**Therapist Beliefs about Reassurance Seeking in Emotional Disorders**

**Demographic information**

**I confirm that I have completed a consent form: 🞏 Yes 🞏 No**

Please complete the following information about yourself:

Your current job title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your professional background (e.g. clinical psychology):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your gender: 🞏 Female 🞏 Male

Your age: \_\_\_\_\_

Number of years in practice as a therapist post qualification (if still in training, please state this):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Which clinical or therapeutic model do you use most in your practice? Please choose only one:**

🞏 Behaviour therapy

🞏 Cognitive therapy

🞏 Cognitive behaviour therapy

🞏 Counselling

🞏 Eclectic

🞏 Integrated

🞏 Psychodynamic

🞏 Psychiatric

🞏 Systemic

🞏 Other - please state: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**How many clients with each of the following disorders as their main problem have you treated in the last 12 months? Please circle a category for each problem.**

Body Dysmorphic Disorder 0 1-5 6-10 11-15 16-20 20+

Depression 0 1-5 6-10 11-15 16-20 20+

Eating Disorders 0 1-5 6-10 11-15 16-20 20+

Generalised Anxiety Disorder 0 1-5 6-10 11-15 16-20 20+

Health Anxiety (Hypochondriasis) 0 1-5 6-10 11-15 16-20 20+

Obsessive Compulsive Disorder 0 1-5 6-10 11-15 16-20 20+

Panic Disorder 0 1-5 6-10 11-15 16-20 20+

Personality Disorders 0 1-5 6-10 11-15 16-20 20+

Post-Traumatic Stress Disorder 0 1-5 6-10 11-15 16-20 20+

Psychosis 0 1-5 6-10 11-15 16-20 20+

Social Phobia 0 1-5 6-10 11-15 16-20 20+

Specific Phobia 0 1-5 6-10 11-15 16-20 20+

Substance Misuse 0 1-5 6-10 11-15 16-20 20+

Other Clinical Problems 0 1-5 6-10 11-15 16-20 20+

**Please indicate, by ticking the boxes, if you think Reassurance Seeking is a common feature in the following disorders:**

|  |  |
| --- | --- |
| 🞏 Body Dysmorphic Disorder🞏 Depression🞏 Eating Disorders🞏 Generalized Anxiety Disorders🞏 Health Anxiety (Hypochondriasis) 🞏 Obsessive Compulsive Disorder🞏 Panic Disorder | 🞏 Personality Disorders🞏 Post-Traumatic Stress Disorder🞏 Psychosis🞏 Social Phobia🞏 Specific Phobia🞏 Substance Misuse🞏 Other Clinical Problems |

**Therapist beliefs about Reassurance Seeking in Emotional Disorders**

Please consider how much you agree with the following statements in relation to all ALL emotional disorders unless otherwise specified:

**0—10—20—30—40—50—60—70—80—90—100**

**Don’t agree at all Agree completely**

|  |  |  |
| --- | --- | --- |
|  | Giving reassurance usually forms a part of effective psychological treatment | \_\_\_\_\_ |
|  | Providing reassurance is an appropriate treatment technique | \_\_\_\_\_ |
|  | Giving reassurance is always helpful | \_\_\_\_\_ |
|  | There are negative effects of offering reassurance | \_\_\_\_\_ |
|  | Providing reassurance is an effective way to help my patients understand that they don’t need to be worried | \_\_\_\_\_ |
|  | Reassurance seeking is a common problem in clinically anxious people | \_\_\_\_\_ |
|  | Providing of reassurance can alleviate my client’s fears and doubts | \_\_\_\_\_ |
|  | I feel confident in managing repeated requests for reassurance from my patients | \_\_\_\_\_ |
|  | I should always offer my patients reassurance when requested | \_\_\_\_\_ |
|  | I feel frustrated when patients frequently seek reassurance from me | \_\_\_\_\_ |
|  | It is very important to be precise in the reassurance I offer to my patients | \_\_\_\_\_ |
|  | Requests for reassurance are attempts to reduce anxiety | \_\_\_\_\_ |
|  | I should never offer my patients any reassurance | \_\_\_\_\_ |
|  | Repeated provision of reassurance may contribute to the maintenance of emotional disorders | \_\_\_\_\_ |
|  | Clinically depressed individuals typically don’t seek reassurance persistently | \_\_\_\_\_ |
|  | Subtle reassurance seeking tends to occur undetected in the course of therapy | \_\_\_\_\_ |
|  | Patients often feel guilty when they seek reassurance repeatedly from other people | \_\_\_\_\_ |
|  | Giving reassurance is particularly important when treating depressed individuals who seek it | \_\_\_\_\_ |
|  | Repeated requests for reassurance are a form of ‘attention seeking’ | \_\_\_\_\_ |
|  | Reassurance seeking is only problematic in some anxiety disorders | \_\_\_\_\_ |
|  | Repeated reassurance seeking is always problematic | \_\_\_\_\_ |
|  | Responding to repeated requests for reassurance may enhance depression in depressed individuals | \_\_\_\_\_ |
|  | Carefully planned reassurance can be helpful in treatment of anxiety disorders | \_\_\_\_\_ |
|  | Reassurance seeking is a common problem in clinically depressed people | \_\_\_\_\_ |
|  | When a patient asks me for reassurance about their fears, it can have the effect of increasing my own feelings of doubt | \_\_\_\_\_ |
|  | Seeking reassurance reduces uncertainty for the patient | \_\_\_\_\_ |
|  | It is pointless to offer reassurance | \_\_\_\_\_ |
|  | Patients are aware that repeatedly seeking reassurance can strain and drain other people | \_\_\_\_\_ |
|  | **0—10—20—30—40—50—60—70—80—90—100****Don’t agree at all Agree completely** |  |
|  | Repeated reassurance seeking can be a problem because it can lead to alienation | \_\_\_\_\_ |
|  | When patients are anxious they find it very difficult to resist seeking reassurance  | \_\_\_\_\_ |
|  | Providing reassurance may enhance anxiety | \_\_\_\_\_ |
|  | Giving reassurance typically increases the patient’s doubts | \_\_\_\_\_ |
|  | I will upset my patients if I do not offer reassurance when requested to do so | \_\_\_\_\_ |
|  | I should ignore all request for reassurance from my patients | \_\_\_\_\_ |
|  | When a patient asks me for reassurance about their fears, it can have the effect of making me feel anxious  | \_\_\_\_\_ |
|  | Providing reassurance increases the urge for further reassurance | \_\_\_\_\_ |
|  | Patients usually believe that reassurance seeking is helpful | \_\_\_\_\_ |
|  | I feel guilty if I withhold reassurance | \_\_\_\_\_ |
|  | Repeated reassurance seeking has a damaging effect on interpersonal relationships | \_\_\_\_\_ |
|  | Giving reassurance typically decreases the patient’s doubts | \_\_\_\_\_ |
|  | When a patient is acutely anxious the only thing a family member can usefully do is to provide reassurance | \_\_\_\_\_ |
|  | I find it very hard to resist giving my patients reassurance | \_\_\_\_\_ |
|  | Sometimes all I have left to offer my patients is repeated reassurance | \_\_\_\_\_ |
|  | Patients who seek reassurance repeatedly from me do not trust me | \_\_\_\_\_ |
|  | By offering reassurance I show my clients that I care | \_\_\_\_\_ |
|  | If requests for reassurance are ignored they will eventually cease  | \_\_\_\_\_ |
|  | The reductions in anxiety that follow repeated reassurance are at best temporary | \_\_\_\_\_ |

**Therapist Beliefs and Treatment of Reassurance Seeking**

This questionnaire refers to Cognitive and Behavioural Therapies for anxiety disorders for individuals who seek reassurance persistently. For such patients please choose one column according to whether you think each of the following treatment elements are *undesirable*; *not necessary*; *preferable*; or *essential* when treating individuals that seek reassurance persistently.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | **Undesirable** | **Not necessary** | **Preferable** | **Essential** |
|  | Exploring your patient’s beliefs about reassurance seeking |  |  |  |  |
|  | Helping your patient to develop an alternative response to seeking reassurance, e.g. support |  |  |  |  |
|  | Offering your patient repeated reassurance when requested |  |  |  |  |
|  | Exploring how and from whom your patient seeks reassurance  |  |  |  |  |
|  | Advising relatives/carers to stop offering any reassurance |  |  |  |  |
|  | Weighing up the benefits and costs of seeking reassurance |  |  |  |  |
|  | Working with your client to test out the effects of seeking reassurance repeatedly on their anxiety and urges to seek further reassurance |  |  |  |  |
|  | Inviting relatives/carers to a session in which reassurance is discussed |  |  |  |  |
|  | Being deliberately unresponsive to all requests for reassurance from your patient |  |  |  |  |
|  | Drawing a diagram explaining the problem with reassurance seeking, which includes links between thoughts, feelings and behaviours  |  |  |  |  |
|  | Allowing your patient to contact you outside therapy sessions if they need reassurance |  |  |  |  |
|  | Offering a rationale for the detrimental role of excessive reassurance seeking |  |  |  |  |
|  | Exploring the interpersonal effects of repeated reassurance seeking |  |  |  |  |
|  | Strongly instructing your patient to stop seeking any reassurance |  |  |  |  |
|  | Explaining the role of reassurance seeking in maintaining anxiety |  |  |  |  |
|  | Rehearsing with relatives/carers ways of responding without giving reassurance |  |  |  |  |
|  | Other important treatment interventions which have been left out of this list, please state:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |