Effectiveness of acceptance-based self-help for individuals with visible difference and social anxiety: a pilot randomised controlled trial.

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Introduction

Visible Difference

Historically, there have been many terms used to describe appearance which differs from cultural norms – such as disfigurement. The term "visible difference" is used throughout this research as it is viewed as more socially neutral than historical terms. Visible difference can be acquired or present from birth. Examples include: surgical scarring, burns, skin and hair conditions and craniofacial differences, such as Treacher Collins.

Appearance-related concerns

For some individuals, having a visible difference can have a profound psychological impact, such as negative body image, low confidence and reduced quality of life. This may be in part due to negative reactions from others. Many individuals with visible difference and mental health difficulties locate the source of their problem(s) in their visible difference and they may become pre-occupied with their appearance. Additionally, research has shown there is no clear relationship between the visibility of the difference and levels of distress [1]. Thus, psychological intervention for appearance-related concerns with individuals with visible difference focuses upon managing the impact of the difference (e.g. worry, avoidance etc.), rather than aiming to change the difference itself. This is similar to interventions for chronic health conditions.

Self-help and Acceptance and Commitment Therapy

- Effective for anxiety related concerns [2,3]
- Guided self-help effective for individuals with chronic pain [4,5,6]
- Positive outcomes also demonstrated for depression, tinnitus, fibromyalgia. Effect sizes tend to be small – medium [7].

Theoretically, acceptance-based treatment should be beneficial for individuals experiencing appearance related distress due to a visible difference.
ACT guides individuals to recognise aspects of their life of which they have no control and encourages value-directed behaviour (e.g. *I want to go out because I enjoy seeing my friends*) rather than problem-directed behaviour (e.g. *I want to go out, but people might stare at me*).

Aims

To develop and examine the effectiveness of an acceptance-based
self-help intervention aimed to: increase psychological flexibility, reduce appearance-related concern and improve quality of life.
A waitlist control group will be used for comparison.

Measures

- Comprehensive assessment of Acceptance and Commitment Therapy processes (CompACT [8])
- Brief Fear of Negative Evaluation scale – II   (BFNE-II [9])
- Work and Social Adjustment Scale (WSAS [10])

Hypotheses

1. Participants in the self-help intervention condition will increase their psychological flexibility
2. Participants receiving self-help intervention will demonstrate a significant decrease in social anxiety
3. Participants in the self-help intervention condition will significantly increase their quality of life

Method

Design

This study is a pilot waitlist control trial with one active intervention group. Data is collected pre- and post-intervention only – a period of four weeks. We aim to recruit 128+ participants online through relevant charities. Participants must self-identify as having a visible difference and experiencing anxiety due to appearance-related concerns. Participants must be 18+ and not currently receiving psychotherapy. Participants will complete the self-report measures and be randomised through the online survey software.

Intervention

An acceptance-based self-help booklet has been developed by the lead researcher with input from experts by experience. The booklet guides the reader through a variety of tasks, which are also provided on audio. Additionally, there are two expert by experience case videos which were created with the lead researcher (example quotes below). The materials will be provided over the internet and participants are encouraged to follow the booklet over a four-week period.

"All the 'what ifs' were heightened by my visible difference"

"… I still have the thoughts, just they're not as loud any more"

"… I can focus on what is happening at the time, not the future"

"I can control what I want to do, and what I want to achieve"

The booklet modules are outlined below:

Becoming aware of our experience
Mindfulness and willingness
Changing the impact of our thoughts
Values – what is important to us
Goals and barriers to change
Summary – maintaining confidence

Results and Discussion

This research is currently ongoing. Each hypothesis will be tested by examining the differences between groups pre- and post-intervention. The booklet will be provided to the waitlist control group after four weeks.

Implications

Participants in the self-help intervention condition will increase their psychological flexibility. Self-help materials have the potential to be accessible and low-cost psychological interventions. This is beneficial, given the restricted availability of psychological services. Furthermore, mental health services are typically not specifically provided for this population.
This study enables us to understand whether acceptance-based interventions are effective in this form, specifically considering whether brief acceptance-based approaches to appearance distress may be effective.

This research forms part of the lead researcher's training in Clinical Psychology.

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