



**V6**

**THE BODYMIND APPROACH® (TBMA) TO GROUPWORK  
WITH THOSE WITH MEDICALLY UNEXPLAINED  
SYMPTOMS**

**THE TRAINING FOR GROUP FACILITATORS**

**Pre-requisites**

Those who apply to train as Group Facilitators with Pathways2Wellbeing® (P2W) must have either all of the following:

- A Masters in arts / body psychotherapies/psychotherapy or counselling
- A substantial background in at least one form of a body/movement discipline
- Membership accreditation of the relevant professional association
- Five years experience (or equivalent part time) of working as an accredited clinical practitioner
- A minimum of four years weekly personal therapy
- Experience of working with groups of adults (in excess of five years or the equivalent)

**Or all of the following:**

- A training as a health professional and five years' experience (or equivalent)
- A substantial background in at least one form of a body/movement discipline
- Training and experience (in excess of five years or equivalent) in working with groups of adults
- Expertise and experience of in excess of five years or the equivalent in working with people with medically unexplained symptoms
- HCPC or equivalent registration
- A minimum of four years weekly personal therapy
- A qualification in counselling and membership of the relevant professional association (BACP/UKCP)

For those who do not meet the above criteria there may be other equivalent qualifications/experience which can be taken into account, especially those applying from outside UK. This would need to be specially negotiated with Professor Helen Payne.

### **Aim of the Training**

To enable participants to train as Group Facilitators with adults with medically unexplained symptoms and to be competent and confident in delivering The BodyMind Approach (TBMA) Programme to a high professional standard

### **Learning outcomes**

- To have become informed about the research base from which the programme has been developed
- To have developed familiarity with the conceptual framework underpinning the approach
- To have an in-depth understanding from personal experience as an ‘as if’ patient and in the process to become more able to understand your own medically unexplained symptoms, if you have any
- To have understood the importance of the group and the processes inherent in conducting groups with adults
- To have gained knowledge of factors relating to patients with medically unexplained symptoms
- To have understood administrative and contractual aspects relating to the delivery of the TBMA group treatment programme in the NHS, occupational health and private sectors

### **Group Facilitators**

Facilitators are responsible for the running of their groups. We will provide the referred patient list following assessment by a clinical psychologist. Facilitators are expected to meet with patients for a welcome intake/briefing and exit/debriefing individual session (30 mins each), book a local, non medical, suitable venue (rental paid by P2W) and decide on the day and times for the three treatment groups in each programme (morning, afternoon and evening slots to fit with patient schedules). You will be paid by P2W as a self employed person for the sessions at an hourly rate to be advised. Support, guidance and free supervision are provided as part of the professional team together with the flexibility to fit the work around your own needs/timetable.

### **The Training**

TBMA programme is derived from a tradition within counselling/therapy which believes that experiential learning delivers a more profound level of understanding than cognitive approaches alone. Theories illustrated through personal experience mean more to us and when we apply them to ourselves can be more effectively integrated. Much of the training is experiential as if you were a patient-participant. This means considering your own unexplained symptoms and your relationship with them and your body, how you process feelings, your attachment history, body image, attitude to change and to physical, expressive activity.

**N.B.** Whilst the training has been designed with this in mind, it is recognised that some people will want to attend to increase their understanding of the subject and will not necessarily be interested in joining the Group Facilitation Training.

The ethos of the course and the treatment groups is that of an educational workshop (rather than a therapy group). For the treatment programme there is a manual to follow and you will be introduced to this as part of the training. The course offers a variety of formats for delivery including whole group experiential; lecture/discussion; brainstorming; dyads; small group work and individual work. You will have the opportunity to experience these different formats and to think about their differing purposes and impact.

You will also be able to see the changing role of the group facilitator as a model in these different formats and think about how you would manage them yourself as a facilitator for treatment groups. The group facilitation approach is informed by counselling, body oriented psychotherapy, authentic movement, group analytic and pedagogic theories.

In addition, we will consider aspects such as group cohesion, confidentiality, boundaries, ground rules and norms, safeness of the group, interaction and limitations.

TBMA treatment programme is new and innovative and is based on substantial research literature on medically unexplained symptoms and a systematic research study, market research study and health economy study undertaken by Professor Helen Payne.

The body mind inter-relationship forms the basis of the teaching and learning. Stress can affect this relationship and a split may occur in which the body dysfunctionally expresses unintegrated aspects of the psyche instead. Attachment theory offers one coherent developed theory of human emotional development. It proposes that insecure attachment will create deficits in the internalisation of a benign adult, the formation of a robust identity and the consequent capacity to form rewarding, mutually intimate relationships. Collectively these deficits create a difficulty in managing feelings especially anxiety and depression. It is speculated that it is this difficulty which leads to the unconscious eruption of bodily symptoms for emotional purposes. The training will elaborate and demonstrate this theoretical base as one possible aspect of MUS. The approach sees the symptom as symbolic of dys-ease whereby the body has to manifest the distress when there is no other avenue.

### **The Assessment for the invitation to attend follow-up course to practice as a P2W group facilitator**

The first two days are an Introduction to the application of the systematically researched treatment 'The BodyMind Approach'® (TBMA), derived from body-oriented psychotherapy, experiential learning methods, mindfulness practices and group analysis. It is designed for suitably qualified professionals aiming to become group facilitators/assistants using TBMA with people with medically unexplained conditions.

During the two days there will be a selection process for the follow up course which will be by invitation only, dependent upon satisfactory completion of the Introduction. The certification selection on the second two day follow up course will be based on the candidate's capacity to demonstrate competence by designing and delivering a short exercise suitable for this patient population. This will be conducted during the later part of the two days in small groups, both tutor and peer feedback will be given. Providing tutor assessment is satisfactory the candidate will become a certified facilitator and invited to conduct groups through P2W.

**Course Structure (not all will necessarily be covered in this order)**

*Theory and Practice 1*

- Medically unexplained symptoms-the literature
- Anxiety, depression and bodily symptoms
- Attachment theory
- The body-mind inter-relationship
- Movement psychotherapy and authentic movement theory
- Relevant neuroscience findings
- Embodiment as a gateway to the unconscious
- Symbol and metaphor in non verbal communication
- A typical session-simulation exercise
- Experiential exercises
- Vignettes (video?)/case studies

*Research and Practice*

- Research background, evidence from the studies
- Patient Assessment
- Group theory and research
- The manual/facilitator's agreement/code of ethics/complaints

*Theory and Practice 11*

- Overview of group (sessions 1-12)
- Personal journal
- A typical session
- Emotional symptoms as manifested bodily
- Integrating bodily symptoms, feelings, imagination and thoughts

*Theory and Practice 111*

- Activities/themes
- Presence of facilitator
- Witnessing
- Self nurture/self managed care
- Early trauma
- Relationships
- Self esteem
- Perceptions of symptoms
- Body image
- Facilitator Assessment
- Practical arrangements

You are expected to complete the introduction and the second two day follow up development course before facilitating groups. Individual supervision will be provided to all qualified facilitators free of charge for the duration of their groups when a NHS/company contract is in place. CPD with P2W of one day each year is expected of all facilitators.

In the time between the two courses it is intended that each candidate designs an appropriate exercise for the MUS population with a view to sharing this within a small group in the context of an assessment.

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**NB.** For those not qualifying to become a facilitator, for example in terms of years of experience, and following their successful undertaking of the four day training, there are opportunities to work as an assistant to a facilitator which will count towards building up experience (assisting in one TBMA group equals three months experience of running groups with adults). There will be an assessment both written and from practice-based observation by the facilitator and further one day CPD required for these volunteer assistants before facilitation can be authorised.

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