

Somatic Experiencing facilitates Psychological Safety and reduces Disrupted Body Boundaries

Introduction and aim

Child maltreatment (CM) increases the risk of trauma-related mental disorders and social impairments (Pfaltz et al., 2022). However, current treatments don't adequately address social functioning issues. In this context, two randomized controlled pilot studies were conducted to assess the potential of a single somatic experiencing (SE) session, a body-oriented approach (Payne et al., 2015), for improving social impairments such as lack of psychological safety and a sense of disrupted body boundaries.

Method

Participants were randomly assigned to either an intervention (SE session) or a control group (psychoeducational on SE). Self-report measures were used to assess the target variables before and after the session. Data were analyzed using repeated measures ANOVA and correlational analyses.

CM relationship with the outcome

As shown in Figure 2, higher levels of CM were linked to a stronger pre-post decrease in disrupted body boundaries in the intervention group ($r = .682, p = .020$), but not in controls ($r = -.139, p = .772$). A similar pattern was observed on a trend-level for psychological safety (intervention: $r = .444, p = .065$, control: $r = -.195, p = .409$).

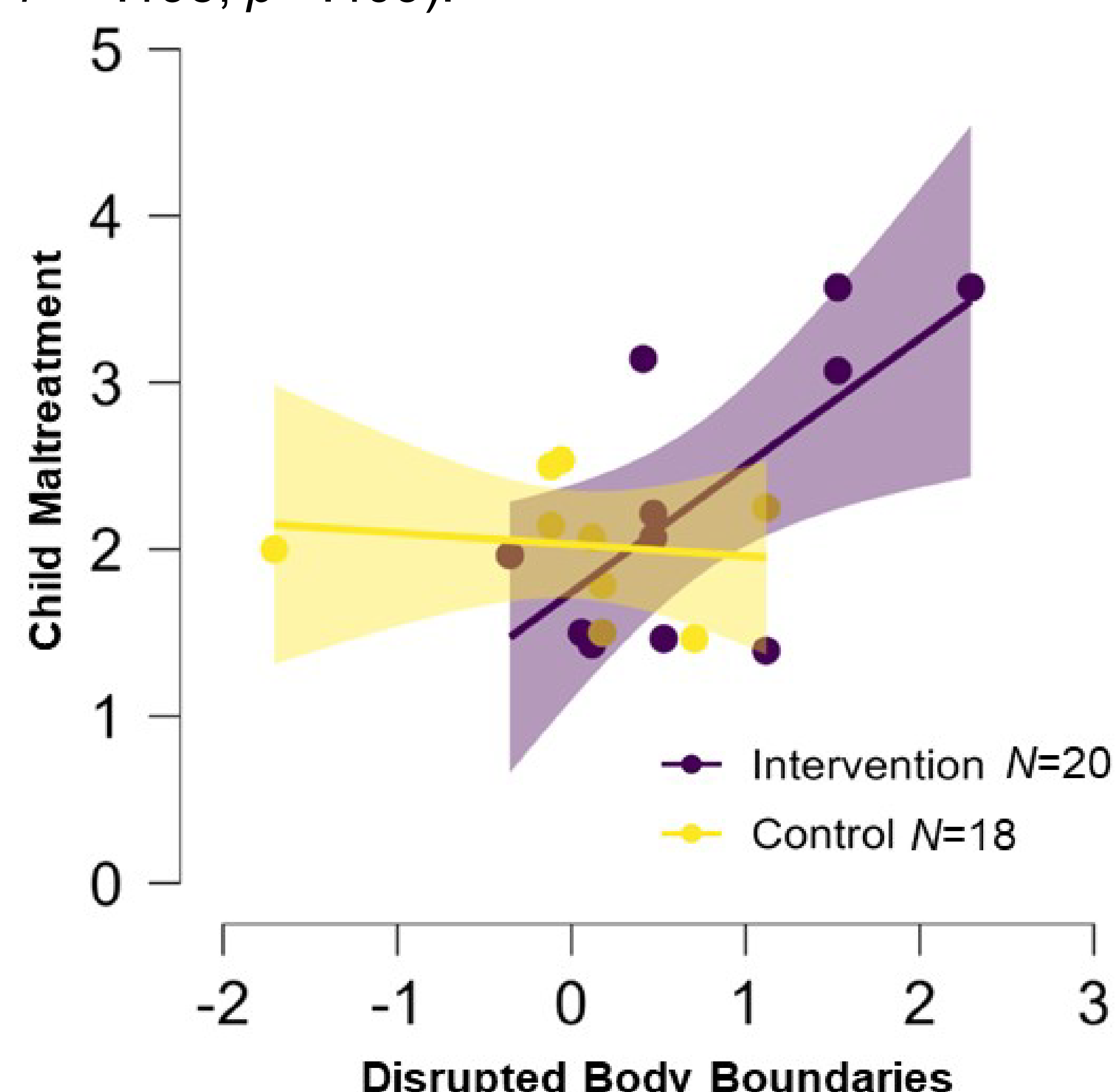


Figure 1. The correlation between levels of CM (higher scores indicate higher levels and lower scores indicate lower levels) and the mean difference between pre-post disrupted body boundaries scores (higher scores indicate a larger reduction and lower scores indicate a smaller reduction) in respective groups.

Results

The repeated measures ANOVA conducted on psychological safety showed significant effects for time [$F(1, 36) = 19.99, p < .001, \eta^2p = .35$] and for the time x group interaction [$F(1, 36) = 24.60, p < .001, \eta^2p = .58$], with post-doc effects showing a significant increase in psychological safety in the intervention ($p < .001, d = .992$) but not in the control group; see Figure x. The repeated measures ANOVA conducted on disrupted body boundaries showed a significant effect for time [$F(1, 18) = 4.49, p < .001, \eta^2p = .21$], but no time x group interaction [$F(1, 18) = 4.13, p = .057, \eta^2p = .19$]. Nevertheless, post hoc comparisons showed a significant change from pre-to-post treatment in the intervention group ($p = .003, d = 1.07$) but not in the control group ($p = .958, d = .047$).

Figure 2 shows mean differences between the intervention and control groups in pre- and post-treatment scores. The intervention (but not the control) group shows a significant increase in psychological safety and a significant reduction in disrupted body boundaries.

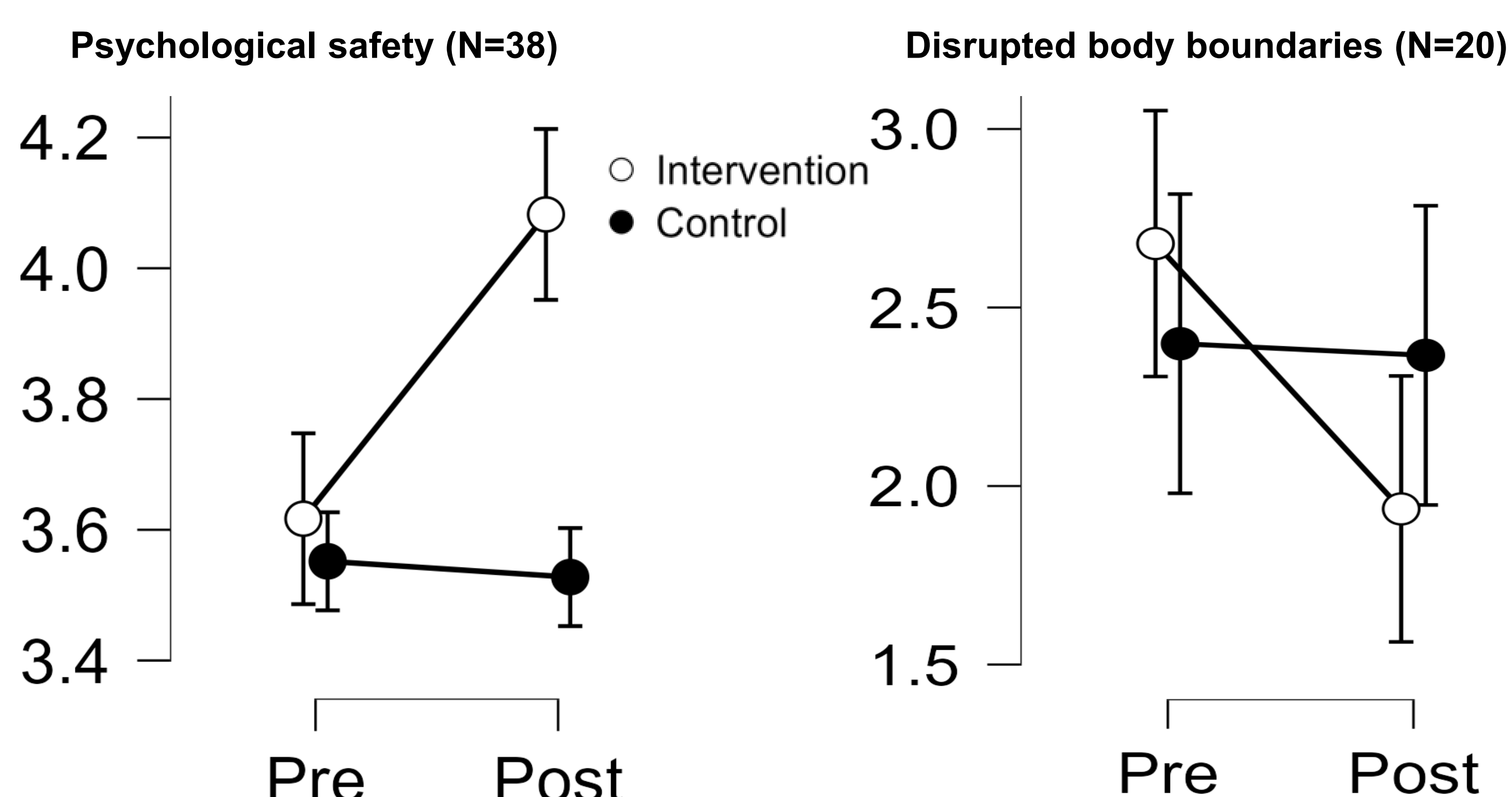


Figure 2. Psychological safety scores (scale 1-5) for intervention group ($n=18$) and control group ($n=20$), and disrupted body boundaries scores (scale 1-5) for intervention ($n=11$), and control group ($n=9$).

Discussion

Preliminary results revealed a significant increase in perceived psychological safety from pre to post treatment in the intervention group, with a large effect size. Results for disrupted body boundaries show a time x group that was only significant at the trend level, yet in post-hoc comparisons, the intervention group but not controls demonstrated a reduction in disrupted body boundaries. A larger sample (data collection ongoing) is needed to assess the stability of these findings. Initial results show that CM might be a moderator of SE's effectiveness, yet the correlational approach prevents causal inferences.

Conclusions

These findings highlight potentially beneficial effects of SE on increasing social functioning (through enhancing perceived psychological safety and reducing a sense of disrupted body boundaries) in individuals with different levels of CM. Future research could explore and control for potential confounding factors related to the outcomes and assess the long-term effects of SE.

References

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- Pfaltz, M. C., Halligan, S. L., Haim-Nachum, S., Sopp, M. R., Åhs, F., Bachem, R., Bartoli, E., Belete, H., Belete, T., Berzengi, A., Dukes, D., Essadek, A., Iqbal, N., Jobson, L., Langevin, R., Levy-Gigi, E., Löönd, A. M., Martin-Soelch, C., Michael, T., ... Seedat, S. (2022). Social Functioning in Individuals Affected by Childhood Maltreatment: Establishing a Research Agenda to Inform Interventions. *Psychotherapy and Psychosomatics*, 2022;91, 238-251.

