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Dissertation IF49 : Process and Outcome of Narrative Therapy for Major Depressive Disorder in Adults : Narrative Reflexivity, Working Alliance and Improved Symptoms and Interpersonal Outcomes

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At the outset, I would like to state that it has been a true pleasure to serve as an external reviewer for this outstanding dissertation study and manuscript. I would rank Ms. Vroman's dissertation in the top 5% of the 30-35 dissertation manuscripts that I have reviewed over the past 15 years. I have no doubt that this ground-breaking investigation of narrative reflexivity and narrative therapy outcomes will make an original contribution to both the psychotherapy process and outcome research literatures. Let me now elaborate further on some of the key reasons why I have come to this conclusion and also provide some suggestions for possible future publication venues and research directions.

First of all, it should be highlighted that Ms. Vromans - to my knowledge - has completed the first ever standardized psychotherapy research trial establishing the efficacy of Narrative Therapy approach for adult clinical depression. This is an important addition to the psychotherapy research literature given the broad adoption of Narrative Therapy interventions by practitioners worldwide. In her extensive literature review, Ms. Vromans demonstrates a thoughtful understanding of issues central to the application of quantitative outcome research methods and it is quite clear that this knowledge has informed each and every stage - from initial diagnostic assessment, to session outcome, pre-post symptom evaluations and process analyses - of this comprehensive, well-designed research trial. Additionally, she demonstrates a thoughtful understanding of statistical measurement issues with her application of pre-post follow-up assessment analyses and importantly, effect size, clinical significance and bench-marking comparisons with other standardized treatment trials. The statistical analyses provide substantive statistical support for the primary hypotheses posed in this study and the treatment effectiveness of a Narrative Therapy approach for adult depression - new findings of real importance for the psychotherapy treatment literature. It should be noted that this extensive research trial involving 47 depressed clients was mounted without the external research funding normally thought necessary for the completion of a standardized treatment trial - the candidate and her voluntary research team are to be commended for this remarkable effort. This achievement is even more impressive when we consider the fact that Ms. Vromans was required to originate all of the Narrative Therapy training manuals, training tapes, adherence measures and training workshops that were employed in this study. Simply a remarkable achievement overall.

Secondly, the completion of a clinical treatment trial and pre-post follow-up outcome analyses would normally constitute a comprehensive dissertation study, all on its own. Not satisfied however with 'simply' testing *if* Narrative Therapy for depression is efficacious, it is clear from the outset that Ms. Vroman's is keenly interested in

identifying key narrative process variables that might provide an in-depth understanding of *how* Narrative Therapy effects significant positive change in clients. To achieve this end, Ms. Vroman's first conducts a comprehensive, thoughtful review of the psychotherapy process literature and achieves the insightful conclusion that there has been 'limited progress in process-outcome research due to the neglect of language'. Beginning with core conceptualizations of the self that address the importance of language (Bakhtin) and self-multiplicity (James & Hermans), Ms. Vroman's then integrates a Narrative Therapy focus on new meaning-making and enriched story reconstruction (eg Bruner landscape of action and consciousness) with narrative process (eg Narrative Process Model and Coding System) and therapeutic alliance research findings to articulate an original conceptualization of narrative process change that she terms "narrative reflexivity ... a creative, inter-subjective and dialogical process, with inter-personal and intra-personal dimensions, through which individuals engage with their selves and others that is discernable in individuals dialogues." Having identified this key process variable, Ms. Vroman then proceeds to empirically test and provide validation for the contribution of client narrative reflexivity – assessed using Narrative Process Coding System – to overall treatment outcomes in a sub-sample of 5 high vs 5 low change clients. Importantly, these findings suggest that client intra-personal factors – such as expressed reflexivity – may be equally important to inter-personal factors that have been more often the focus of Narrative Therapy interventions and therapy process studies in the past. Ms. Vroman's makes a highly original contribution to Narrative Therapy theory and narrative process research with her conceptualization and testing of client narrative reflexivity and I would hope that she will proceed to publish these exciting research findings forthwith. In this regard, she may want to review a chapter by Angus & McLeod (2004) in which Herman's dialogical conceptualization of self is used to frame an understanding of narrative process mode shifts – including client narrative reflexive sequences – identified in one emotion-focused therapy session. In terms of future publications, it might also be advisable to use Jacobsen's RCI criteria rather than raw BDI change scores for the selection of high vs low change clients included in the NPCCS analyses re degree of narrative reflexivity. Either *Psychotherapy Research* or *Psychotherapy* might be appropriate journals for the publication of such a study. Finally, it should also be noted that interpersonal factors such as the therapeutic alliance were also addressed in this investigation with process-outcome analyses findings confirming the importance of the quality of the working alliance for effective therapeutic outcomes in Narrative Therapy of depression. An important direction for future research will be the investigation of the relationship between inter-personal processes such as the working alliance and heightened client narrative reflexivity in meaning-focused therapy approaches, a research program that I do hope Ms. Vroman's will have the opportunity to pursue in future research studies.

In conclusion, it is without reservation that I recommend that thesis IF49 : *Process and Outcome of Narrative Therapy for Major Depressive Disorder in Adults : Narrative Reflexivity, Working Alliance and Improved Symptom and Inter-personal Outcomes*, be accepted as meeting all dissertation requirements for the Doctor of Philosophy degree and on the basis of my critical review above, be nominated for an outstanding dissertation award at QUT.