

# Outcome Expectancy and Success With Cognitive-Behavioral Interventions: The Case of Guided Imagery

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**Purpose/Objectives:** To describe the role of outcome expectancy in the use of cognitive-behavioral interventions and to test three variables (history of imagery use, preferred coping style, and perceived credibility of the imagery provider) as predictors of outcome expectancy regarding guided imagery.

**Design:** Secondary analysis using a descriptive, correlational design.

**Setting:** Surgery clinics at a large, midwestern university hospital.

**Sample:** 75 women undergoing surgery for gynecologic or breast cancers.

**Methods:** Data were collected as part of an ongoing trial of guided imagery. Participants completed measures of outcome expectancy and predictor variables at a preoperative clinic visit.

**Main Research Variables:** Outcome expectancy regarding a guided imagery intervention, previous history with imagery, preferred coping style, and perceived credibility of the imagery provider.

**Findings:** Significant relationships were demonstrated between previous history of imagery use and outcome expectancy ( $r = 0.47, p < 0.01$ ) and between perceived credibility of the imagery provider and outcome expectancy ( $r = 0.45, p < 0.05$ ). Preferred coping style was not related to outcome expectancy in this sample. Psychometric properties of new instruments were satisfactory.

**Conclusions:** Previous history of imagery use and perceived credibility of the imagery provider were supported as predictors of outcome expectancy. Future research will be necessary to reexamine the predictive role of preferred coping style.

**Implications for Nursing Practice:** Nurses should be aware of the potential role of outcome expectancy in effectiveness of nursing interventions. Patients' previous use of cognitive-behavioral interventions and perceptions of credibility may be helpful in selecting appropriate strategies.

Cancer-related pain frequently is treated with analgesic medications; however, nondrug treatments, including several cognitive-behavioral interventions, have been identified as adjuvant strategies to enhance relief of pain and distress. Cognitive-behavioral interventions are strategies that attempt to change how one perceives, interprets, relates to, or responds to a noxious stimulus (Manetto & McPherson, 1996). For example, guided imagery is used to mentally reinterpret a painful stimulus into a less distressing and nonpainful experience

## Key Points . . .

- ▶ Outcome expectancy can be described as one's ideas about the anticipated result of using an intervention—one's belief that the intervention will work or not work.
- ▶ Specific outcome expectancies may influence whether an intervention is helpful. Positive outcome expectancy may help an intervention to work, whereas negative outcome expectancy may prevent it from working.
- ▶ Evidence suggests that previous experiences with the intervention and notions of the provider's credibility influence outcome expectancy.
- ▶ When selecting cognitive-behavioral interventions for their patients, nurses may find it helpful to inquire about the patients' outcome expectancy regarding specific interventions, their previous experiences with those interventions, and ideas about the provider's credibility.

experience (McCaffrey & Beebe, 1989). Individual differences in response to cognitive-behavioral interventions have been documented, suggesting that they work for some patients but not for others (Tan, 1982). Outcome expectancy, the belief that a specific outcome will be achieved, has been suggested as a potential moderator of the effects of these interventions (Kwekkeboom, 1999a). The purpose of this article is to describe the potential role of outcome expectancy in successful use of cognitive-behavioral interventions and to evaluate possible predictors of outcome expectancy. Data collected in an ongoing trial of guided imagery were used to test three variables (previous history of imagery use, preferred coping style, and perceived credibility of the imagery provider) as predictors of outcome expectancy regarding an imagery intervention. In addition, initial psychometric properties of instruments created to measure these constructs were assessed.

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