

Group psychotherapy for children and adolescents

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Why in adolescence?

- Features of adolescence
- Many adolescents resist the idea of having “problems” or a disorder
- Many resist the notion of meeting with an individual counselor
- They want to be independent, popular and healthy.
- Which is negated by attending psychotherapy

Adolescence, developmental features

- Adolescents prefer to be with peers
- Developmentally, more interest in friends than in parental figures
- Many have a tendency to oppose authority figures
- Affirming independence, “own thoughts” and competence. Militate against position of “the patient”

Indications

- The young person has emotional or behavioral difficulties
- Problems in interpersonal relationships, e.g. peer relationships
- Problems with social skills
- Difficulty being accepted by peer group
- Depression, anxiety, phobias

Contraindication

- Marked disinterest in any sort of help
- Active sabotaging of efforts to assist or provide treatment
- Destructive tendency in group situations
- Unable to sit still, comprehend what is being said, to sabotage group efforts

General features of group psychotherapy

Benefits of group psychotherapy

- Universality
- Altruism
- Instillation of Hope
- Imparting information

Benefits...

- Corrective recapitulation of family experience
- Imitative experience
- Cohesiveness
- Existential factors

Benefits..

- Catharsis
- Interpersonal learning—input
- Interpersonal learning—output
- Self understanding

Universality

- Members recognize that other members
- Share similar feelings
- Similar thoughts
- Similar problems

Altruism

- Members gain a
- Boost to self esteem
- Through extending help to other group members

Instillation of Hope

- Member recognizes that
- Other members' success
- Can be helpful
- Develop optimism for one's own improvement

Imparting information

- Education or
- Advice
- Imparted by therapist
- And by other group members

Corrective recapitulation

- Corrective recapitulation of primary family experience
- Opportunity to reenact critical family dynamics
- With group members
- In a corrective manner

Development of socializing techniques

- The group provides members with
- An environment
- That fosters adaptive and effective
- Communication and
- Socialization

Imitative behavior

- Members expand personal
- Knowledge and skills
- Through observation of
- Group members self exploration
- Working through activity
- And personal development

Cohesiveness

- Feelings of trust toward each other
- Feelings of trust
- Belonging and togetherness
- Experienced by group members

Existential factors

- Members accept
- Responsibility for life decisions
- Shared experience with other group members

Catharsis

- Members release of strong feelings
- About the past
- Present
- And general experiences

Interpersonal learning. Input

- Members gain personal insight about their
- Interpersonal impact
- Through feedback provided by other members of the group

Interpersonal learning.

Output

- Members provide an environment
- That allows members
- To interact with others
- In a more appropriate or new manner

Group therapy strategies .

Multiple modalities

- Continuum from self-help groups
- To groups centered on transference toward therapist
- Role of the therapist
- Focus of the group therapy
- Needs of participation by patients
- Nature of the problems

Modalities and strategies

- Supportive group psychotherapy
- Goal to provide emotional company and encouragement to youngsters
- Promote mutual support and assistance
- Therapist takes active role, giving suggestions, advice, recommendations
- More active use of the self
- May be short or long term
- Patients tend to have something in common

Social skills group

- Promotion of acquisition of new skills
- Active “teaching” and modelling of strategies
- Practicing “in the group” e,g, role play
- Rehearsing, problem-solving
- “giving homework”
- Reaching new goal
- May be manualized

Life skills group

- Psychoeducational model
- Improve self-esteem
- Sense of efficacy and competency
- Management of anger
- Conflict resolution
- Teaching pro-social behaviors
- Teaching empathy, making friends, etc.

Psychodynamic group therapy

- Emphasis on “group as a whole” interpretations
- Therapist has more a role of transference figure (by group)
- Group dynamics principle
- Different “positions” of the group
- And different roles for group members

Psychodynamic

- Therapist encourages regular attendance
- “belonging” to the group
- Transference of feelings toward therapist and toward group members
- “replay” of internal working models of relationships in the group

Psychodynamic

- Often “open ended”
- Therapist is more “anonymous” and “abstinent” to facilitate transference
- The group may develop a “group mentality”, e.g. dependency, paranoid tendency, depressive stance, destructive or aggressive tendency

Psychodynamic

- Therapist interprets behavior and invites reflection
- Individual members encouraged to participate
- “open agenda”
- Members make observations to each other
- Attempt to keep a therapeutic climate in the group

Psychodynamic

- Members provide feedback to others
- Ask clarifications
- Offer observations
- Confront difficult behaviors (e.g. absence, lateness, not talking, monopolizing the floor, acting out behaviors, sabotaging the group)
- Feedback often more effective when offered by a peer in the group

Psychodynamic

- Behavior is examined within the group
- Relationships between patients outside the group are discouraged
- Particularly strong friendships or romantic or sexual involvement
- Therapist maintains attitude of hope and involvement

Other groups . Dialectical and behavioral therapy

- For personality disorders, e.g. borderline
- Therapist takes a more active role
- Teaches skills and helps patients practice them outside the group
- Assigns work
- Promotes patients supporting and helping each other within group
- Sense of belonging, commonality, diminished stigma and sense of isolation
- Mutual encouragement and hope

Special groups

- Patients with diabetes, support, problem solving, diminish isolation, mutual encouragement
- Other chronic illnesses
- Epilepsy, cystic fibrosis, hemophilia, etc.
- Dealing with the health care system, school issues, peers, etc.

Mentalization based group therapy

- Focus on promoting increased ability to use mentalization skills by group members
- Members assist each other in “exercises in mentalization”
- Confronting on failures in mentalization
- Mutual encouragement, recognition,
- Therapist active role in management of the group and interpersonal exchanges

Self understanding

- Members gain insight into ‘
- Psychological motivation that is
- Underlying behavior
- And emotional reactions