

Attachment Orientation and Relationships With Physicians and Nurses Among Israeli Patients With Advanced Cancer

Gil Bar-Sela, MD, Rachel Gruber, MA, Inbal Mitnik, MA, Doron Lulav-Grinwald, MA, and Dan Koren, PhD

OBJECTIVES: To examine the association between attachment orientation and relationships with physicians and nurses among Israeli patients with advanced cancer.

SAMPLE & SETTING: 52 patients with advanced cancer during active oncologic treatment.

METHODS & VARIABLES: Eligible patients who agreed to participate in the study completed the Experience in Close Relationships Scale, Working Alliance Inventory–Short Revised, and a list of topics, which were defined by the research team as central and common to patients' coping.

RESULTS: A correlation was found between avoidant attachment orientation and working alliance with nurses. In addition, patients' attachment orientation was found to be correlated with the type of topics they chose to share with the staff.

IMPLICATIONS FOR NURSING: Knowledge regarding the theoretical concepts of attachment orientation may assist nurses in providing tailored and beneficial communication patterns with patients.

KEYWORDS attachment style; cancer; medical staff; nursing staff; sharing; working alliance

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Relationships with medical and nursing staff have been found to be highly significant for the well-being and the coping process of patients with cancer (Halldorsdottir, 2008; Leloirain, Brédart, Dolbeault, & Sultan, 2012), particularly during advanced stages of the disease (Larson & Tobin, 2000). Open and direct communication with the staff was found to be related to reduced anxiety and a sense of comfort. In addition, it promoted understanding, trust, and agreement between patients and staff, thereby promoting adherence and better care (Li, Boquiren, Lo, & Rodin, 2011; Street, Makoul, Arora, & Epstein, 2009). The relationships between patients and staff can be defined and explored by the two theoretical concepts of working alliance and attachment style.

Working alliance (Bordin, 1979) is a concept from the field of psychotherapy that can be conceptualized as a specific aspect of the patient–staff relationship. The concept includes the following three elements (Bordin, 1979, 1980):

- Goals: Agreement and cooperation between the patient and caregiver regarding treatment goals
- Tasks: Agreement regarding the actions that need to be taken to accomplish treatment goals
- Emotional bond: Mutual liking and trust between the patient and caregiver

Working alliance in the medical context was found to be related to patients' satisfaction, perceived competence of the medical staff, and adherence to treatment (Bennett, Fuertes, Keitel, & Phillips, 2011; Fuertes, Boylan, & Fontanella, 2009; Parchman, Zeber, & Palmer, 2010). Among patients with cancer, a strong working alliance with the medical staff was found to be related to high perceived social support