

Research Dissertation Summary

The impact of a systemic approach to coaching on the wellness and wellbeing of adults with Transverse Myelitis and their primary caregivers

This paper briefly outlines research into coaching people with a rare neurological condition including the background, rationale, methodology used, findings, the project's limitations, and practical implications.

The dissertation, based on the research, was submitted by Barbara J. Babcock in April 2013 in partial fulfilment for the requirement of the MA in Psychological Coaching at Metanoia Institute (Ealing, London) in partnership with the London South Bank University.

Background

Transverse Myelitis (TM) is a rare auto-immune neurological condition that can result in mobility issues, incontinence, neuropathic pain, spasticity, fatigue and/or depression. These changes can be sudden and recovery periods, if achievable, vary. Aspects of a person's life and that of his/her family can be adversely affected.

Rationale for research

Given the author's personal experience of TM and seeing affected others wanting to make change but not sure how, psychological coaching was identified as an intervention to enable this population to achieve their potential and enhance their quality of life within the realities of the chronic condition.

Taking the systemic approach recognised that in addition to the person with the chronic condition, others are affected and they may desire/need emotional/psychological support. Also, the author's previous experience of coaching two people together, the parts of a system who will be affected by and affect the change each want to make, demonstrated improved relationships.

Research has demonstrated that including family members in medical or psychological/psychotherapeutic treatment of an individual's chronic condition can have a positive impact (Bray, 1995; McPheters & Sandberg, 2010; Fisher, 2000, 2006; Dunbar et al, 2008), but similar coaching research has not been identified.

Methodology

The researcher coached five women – two mother-daughter pairs and one mother – who are members of the Transverse Myelitis Society. Working with mothers and daughters was not planned; it emerged in the recruitment process.

The methodology, action research, was chosen as it aligns to the coach/researcher and participants/clients jointly answering the research question through the coaching process. As such, both action research and the intervention, coaching, align to social constructionism (Burr, 2003), the epistemological basis for this project. Thematic analysis was the method used to analyse the data.

Key concepts

Prior to embarking on the research the researcher established the context in which the research took place by reviewing and defining key concepts relevant to the research question.

The researcher critically reviewed definitions for health, health coaching, wellbeing and wellness.

The researcher believes that wellness is a process to achieving a state of wellbeing and both are multi-faceted. She referred to wellbeing coaching with a psychological rather than clinical focus and that wellbeing is self-assessed through the wellness process; this aligned with the researcher's values and coaching approach.

The researcher outlined her coaching approach including her chosen definition: "Coaching is unlocking a person's potential to maximise their own performance. It is helping them to learn rather than teaching them' (Whitmore, 2002, pg.8). Her coaching model aligns to the facilitative and non-directive approach rather than directive, and is underpinned by a relational approach and adult learning, person centred, existentialism and systemic theories.

The person's experience of a chronic condition was reviewed including:

- The emotional process the individual may experience: crisis, isolation, anger, reconstruction, intermittent depression, and renewal (LeMaistre, 1999).
- What can facilitate the 're-emergence of a positive self-image' (LeMaistre, 1999): goal-oriented striving, mastering something, external acknowledgement of competence, sense of humour, experiencing joy, a striving towards inner peace, the ability to adapt, learning coping strategies, a belief that one's self-worth transcends physical limitations and the 'responsibility to look outwards to re-establish quality in one's life' (LeMaistre, 1999), which assumes the person has autonomy and control.

Issues of autonomy, control, loss and uncertainty in relation to chronic conditions were also addressed. The author entered the research project with the assumption that the person with a chronic condition who has a primarily internal locus of control (Rotter, 1966; Rogers, 1989) with the ability to look outward, is in a better position to determine what is in their control and influence, identify and express their needs, and recognise when they need help and ask for it, thus enabling enhanced self-care/management of their condition.

Systemic constellations (Whittington, 2012; Hellinger, 1998, 1999; Hausner, 2011) was chosen as a specific systemic approach to use during the research as it originates from working with families, which the researcher did during this project.

Findings

The findings confirmed that coaching enhanced clients' wellness and wellbeing and reduced stress and anxiety. Contributing to this was:

- Developing clients' abilities to take control, which in turn enhanced how their capabilities to care for themselves as individuals and in relationship with others.
- Addressing uncertainty and loss in the context of a chronic condition.
- Addressing systemic issues of exchange (reciprocity) and place (Whittington, 2012), which improved family relationships for all clients.
- Developing clients' abilities to have more collaborative relationships with medical/healthcare professionals

Enabling this included identifying and addressing the following issues:

- Individual autonomy and control within the context of the family system
- Identifying clients' psychological 'vicious circle' thought patterns, which inhibited their ability to take control and self-care appropriately, and designing 'virtuous circles'
- Acceptance/acknowledgement or not of the condition's impact
- Living with ongoing uncertainty of the condition's impact
- Dealing with what one has lost as a result of the condition/illness
- The impact of illness on family dynamics and vice-versa

As a result of learning to manage herself differently in relation to family members, one client reported reduced stress and hence TM symptoms. By changing her internal thought processes regarding her relationship with TM, another client reported being better able to manage her chronic pain and subsequently reduced her pain medication. She also reported feeling more calm at the prospect that her TM might evolve into Multiple Sclerosis. Another client learned how to view the actions of others and issues differently so that she did not feel as much stress. All the mothers learned how to give responsibility for solving their adult children's problems back to their children.

The clients' issues of an external locus of control and family relationships existed prior to and were amplified by the condition's onset. As stress can exacerbate a chronic condition's symptoms, finding new ways to approach situations/people which one finds stressful can reduce stress and its negative impact.

The systemic issues of exchange and place mirrored potential mother-daughter symbiotic relationships, which highlighted the impact and importance of role modelling in parenting, and that illnesses/conditions may have a function in families (Hausner, 2011).

All clients spoke in detail about their issues, which the researcher referred to as 'story'. The function of clients telling their 'story' differed and proved to be a viable indicator of the clients' underlying issues. For example, with some clients 'story' potentially was a defence mechanism against making change. For another, story helped the client process her (traumatic) experience of TM. For another client, 'story' helped her find her place in her family system. The researcher also learned how her response to clients' detail mirrored her response to an historical imbalance in reciprocity with her own mother.

Research limitations and implications

Employing a systemic approach, working with the TMer and supporter, focusing on wellness and wellbeing, and having a very open research question complicated the research. Ring-fencing the research question further may have brought more focus and simplicity.

Application of the systemic approach differed among clients depending on the researcher's comfort levels with the location of coaching – public venue, Skype, and client's home. Therefore, systemic constellation work only occurred with two clients in their home, however the systemic constellation principles of acknowledgement and time, place and exchange were applied to all clients. For the other three clients, the systemic approach focused on the clients' patterns of behaving/thinking/feeling, patterns of relating with others and their impact, seeing issues from others' perspectives, and drawing clients' relational dynamics and thought processes.

This study's limitations were a small sample size and homogenous population who had their chronic condition for 3+ years. To enhance coaching's viability as an intervention for people with chronic conditions, research with men, different age and ethnic groups, other conditions, and people who have had their conditions for less time is recommended. Follow-up interviews could gauge whether participants maintained changes over time.

Given the impact that a serious illness/condition has on a family, there is scope to research working with parents and children to help them accommodate the illness/condition into the family system and continue to thrive as a family.

Practical implications

Coaching is another psychological intervention that can be offered to people with chronic conditions to increase their sense of wellness and wellbeing and quality of life. Family/couple based interventions are highly recommended.

The concept of coaching a parent and adult child can transfer to the work environment where coaching a line manager and subordinate can enhance the working relationship and mitigate any burgeoning issues.

References

Bray, James H., '3. Assessing Family Health And Distress: An Intergenerational-Systemic Perspective' (1995). Family Assessment. Paper 7.

Burr, V. (2003) *Social constructionism*, 2nd edition. Hove, UK: Routledge.

Dunbar, S.B, Clark, P.C., Quinn, C., Gary, R.A., Kaslow, N.J. (2008) Family Influences on Heart Failure Self-care and Outcomes. *Journal of Cardiovascular Nursing*, 23(3): 258-265.

Fisher, L. (2006) Research on the family and chronic disease among adults: Major trends and directions. *Families, Systems, & Health*, 24, 373–380.

Fisher, L. Weihs, K.L. (2000) Can addressing family relationships improve outcomes in chronic disease? Report on the National Working Group on Family-Based Interventions in Chronic Disease. *Journal of Family Practice*, 49(6): 561-6.

Hausner, S. (2011) *Even If It Costs Me My Life: Systemic Constellations and Serious Illness*. Santa Cruz, CA, USA: Gestalt Press.

Hellinger, B., Weber, G., Beaumont, H. (1998) *Love's Hidden Symmetry: What Makes Love Work in Relationships*. Phoenix, AZ, USA: Zeig, Tucker & Theisen.

Hellinger, B., and ten Hovel, G. (1999) *Acknowledging What Is: Conversations with Bert Hellinger*. Phoenix, AZ, USA: Zeig, Tucker & Theisen.

LeMaistre, J. Dr. (1999) *Coping with a Chronic Illness*, Available <http://www.alpineguild.com/COPING%20WITH%20CHRONIC%20ILLNESS.html>, (2012, January 18).

McPheters, J.K. PhD, Sandberg, J.G. PhD (2010) The Relationship Among Couple Relationship Quality, Physical Functioning, and Depression in Multiple Sclerosis Patients and Partners, *Families, Systems, & Health*, Vol. 28, No. 1, 48–68.

Rogers, C., Kirshenbaum, V. and Henderson (Eds.) (1989) *The Carl Rogers Reader*. New York, NY, USA: Houghton Mifflin Company.

Rotter, J. B. (1966). Generalized expectancies for internal versus external control of reinforcement. *Psychological Monographs*, 80 (Whole No. 609).

Whitmore, J. (2002) *Coaching for Performance: GROWing people, performance and purpose*, 3rd edition. London, UK: Nicholas Brealey Publishing.