

The effect of Art Therapy in individuals with Personality Disorders cluster B/C: a RCT.

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In this randomised controlled study, the effects of art therapy is examined on psychological functioning of patients with a personality disorder. It is expected that art therapy results in less personality pathology, more acceptance, and less...

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Personality disorders and disturbances in behaviour
Study type	Interventional

Summary

ID

NL-OMON38810

Source

ToetsingOnline

Brief title

Effect of Art Therapy in Personality disorders

Condition

- Personality disorders and disturbances in behaviour

Synonym

emotion regulation disfunction, Personality Disorders

Research involving

Human

Sponsors and support

Primary sponsor: UMC St. Radboud

Source(s) of monetary or material Support: Ministerie van OC&W

Intervention

Keyword: Art Therapy, Personality Disorders, Treatment

Outcome measures

Primary outcome

Acceptance and Action Questionnaire-II (AAQ-II, Dutch version, Jacobs et al., 2008) - concept acceptance/ experiëntiël avoidance of unpleasant experiences

At the final analysis a Repeated measures ANOVA will be used, when differences between the groups over time will be investigated. The expectation is that in the first period (T1-T2) the symptoms of group 1 (which gets the intervention) decrease and the symptoms of group 2 (which is on the waiting list) remain the same and differ on T2 from the experimental group.

In the second periode (T2-T3) we expect that the symptoms of both groups remain stable.

Secondary outcome

Schema Mode Inventory - 2 (SMI, Young et al, 2007) - concept personality pathology in schema modes

Dutch Mental Health Continuum-Short Form (MHC-SF, Dutch version, Lamers, et al., 2011)- concept positive mental health

Outcome Questionnaire 45 (OQ45, Lambert, 1996)- concept psychological complaints, interpersonal functioning and functioning in society role.

Mindful Attention Awareness Scale (MAAS, Schoevers et al., 2008)

Art Therapy Questionnaire for Personality Disorders, cluster B/C (BTV-PS b/c,
Haeyen, 2012)

Study description

Background summary

People with personality disorders are struggling with emotion and self-regulation issues . Art therapy is often part of the specialized treatment for clients with personality disorders. In art therapy change, development and / or acceptance processes are initiated and strengthened. Art therapy has an important experiential, action-oriented and / or creative quality. With various materials, tools and methods emotions, feelings, thoughts and behaviors are portrayed. This provides clues for impulse and emotion regulation, and focuses on patterns in feeling, thinking and acting, on the practicing of new roles, skills and behavior (Haeyen, 2007).

Research has shown that art therapy is largely appreciated by patients with personality disorders (Karterud & Pedersen, 2004; Shechtman & Perl Dekel, 2000). In the study of Karterud and Pedersen the overall benefit of the entire day treatment program (n = 319) was even valued higher than all other treatment groups, including psychodynamic group psychotherapy, cognitive group therapy, body-oriented therapy group and a problem-solving group (Karterud & Pedersen, 2004). These results showed that the appreciation of AT According to the researchers this is due to the "as if-situation" (Fonagy et al 2002). This is a safe method to explore, express and add meaning to their own inner world (mentalizing) by means of self-objects in the shape of artpieces. Besides satisfaction also the experience of the patient during art therapy was investigated. In an exploratory survey among 48 patients with personality disorders showed that patients consider art therapy as a means to acquire (self-) understanding, awareness of own patterns and promote reflection on themselves (Haeyen, 2007). This is also confirmed by a study that focused on the experience of patients during art therapy (n = 63) (Haeyen, 2011). Patients indicate that in art therapy intrapsychic integration is promoted and corrective (emotional) experience are gained. Experts in the field of art therapy in a panel discussion conclude that art therapy improves self-control and self-structuring (Haeyen, 2007).

No empirical research is available focusing on the effects of AT. A lot of studies, however, some have investigated broader treatment programs, in which

AT is included. Results are positive (Piper et al, 1996; Wilberg et al, 1998; Bateman & Fonagy, 1999 and 2004, Karterud & Urnes, 2004). Piper for example found a positive effect in an RCT on a day hospital psychotherapeutic program in comparison to a waiting list control group (Piper et al, 1993). Also four cohort studies showed a positive effect of intensive psychotherapy with art therapy as a part of the intervention (Karterud et al, 1992; Karterud et al, 2003; Krawitz, 1997; Wilberg et al, 1998; Wilberg et al, 1999).

Although literature suggests that AT has positive results we have to conclude that these are hardly based on sound empirical research. In effect studies the effect of art therapy for personality disorders is not sufficiently isolated to make statements about it. There is a need for research that isolates the effects of art therapy adequately. Although art therapy is recommended in guidelines (National Committee on Multidisciplinary Guideline Development in Mental Health, 2008) hardly any empirical support concerning its added value is available. This research aims to evaluate AT as treatment for people with personality disorders.

Study objective

In this randomised controlled study, the effects of art therapy is examined on psychological functioning of patients with a personality disorder. It is expected that art therapy results in less personality pathology, more acceptance, and less experiential avoidance of unpleasant inner experiences.

Study design

A randomized controlled design. Patients indicated for outpatient treatment aimed at personality problems are randomly assigned to one of the following conditions:

1. Art therapy.
2. Waiting list (control condition). This does not change the situation of the patients. They are only asked to complete questionnaires.

The procedure is as follows: After a general intake for treatment at GGnet, patients with personality disorder and indicated for treatment are placed on the waiting list. At this very moment, they will be approached for the present study. Through a letter patients are informed about the present research and are invited to participate. Agreement to participate is realized by signing the consent form.

After agreement, patients will be screened by a semi-structured diagnostic interview (SCID-II). All patients with a personality disorder (cluster b and cluster c) will be included in the study. They start immediately with the some questionnaires (T1). In the first condition patients are directly invited to start treatment. This treatment will take 10 weeks, one weekly session of Art therapy (1,5 hours). The participants from the second group only fill in the

questionnaires.

After 10 weeks, measurement 2 takes place for both conditions (T2). After T2 there will be no intervention. After another 10 weeks measurement 3 (T3) takes place.

The duration of the whole research project is expected to be 48 weeks.

Intervention

Art therapy. For the present study a protocol is designed for 10 sessions (1.5 hours weekly), based on the theory and methods as described in "Don't act out but live through" on art therapy for personality disorders (Haeyen, 2007). The content of the art therapy is aimed at improving mindfulness, emotion regulation skills and interpersonal functioning. This means: to make contact with, to express and to limit emotions for a better emotion regulation and acceptance of (also negative) experiences, feelings and thoughts. It will include aspects such as making their own choices and making realistic demands on themselves. This protocol is a closed group with a maximum of 8 to 9 participants.

Study burden and risks

Completing questionnaires, the interview and 10 weeks participating in an art therapy group is not expected to include risk. The effort per person in the experimental condition will be 20 hours, spread over 22 weeks (3 times 45 min. for questionnaires, 1 interview of a maximum of 2 hours, 10 weekly sessions of 90 minutes, one questionnaire only at the start and after the intervention (2x 10 min.), and a introduction with the art therapist of 20 minutes; total amount of 20 hours). The controlgroup will spend 4,5 hours.

Art therapy is a common form of treatment in mental health care. Although this treatment is widely used within the mental health, there is relatively little research on the effects of this treatment and the existing studies are of moderate quality. However, the available results seem promising that art therapy is useful and effective to psychological complaints. The experience in clinical practice show no heavy effort or risk.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

-18 years or older

-IQ>80,

-personality disorder, cluster B/C, is the main psychopathological diagnosis.

-adequate speaking of the Dutch language,

-medication: stable for at least one month.

Exclusion criteria

-acute crisis,

- psychosis,

- actual and serious suicidality,

- severe brain pathology i.e. serious stroke last year, severe epilepsy, delirium, dementia, cerebral trauma.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)
Control:	Active
Primary purpose:	Treatment

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	01-10-2014
Enrollment:	62
Type:	Actual

Ethics review

Approved WMO	
Date:	25-07-2013
Application type:	First submission
Review commission:	CMO regio Arnhem-Nijmegen (Nijmegen)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL44394.091.13