IN MY OWN WORDS

The Power of the Group: Integrative Medicine Group Visits

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I remember that during medical school, we students were constantly stressed by the notion of needing to plan our careers. In the almost 20 years since graduating I have learned that one's career has a way of unfolding in wonderful unforeseen and unplanned ways. Last year, I had the good fortune of moving into a new role as a facilitator of integrative medicine group visits. Following are some notes from the field.

WEEK 1

They are 14 women and 2 brave men. Fifteen people of color and 1 white person. They carry diagnoses of posttraumatic stress disorder, anxiety, depression, bipolar disorder, fibromyalgia, chronic pain of all types, hypertension, and obesity. They have visited specialists, been injected, exercised in physical therapy, and ingested numerous medications to minimal avail. They are survivors of domestic violence, child abuse, sexual abuse, violent crimes, and vicarious trauma and now are pioneers of a new program, Integrative Medicine Group Visits, funded by a Patient-centered Outcomes Research Institute (PCORI) grant through Boston Medical Center, Massachusetts. We have a facilitator team: another physician and me, a massage therapist who leads meditations, a medical assistant, and a diligent and open-hearted coordinator.

We conduct 9 visits in 11 weeks, sitting in a circle, learning to trust: fighting instincts to get up, run out of the room, do not pass go, stop looking for the get-out-of-jail-free card.

Members of our group stretch beyond their comfort zone, learn how to live with awareness and mindfulness, and gain knowledge about depression, chronic stress, and inflammation. They acquire new skills: reading labels, eating out healthily, balancing meals, preparing healthy foods, “eating the rainbow,” and recognizing and responding to passive and aggressive communication.

They hone their skills by doing assigned “home practice” daily and diligently: chair and mat yoga, acupressure, self-massage, journaling, meditation, mindful eating, assertive communication, recognizing pleasant and unpleasant events and their reaction.

INTERMEDIATE WEEKS

Relying on each other, participants are hugging, laughing, crying, resisting, pushing, pulling, and noticing. While learning yoga, during a pose, the man in the group spontaneously shouts with glee, “I’m doing yoga!” They share vegetarian meals—initial skepticism yields eventual anticipation and excitement. They call each other out on their stuff. “That may seem like you’re communicating assertively but it is really aggressive.” Or “I can still see that you’re not dealing with the issue you say you are.” They offer each other support, empathy, and help.

WEEK 9: CLOSURE, ENDING, CHANGE, LOSS

A woman expresses her fear about slipping back into “old ways” when her husband thought she was “dying” of depression. Her neighbor in the circle looks directly in the eye, confident, serious: “You will not slip back. I believe in you.” The worried woman sobs in her neighbor’s arms with gratitude, “That means so much.” Her neighbor holds her tightly.

The man in the group shares a poem that he wrote—having felt so off-kilter for the past few years, now not exactly on the correct path, but the path now is his, and it feels so right and good.

There is much clapping and laughter and many hugs, smiles, and tears. The leadership team in the meeting room next door hears our mini-ruckus through their business talk. So much trust during this final circle sharing: we all note how far we have come.

“I learned that I was not alone with my pain,” says a woman who cried with relief on the first day of group as she realized for the first time that she was not suffering alone.

Another woman declares, “I never ate any vegetables. My friends are all shocked as I eat vegetables now.” Another participant says, “I can’t wait to go home and roast my cauliflower.” “I saw that a stranger looked stressed as everyone was rushing around her so I told her to take her time, then I commented that she looked sad, so I offered her a hug. She said that was the nicest thing anyone had done for her all day,” a woman recounts. “I can get up off the floor for the first time in 4 years,” a participant tells us happily. One woman shares the surprise of her friend because “When I went out to brunch I used to only get steak and eggs. This time I ordered a broccoli omelet.”

Other testimonials include

• “I used to take 8 [acetaminophen] a day for my pain. I haven’t taken any in over a month.”
• “I used to feel like I had to take care of everyone...”
else. Now I learned I can only take care of me.”
• “When I start to get upset I do my breathing and then I feel better.”
• “I can cope with my pain much better now.”
• “I look forward to Mondays (group day)—I plan my whole week around it.”
• “Whenever I didn’t feel like coming, I decided to show up because I knew someone might be depending on me to be there.”
• “I never finished a group. I never liked groups. This is the first group I ever completed. And I feel so good about feeling like I belong somewhere.”
• “I learned I can choose how to react.”
• “I always used to fight with my daughter when we talked. Now I learned how to communicate so we don’t have to fight.”
• “My family sees the difference in me, and my relationships are changing.”
• “I am teaching this to my children.”
• “I never felt my feelings before.”
• All agree: “I came for the hugs.”

MOMENT OF GRADUATION

Participants present a certificate to a fellow participant in front of the group, sharing wishes for the graduate or reflections on how the graduate has grown (or both). There is a common refrain: “I saw you at the first session carrying your pain and sadness. You participated in the group, and now you smile to the world. You are beautiful—keep using your tools and practicing, and I know you will keep growing.”

We all cry together, emotions raw, intense. We need lots of tissues.

They own their group, having shared parts of themselves in our circle that they have never shared with others. They crave each other’s company and presence, calling each other daily, meeting at the farmer’s market, exercising in a walking group, socializing at a cookout. They plan to buddy up and call each other during the hard times. They feel so close and bonded to each other, feeling seen and heard, some for the first time in their lives.

FACILITATOR

I am called Pam. They return my hugs and smiles. Caretaking, they wake me up gently when I fall asleep during meditation, and then they clear my yoga mat. When I share in the go-around, they listen with respect and clap for me, grateful that I share Pam—the mother/wife/friend/human. In return, they see me. It is a pleasure and honor to participate in such a wondrous group. I stand in awe of them. They show me that there is a better way: this way.

Reflecting back several months later, my fondness for this group still fuels me. We see each other at the clinic, we greet one another with hugs. They share news about the members of the group they see and they recount mindfulness practices that they continue. Lessons I have learned stay with me. I learned that a group has the power to heal individuals when a safe, loving space is created. I saw that friendship conquers loneliness, and a friend is an extraordinarily potent medication. I witnessed the benefits of a regular practice of integrative medicine modalities, including decreased pain, improved sleep, and increased happiness. The group demonstrated that showing up to help someone else can be exactly the motivating factor someone needs. Patients—and all of us—always have the potential for personal growth and thus are courageous and inspiring. Most profoundly, I hold tight to the knowledge that leveling the medical hierarchy and making oneself vulnerable can build powerful healing relationships.

MEDICAL GROUP VISITS

Integrative medical group visits, as described in a recent article by Gardiner et al., were born from the evidence that a group visit model and evidence-based complementary therapies are helpful in managing chronic pain. For our groups, patients were recruited to join a group that met weekly for 9 weeks. Patients learned how to manage their pain using various patient-centered, nonpharmacological therapies, such as mindfulness-based stress reduction, meditation, yoga, and acupressure. Patients also learned about health-related topics such as nutrition and sleep hygiene. Groups were facilitated by physicians and complementary healthcare providers. These groups are part of study designed to evaluate the feasibility of the integrative medical group visit care model in an inner-city, racially diverse outpatient clinic. My clinic is located in Dorchester, Massachusetts, which is part of Boston.

REFERENCE