PEACE

Pathway for Eating disorders and Autism
developed from Clinical Experience

TREE OF LIFE

Thinking About The Bigger Picture

Presented by Beth Easton
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OUR PLAN

- Origins of the Tree of Life
- What is the Tree of Life?
- Thickening Questions – Branches
- Adaptations for Eating Disorders
- Tree of Life workshops
- Our Trees
- Patient Feedback and PEACE pathway feedback
- Outcomes/evaluation
- Staff reflections
- Key Takeaways

ORIGINS OF THE TREE OF LIFE

- Co-developed by Ncazelo Ncube & David Denborough
- originally in Zimbabwe when working together with communities impacted by HIV & AIDS, conflict & poverty
- For use with children, young people & adults
- In a wide range of countries across the world

WHAT IS THE TREE OF LIFE?

- A narrative, strengths-based approach
- A creative approach using a tree as a metaphor for each person's identity and aspects of their lives
- A group method – sharing stories; making visible quieter stories; encouraging a 'bigger picture' approach - An emerging forest
- Drawing our roots, ground, trunk, branches, leaves, fruits & flowers
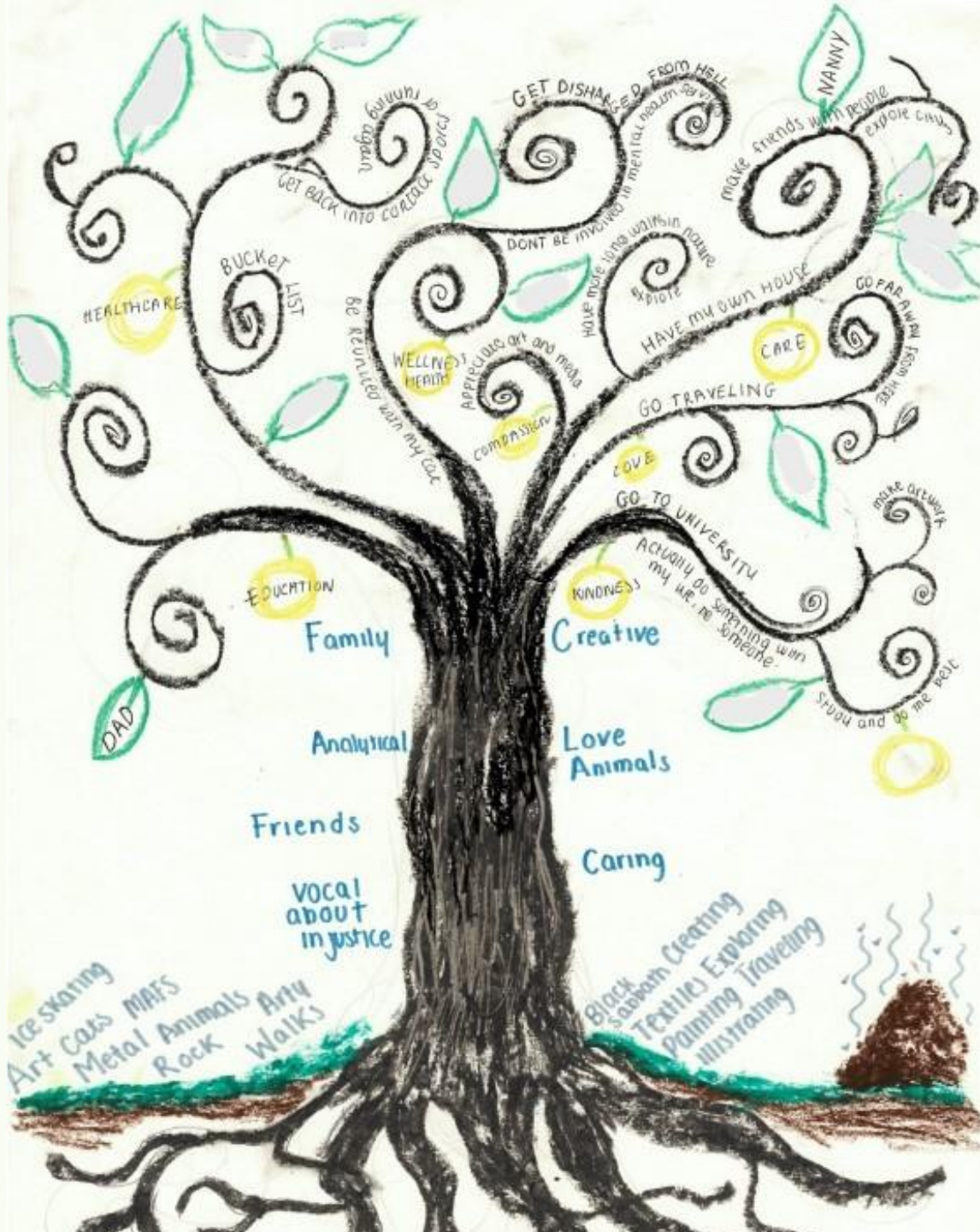
THICKENING QUESTIONS

ROOTS

LEAVES

- Where do you live? Who do you live with?
- What roles do you currently have?
- What do you like doing?
- What is your favourite spot at home, and who are you with when you are there?
- What is your favourite song/book/dance? Why is that important to you? Would you like to share with us?
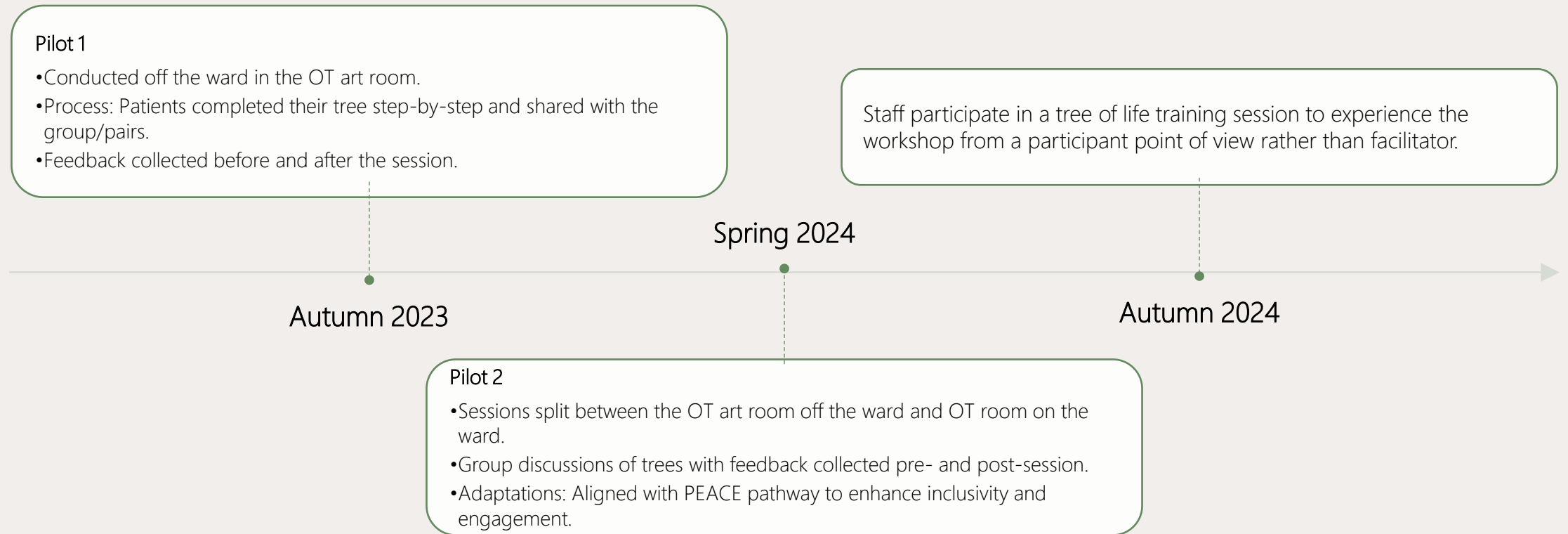
- Who are the people on your leaves?
- Why are these particular people most special to you?
- Can you share a memory/time of why this person is so special to you?
- How would that person think/feel knowing they are represented on your tree? What would it mean to them?

A COMPLETED TREE

TREE OF LIFE PILOTS

Workshops

Pilot 1
- Conducted off the ward in the OT art room.
- Process: Patients completed their tree step-by-step and shared with the group/pairs.
- Feedback collected before and after the session.

Staff participate in a tree of life training session to experience the workshop from a participant point of view rather than facilitator.

Spring 2024

Autumn 2023

Autumn 2024

Pilot 2
- Sessions split between the OT art room off the ward and OT room on the ward.
- Group discussions of trees with feedback collected pre- and post-session.
- Adaptations: Aligned with PEACE pathway to enhance inclusivity and engagement.
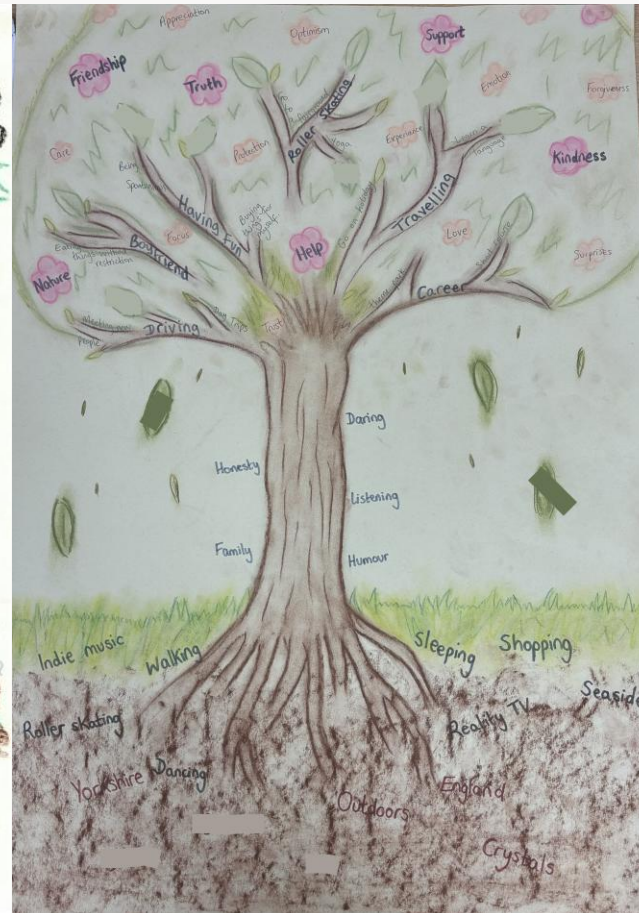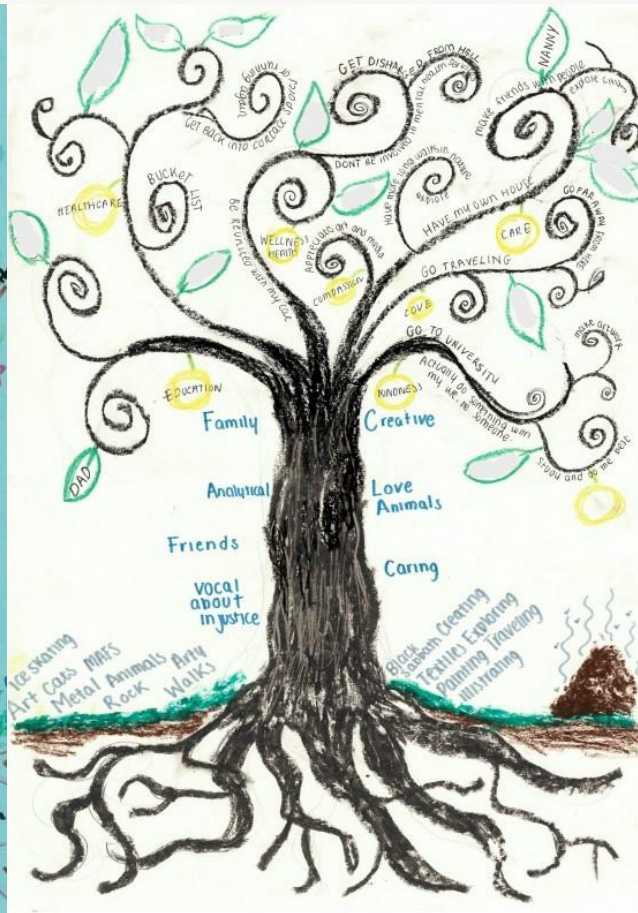
ADAPTATIONS FOR EATING DISORDERS

- **Specific changes for the PEACE pathway**
  - Having a safe person present
  - Overviewing the group beforehand
  - Varied communications options
- **Rationale for removing the 'storms' section**
  - To align with the population needs
  - Focus on positivity

OUR TREES

PATIENT FEEDBACK

THEMES

Engagement

'I remember it being quite a **nice therapeutic environment**, because it was done off the ward and it was quite good' – P1

'I liked that it was **interactive as in you did the tree as well as talking**, I thought that helped' – P2

Recognition of Support

'I think at the time **it made me feel more positive about recovering** and getting out of the hospital, **it made me realize what support system I actually have**' – P2

'I thought it was good; I remember writing about yourself and what helps you. **I liked writing who was there for me** and what I enjoy' – P3

'I remember thinking about my roots, and my family, and **remember feeling quite shocked by how many people I actually have around me**' – P1

Bigger Picture

'When you are on a ward you tend to become so shut off from the outside, it's hard to even think about your future and what you have to do with your life...you just become this disorder, and everyone is just thinking of you as your eating disorder. I think that was **really beneficial because it helped me stay connected to myself as a person**.' – P1

'I think, in here it's quite microscopic, so it helped me think about why I'm eating, why I'm doing stuff. **It helped me realize you have bigger things to think about, rather than the small world that is Tyson West 2**' – P2

PEACE PATHWAY FEEDBACK

Do you think the Tree of Life group is a good tool for individuals with Autism and Eating Disorders?

'Yeah, because it makes you write about what you like and enjoy' – P3

'I think it was good, **it wasn't just listening, the fact that it was interactive made it better for people with autism**. I think the only problem with it is that obviously people with autism can be perfectionists. So that could be the downfall of it. I think the fact that it was reiterated that the tree didn't have to be perfect, that did help.' – P2

"Yes, because it is a visual tool, **and visual tools are quite good for individuals with autism**, because they can visualize, for me I'm a visual person, **I find visual tools very helpful**' – P1
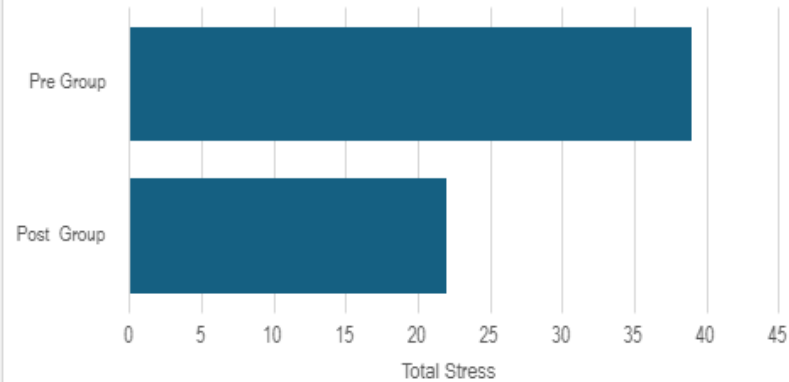
OUTCOMES & EVALUATION

- Patient Feedback Forms:
  - Asked participants to complete:
    - Tree of Life Pre- and Post- group questions
    - Stress Scale
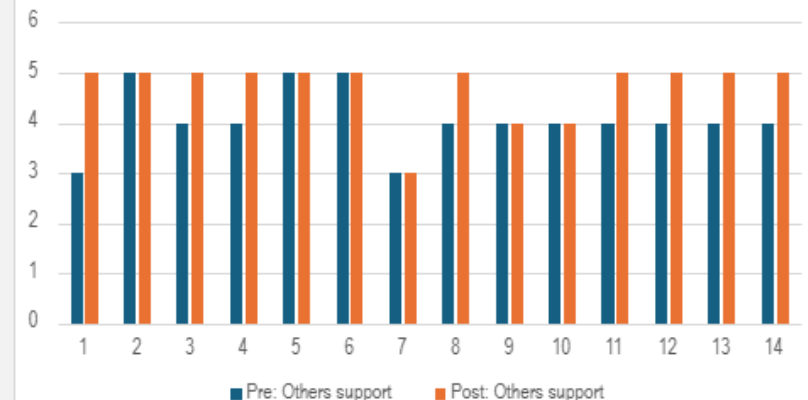   - The short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS)

Goals (excluding missing data)
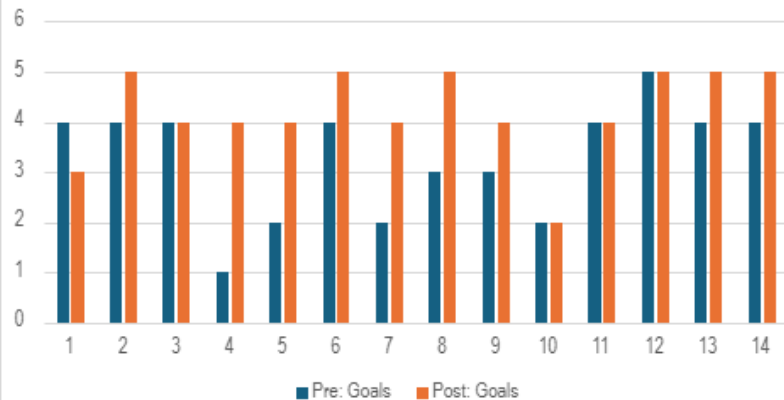
Group Stress

Ability to Identify Support

STAFF REFLECTIONS

Workshop Facilitation

Accessible to all – inclusivity – high attendance

All trees are unique & part of the forest

Comparing neurotypical vs neurodivergent patient experiences allows for a better understanding of how to improve the group

Participating in The Workshop

Every time I draw my tree, new & different aspects can emerge

We are sharing in our humanity together – less power imbalance

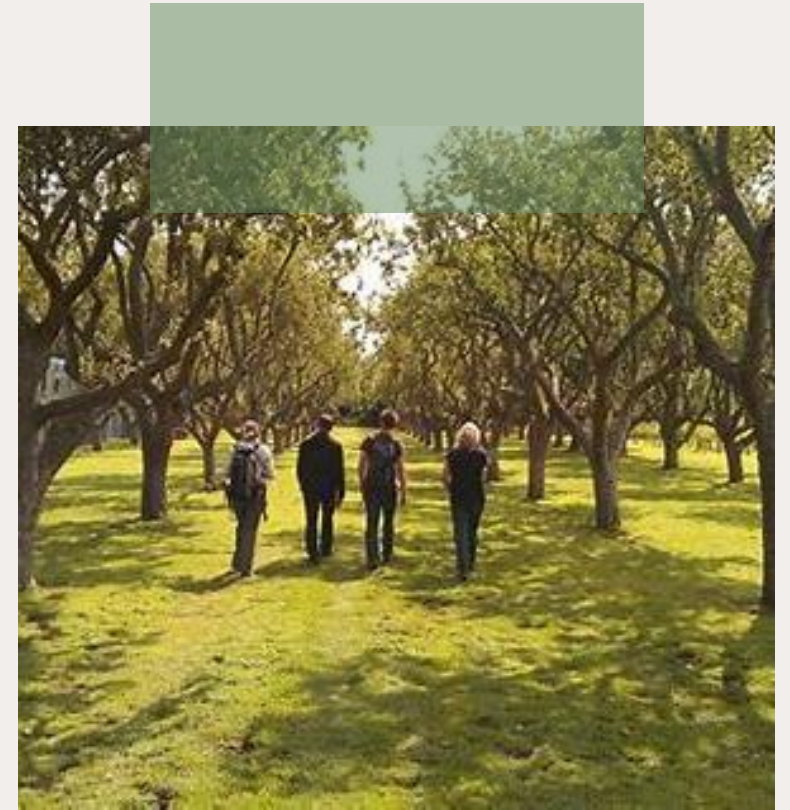Fosters an environment to learn more about patients beyond their illness
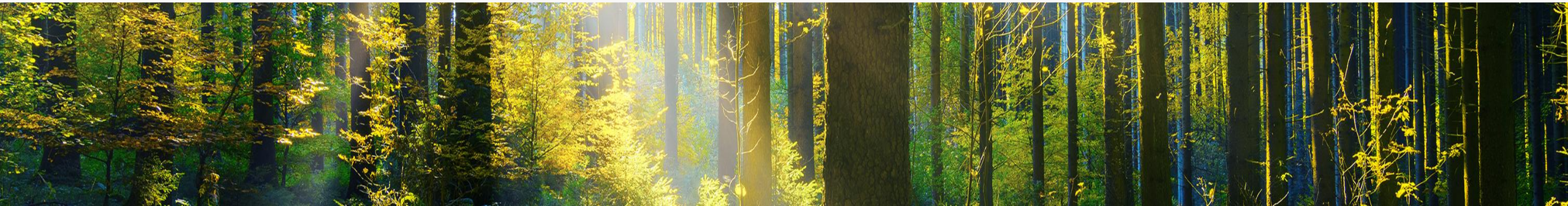
KEY TAKE AWAYS

❖ **Patient-Reported Benefits**:
- An off-ward environment fosters relaxation and creativity
- Visual & creative format increases accessibility for all
- Staff participation enhances group cohesion - building a sense of community
- Focus on positivity (strengths, aspirations) rather than negatives – fostering hope for all

❖ **Staff-Reported Benefits**:
- Each group is different based on the varied group members
- Allows staff to build relationships with all group members; to see their identities beyond their illness; to build a bigger picture for all

QUESTIONS?

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