

# The Mind-Body-Connection Group: Youth and Caregiver Perspectives on a Multi-Family Group Therapy for Adolescent Somatization

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## Abstract

**Introduction & Hypothesis:** Pediatric somatization is a common psychiatric presentation. Psychological treatments showing promise focus on addressing maladaptive cognitions. However, several treatment factors remain unknown, including: the application of care in groups, the role of caregivers in treatment, and the relevance of focusing on emotions. This qualitative study articulates the narratives of youth and their caregivers who attended a multi-family group treatment for adolescent somatization that focuses on emotions, the Mind Body Connection Group (MBCG). We hypothesized that focusing on the role of emotions and the group social connection would help participants better understand and accept the mind-body-connection.

**Study Population:** 21 post-therapy interviews (10 youth aged 12-17, 11 caregivers) were conducted through purposeful sampling. Participants were recruited as nine youth-caregiver dyads, two single caregivers, and one single youth.

**Methods:** Participants engaged in a 6-week (once a week) multi-family group therapy focused on educating families about somatization, improving family communication, and exploring the role of emotions. Youth and caregivers were interviewed separately and interviews were transcribed and inductively coded using thematic analysis.

**Results:** Three themes, expressed by both youth and caregivers, were identified: (1) group therapy provided social connection, (2) including caregivers improved youth-caregiver dynamic and communication, and (3) discussing emotions and providing education helped participants better understand and accept the mind-body-connection.

**Implications:** Our research suggests multi-family group therapy helps families accept embodied emotions which can support recovery from somatic symptoms. This study lays the groundwork for future quantitative studies evaluating the efficacy of the MBCG in a larger sample.

## Introduction

- The mind and body are deeply connected, as mental states (e.g. motivations, desires, emotions, perceptions) can be felt as bodily sensations or symptoms<sup>1, 2</sup>.
- In psychiatry, the mind-body-connection is called somatization<sup>3</sup> and can cause significant impairments to everyday life<sup>4</sup>.
- Somatization is a common and frequent psychiatric presentation in children and adolescents<sup>5</sup>, affecting approximately 8-13%<sup>6, 7, 8</sup>.
- Promising treatment options for adolescents include psychoeducational strategies<sup>9</sup>, involving caregivers<sup>10</sup>, and focusing on emotions<sup>11</sup>.

## Methods

- Youth affected by somatization and their caregivers participated in a 6-week (once a week) multi-family group therapy, The Mind Body Connection Group (MBCG), which focuses on educating families about somatization, improving family communication, and focusing on the role of emotions.
- Participants:** N = 21 (10 youth aged 12-17, 11 caregivers), recruited through purposeful sampling.
- Inclusion criteria:**
  - DSM-5 diagnoses of Somatic Symptom and Related Disorders (Somatic Symptom Disorder, Conversion Disorder, Psychological Factors Affecting a Medical Condition, and Unspecified Somatic Symptom and Related Disorders).
  - Participation in the quantitative portion of larger mixed-method study (see discussion).
  - Attendance of at least five of the six sessions.
- Procedure:** Youth and caregivers were interviewed separately after their last group session to discuss their experience with the MBCG.
- Analysis:** Interviews were transcribed and inductively coded using thematic analysis.

# Multi-Family Group Therapy for Adolescent Somatization:

(1) provides social connection,



(2) improves youth-caregiver dynamic and communication and,

(3) helps create a better understanding of the mind-body-connection.

## Results

- Youth and caregivers stated that (1) group therapy provided social connection, (2) including caregivers improved youth-caregiver dynamic and communication, and (3) discussing emotions and providing education helped participants accept and better understand the mind-body-connection. Below are some selected participant quotes:

(1) Social connection	
<b>Youth</b>	"I have people I connect with, people that I can communicate with and kind of get a sense of what I'm going through and we all kind of understand each other."
<b>Caregiver</b>	"I'd never really talked about it to anybody before, so that's kind of nice to be able to let it out."
(2) Improved youth-caregiver dynamic	
<b>Youth</b>	"I think we both have a better understanding of things even just like on our own time...now when we talk to one another I think, I think that's different."
<b>Caregiver</b>	"I've never reflective listened, I just kind of steered the conversation if I could...I listen to her more and I hear what she's saying, and I try to repeat it back to her."
(3) Better understanding of mind-body-connection	
<b>Youth</b>	"I've come to understand that it's not just about the mind but how the mind connects with the body and shows emotion through a physical form as well."
<b>Caregiver</b>	"I probably opened my mind up a little bit more to the whole mind-body connection...I can see how it makes more sense."

## Discussion & Conclusion

- Our qualitative research suggests multi-family group therapy helps adolescents and caregivers tune into and accept embodied emotions which can support recovery from somatic symptoms.
- The process of connecting with like peers in the group is not only normalizing, but is suggested as a core element to build therapy buy-in and effectiveness.
- This study lays the groundwork for future quantitative studies evaluating the efficacy of the MBCG in a larger sample.
- Quantitative studies can strengthen their results by evaluating the role of peer connection and emotional attunement as mechanisms that can support adolescents to recover from somatic symptoms over time.

## References

- Damasio & Carvalho. (2013). *Nature Reviews Neuroscience*, 14(2), 143–152.
- Heathcote. (2019). *Journal of Pediatric Psychology*, 44, 859–861.
- Lipowski. (1988). *American Journal of Psychiatry*, 145, 1358–1368.
- American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders: DSM-5*.
- Campo & Fritz. (2001). *Psychosomatics*, 42(6), 467–476.
- Essau et al. (1999). *Psychology, Health & Medicine*, 4(2), 169–180.
- Lieb, et al. (2000). *Acta Psychiatrica Scandinavica*, 101(3), 194–208.
- Offord et al. (1987). *Archives of General Psychiatry*, 44(9), 826–831.
- Lipsitz et al. (2011). *Journal of Developmental and Behavioural Pediatrics*, 32(2), 153–157.
- Gerner et al. (2016). *Israel Journal of Psychiatry and Related Sciences*, 53(2), 39–47.
- Abbass et al. (2009). *Psychotherapy and Psychosomatics*, 78(5), 265–274.

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