/10.1111/j.1939-0025.1936.tb05248.x>
- Wampold, B. E., & Imel, Z. E. (2015). *The great psychotherapy debate: The evidence for what makes psychotherapy work*. Routledge.
- Component studies, allegiance effects, alliance effects

Jerome D Frank and Julia B Frank. Persuasion and healing (1991)

- An emotionally charged, confiding relationship with a helping person.
- A healing setting.
- A rationale, conceptual scheme, or myth that provides a plausible explanation for the patient's symptoms and prescribes a ritual or procedure for resolving them.
- A ritual or procedure that requires the active participation of both patient and therapist and that is believed by both to be the means of restoring the patient's health.

Contextual mechanisms that cause physiological change

- Expectancy, hope, placebo
 - Kirsch, I. (1985). Response expectancy as a determinant of experience and behavior. *American Psychologist*, 40(11), 1189-1202.
- Therapeutic bond
 - Rogers, C. R. (1959). *A theory of therapy, personality, and interpersonal relationships: As developed in the client-centered framework* (Vol. 3, pp. 184-256). New York: McGraw-Hill.
- Affective and empowering consequences of ritual
 - Hyland, M. E., & Whalley, B. (2008). Motivational concordance: An important mechanism in self-help therapeutic rituals involving inert (placebo) substances. *Journal of Psychosomatic Research*, 65(5), 405-413.

Three problems with the contextual model

- Lack of influence
- Theoretical weakness
 - Placebo
 - Therapeutic bond
- Lack of theoretical development
 - Lakatos I. (1971) History of Science and its Rational Reconstructions. In: Buck R.C., Cohen R.S. (eds) PSA 1970. *Boston Studies in the Philosophy of Science, vol 8*. Springer, Dordrecht.

Aims of the reformulated contextual model

- *A fault correction* model
- A theory that integrates the different contextual mechanisms
- A theory that integrates the therapeutic context with the extra-therapeutic context

- Draws on dual process theory and connectionism/artificial intelligence.

Dual process theory

Kahneman, D. (2011) *Thinking, Fast and Slow*. London, UK: Palgrave MacMillan

- System 1
 - Fast, automatic, based on heuristics
 - Implicit beliefs
 - Process unavailable to consciousness
- System 2
 - Slow, deliberate, rational
 - Beliefs or cognitions
 - Process available to consciousness
- Aliefs versus beliefs
 - Standing on the edge of a cliff
 - Haug, M. (2011). Explaining the placebo effect: Aliefs, beliefs, and conditioning. *Philosophical Psychology*, 24(5), 679-698.

Contextual model versus cognitive behaviour therapy

- Beck, A. T. (1967). *Depression: Clinical, experimental, and theoretical aspects*. Pennsylvania,
- Erroneous cognitions cause depression and anxiety
- Contextual model
- Implicit beliefs cause depression and anxiety
- Aliiefs versus beliefs
 - Standing on the edge of a cliff

Where do implicit beliefs come from

- The context
- Implicit beliefs are adaptive

- Danger - anxiety - avoidance of danger and attainment of safety
- Goal failure – sadness – disengagement from that goal to do something else

- The world is a dangerous place, everything is dangerous – anxiety
- The world is an unrewarding place, everything is unrewarding – depression

- Adverse conditions aren't enough

Why do implicit beliefs differ from reality

- The case of exam anxiety
- Implicit beliefs – exam is dangerous
- Cognitions – exam is dangerous but must do it to achieve higher goals.
- What happens when an implicit belief is ignored?
- Connectionism and artificial intelligence
 - The body adapts (learns from) to feedback
 - Exam anxiety increases as a function of the number of exams taken
 - McDonald, A. S. (2001). The prevalence and effects of test anxiety in school children. *Educational Psychology*, 21(1), 89-101.

Contextual paradigm for the cause of mental illness

- Anxiety and depression are the result of adaptation to a lifestyle where a person persists in sad causing and anxiety provoking activity.
- People do this for a variety of reasons,
 - Obligations to others
 - Higher order goals
 - No choice
- Personality correlates with depression and anxiety
 - Perfectionism
 - Altruism
 - Silencing the self

Paradigm for recovery

- Anxiety and depression are reduced by contexts that provide information that the world is a safe and rewarding place.

Psychotherapy

- **Contextual factors:**

- Expectancy that things will get better
- Relationship with a nice therapist
- A pleasant ritual consistent with the person's motives

- **Specific factors:**

- Cognitive change
- Gratitude therapy, self-compassion therapy, acceptance and commitment therapy

Contrast with specific models

- Change your erroneous cognitions, so you perceive the world more positively
- Change your experiences so you experience the world more positively

Other therapies

- Tai chi, yoga, pilates, Alexander
 - Massage, manual therapies
 - Reiki, spiritual healing
 - Flower essences, homeopathy
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- Expectancy that things will get better
 - Relationship with a nice therapist
 - A pleasant ritual

Hyland, M. E. (2005). A tale of two therapies: psychotherapy and complementary and alternative medicine (CAM) and the human effect. *Clinical Medicine*, 5(4), 361-367.

- Both psychotherapy and complementary and alternative medicine (CAM) provide a context that enhances the patient's ability to self-heal
- The therapist, not the therapy, is the important factor
- We do not understand why some therapists have a much greater therapeutic effect than other therapists

Extra-therapeutic aspects

- **Tourism and holidays**

- Kwon, J., & Lee, H. (2020). Why travel prolongs happiness: Longitudinal analysis using a latent growth model. *Tourism Management*, 76, 103944. <https://doi.org/10.1016/j.tourman.2019.06.019>
- Chen, Y., & Li, X. R. (2018). Does a happy destination bring you happiness? Evidence from Swiss inbound tourism. *Tourism Management*, 65, 256-266. <https://doi.org/10.1016/j.tourman.2017.10.009>

- **Meaningful activities/nature**

- Antonioli, C., & Reveley, M. A. (2005). Randomised controlled trial of animal facilitated therapy with dolphins in the treatment of depression. *British Medical Journal*, 331(7527), 1231. <https://doi.org/10.1136/bmj.331.7527.1231>
- White, M. P., Hunt, A., Richardson, M., Pahl, S., & Burt, J. (2020). Nature contact, nature connectedness and associations with health, wellbeing and pro-environmental behaviours. *Journal of Environmental Psychology*, 68. <https://doi.org/10.1016/j.jenvp.2020.101389>

Treatment and prevention

- Treatment reverses the adaptive process that causes depression and anxiety
- Prevention prevents that adaptive process happening in the first place.
- The narrative: we are shaped by our experiences, because we adapt to our experiences

- Mental health requires not only the avoidance of adverse circumstances but also the avoidance of contexts where people feel obliged to ignore their automatically generated feelings.

- What lifestyles promote or prevent mental illness?

Conclusion and practical implications

- Therapy
 - Make it a positive experience
 - Tourism
 - Enjoy yourself and don't stress yourself
 - Lifestyle
 - Listen to what your body and mind are trying to tell you.
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- Hope you *enjoyed* this talk!
 - THE END