

Reliability and Validity of the Evaluation Questionnaire for Concentrative Movement Therapy

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Objective

Concentrative movement therapy (CMT) is a body oriented psychotherapy method with a psychodynamic foundation, which focuses on the awareness and expression of body sensations (Schreiber-Willnow, 2015). An evaluation questionnaire (EQ-CMT-G) exploring patients' perspectives of effects and therapeutic factors of CMT in group setting was developed in a previous study. An explorative factor analysis yielded six dimensions. The analysis of the internal consistency indicated the possibility of a scale-length optimization. Objective of the present study was to examine the reliability and validity of a shortened version of the EQ-CMT-G with 24 items and six factors.

Results

Factorial validity of the EQ-CMT-G with six factors could not be confirmed in confirmatory factor analysis due to the lack of discriminant validity of two factors. The subsequent exploratory factor analysis suggested a 4-factor solution. The corresponding scales of a shortened questionnaire version with 18 items showed acceptable to good internal consistency (ω) as well as test-retest reliability after an average of 27.6 days (ICC) and a good model-fit in confirmatory analysis (see Table 1).

With one exception, there were highly significant negative Spearman's rank correlations ($p < 0.01$) between all EQ-CMT-G-scales and the NUGE-24-scales (strain by the therapist, strain by other patients, strain by the group, personal overload), confirming discriminant validity. These ranged from -.17 to -.45 and were particularly higher between thematically related scales (e.g. "positive experiences with the therapist" and "strain by the therapist"). EQ-CMT-G-scale "therapeutic usefulness of CMT" was not correlated with NUGE-24-scale "personal overload".

Discussion

As intended the four scales of the shortened EQ-CMT-G reflect both, therapeutic factors and effects related to the CMT method (scale 1 and 2) and common therapeutic factors (scale 3 and 4). The scales show acceptable to good reliability and discriminant validity with regard to side effects of group therapy. Further research is necessary to verify that factor validity is maintained in a new sample too.

References

- Schreiber-Willnow, K. (2015). Concentrative Movement Therapy. In E. S. Neukrug (Ed.), *The SAGE Encyclopedia of Theory in Counseling and Psychotherapy* (pp. 215-216). Thousand Oaks, CA: SAGE Publications.
- Strauß, B. & Drobinskaya, A. (2018). Erste Erfahrungen mit dem „Fragebogen zu Nebenwirkungen in der Gruppentherapie und unerwünschten Gruppenerfahrungen“ (NUGE 24) [First experiences with the „Questionnaire for the Assessment of Side Effects and Negative Experiences in Group Therapy“ (NUGE-24)]. *Psychotherapie, Psychosomatik, Medizinische Psychologie*, 68(9/10), 437-442.

Method

251 patients receiving inpatient psychotherapy or day treatment completed the EQ-CMT-G and the Questionnaire for the Assessment of Side Effects and Negative Experiences in Group Therapy (NUGE-24; Strauß & Drobinskaya, 2018) at the end of their course of treatment. A confirmatory factor analysis was conducted, followed by an exploratory factor analysis. Internal consistency and test-retest reliability were calculated for the scales obtained. Discriminant validity was tested by correlating the scales of the EQ-CMT-G with the scales of the NUGE-24.

Table 1:	Scale			
Number of scale	1	2	3	4
Name of scale	Therapeutic usefulness of CMT	Positive body-related experiences and effects	Positive experiences with the therapist	Positive group atmosphere
Item example	What I experienced in CMT helped me to understanding myself better.	Due to the CMT, I can now better accept my body as it is.	The therapist was encouraging.	The group was able to handle conflicts constructively.
Number of items	4	5	4	3
$M \pm SD$	3.47 ± 0.66	2.77 ± 0.83	2.30 ± 0.90	3.12 ± 0.71
McDonald's ω	.89	.86	.85	.80
Test-retest ICC	.84	.76	.81	.81
Model-fit	Chi ² = 199.16, $p_{(Bollen-Stine\ corrected)}$ = .11, CFI = .96, RMSEA = .05, SRMR = .05			