

# Integration Based Stress Removal Therapy and Perceived Stress Levels

Kelly Slobodian, Moriah Chicoine, & Tifani Fletcher  
West Liberty University



## ABSTRACT

Integration Based Stress Removal (IBSR) is a somatic based therapy designed to access the gut brain, autonomic nervous system, and central nervous system, causing the autonomic stress response to become more regulated. As a relatively new therapy, which can be combined with cognitive behavioral therapy, more research is needed on IBSR. Existing client information collected by trained IBSR therapists (n=440) was analyzed for this study. Using the Perceived Stress Scale, paired samples *t*-tests indicated a significant decrease in perceived stress scores from the pretest to the posttest for both versions of the PSS given (PSS-10 pretest  $M= 23.3$ ,  $SD= 7.7$ , PSS-10 posttest  $M= 14.61$ ,  $SD= 6.44$ ,  $t(45)= 9.45$ ,  $p< .001$ ; PSS-14 pretest  $M= 33.27$ ,  $SD= 9.76$ , PSS-14 posttest  $M= 22.88$ ,  $SD= 9.10$ ,  $t(25)= 5.833$ ,  $p< .001$ ). Clients who completed the IBSR Hybrid therapy showed a significant increase in Validity of Cognition scores from pretest ( $M= 3.14$ ,  $SD= 1.88$ ) to posttest ( $M= 5.48$ ,  $SD= 1.88$ ),  $t(24)$ ,  $-4.34$ ,  $p<.001$ . Additionally, the IBSR Hybrid clients that completed the Subjective Units of Distress Scale showed a significant decrease in scores from pretest ( $M= 8.73$ ,  $SD= 2.57$ ) to posttest ( $M= 4.36$ ,  $SD= 2.65$ ),  $t(21)= 5.85$ ,  $p< .001$ . Overall, results indicated a reduction in self-reported negative symptoms, and an increase in self-reported positive symptoms for both the IBSR and IBSR Hybrid therapies. Based on suggestions by the researchers, the founder of the IBSR therapy is in the process of collecting longitudinal data, with the intent of incorporating and encouraging more standardized data collection procedures with other IBSR therapists.

## INTRODUCTION

- Created by Judith Moolten, Integration Based Stress Removal (IBSR) is a linear somatic psychology protocol [1].
- After experiencing a traumatic event, not only does the mind create stress, but the body does as well.
- This is classified as somatic psychology, meaning it interplays the body, mind, emotions, and social context [2].
- The concept known as Hakomi, states that beliefs and emotions are connected to the muscles, organs, and metabolism [3].
- Although the body is not experiencing the trauma anymore, the brain holds onto the memory of the occurrence due to the conscience decision to not let the memory go.
- The goal is to release that stored energy from the body.
- For patients that are dealing with stress on a cognitive level, they must proceed to the IBSR Hybrid therapy [1].

## HYPOTHESIS

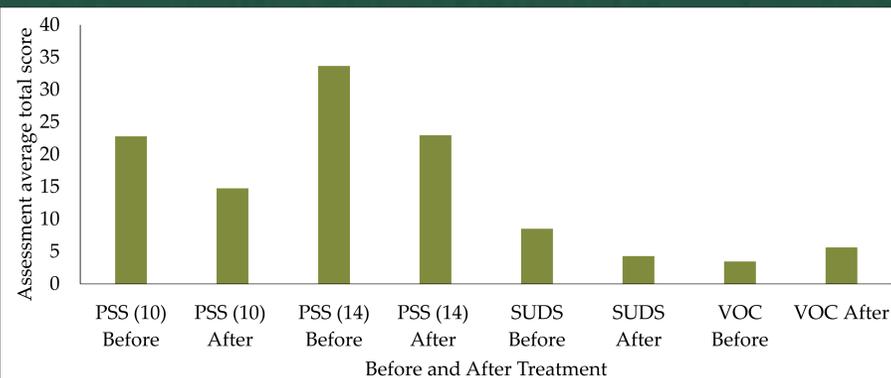
- Patients will report lower levels of negative symptoms following sessions.
- Measures will remain below the initial levels at follow ups.

## METHODS

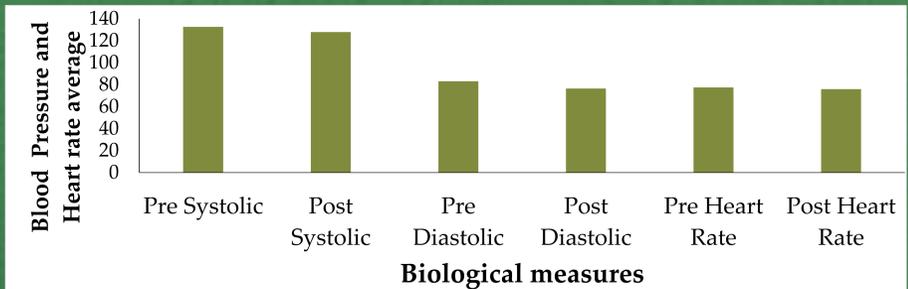
- Participants**
  - 440 participants recruited via the BodyMind Institute-IBSR based in Wheeling West Virginia.
  - Not all participants were given all assessments (varied with therapist)
- Materials**
  - Intake paperwork
  - Biological measures complete with blood pressure cuff
  - Assessments
    - Perceived Stress Scale (PSS), 10 or 14 item
    - Validity of Cognition Scale (VOCS)
    - Subjective Units of Distress Scale (SUDS)
- Procedure**
  - Once evaluated, the participants were placed in groups based on their processing styles: IBSR or IBSR Hybrid therapy.
  - Intake paperwork, pre assessments, and biological measures were completed before the therapy session.
  - Biological measures were taken directly after the session
  - Post assessments were given again ~2 weeks after session.

## RESULTS

- Repeated measures *t*-tests:
  - PSS-10 pretest  $M= 23.3$ ,  $SD= 7.7$ , PSS-10 posttest  $M= 14.61$ ,  $SD= 6.44$ ,  $t(45)= 9.45$ ,  $p< .001$ ;
  - PSS-14 pretest  $M= 33.27$ ,  $SD= 9.76$ , PSS-14 posttest  $M= 22.88$ ,  $SD= 9.10$ ,  $t(25)= 5.833$ ,  $p< .001$
  - VOC pretest ( $M= 3.14$ ,  $SD= 1.88$ ) to posttest ( $M= 5.48$ ,  $SD= 1.88$ ),  $t(24)$ ,  $-4.34$ ,  $p<.001$
  - SUD pretest ( $M= 8.73$ ,  $SD= 2.57$ ) to posttest ( $M= 4.36$ ,  $SD= 2.65$ ),  $t(21)= 5.85$ ,  $p< .001$



## RESULTS



## DISCUSSION

- The hypotheses were supported.
  - For all measures, significant decreases were seen after therapy (both IBSR and IBSR Hybrid)
- Limitations:
  - Assessment data not systematically collected by all IBSR therapists.
  - Assessments are self-reported, and not all participants responded to follow up inquiries
- Future research:
  - Random controlled trials to compare IBSR to other trauma and stress therapy.
  - More in-depth examination on demographic factors, history, and long term outcomes.
- More research is needed to better understand the underlying mechanisms and long term effects of treatment.
- Overall, IBSR shows promise as an effective therapy for a wide range of trauma and stress by using a “one and done” 8 phase treatment plan.

## SELECTED REFERENCES

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