

Comprehensive Group Psychotherapy



EDITED BY

SECOND
EDITION

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Benjamin J. Sadock, M.D.

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Comprehensive Group Psychotherapy

**SECOND
EDITION**

Dedicated
to our wives
Nancy Barrett Kaplan
and
Virginia Alcott Sadock

Foreword

At the end of World War II, group psychotherapy was viewed by many members of the psychiatric establishment with a variety of negative feelings ranging from doubt to suspicion to contemptuous rejection. The dyadic relationship and the understanding of the transference neurosis were seen as the essential therapeutic elements of psychotherapy. Many people could not see how the transference neurosis could unfold in a group setting in a manner which would lend itself to analysis, insight, and cure. It can be difficult for someone who did not live through this period to understand the intensity of the conviction with which these beliefs were held. As late as 1960, many fine residency programs in the United States had no teaching of the principles and practice of group psychotherapy. Many fine treatment hospitals relegated it to a secondary role in which groups were usually led for inpatient units by nurses or social workers and only rarely by psychiatrists.

During the last few decades, the use of group has flourished despite these early attitudes. The reasons for its growth and development are multiple. The group approach made it possible for more people to be treated by the same number of therapists. Obviously, this was a highly cost-effective development. The results of group psychotherapy appeared to be satisfactory, and workers in the field reported good results with a variety of patients groups in a variety of settings. It became apparent that the peer pressure of the group could be a useful force for a change even if this force did not reflect traditional concepts of insight. The group therapies also were accepted by a number of nonmedical disciplines, and this extended the cadre of professionals available to offer treatment to a variety of populations.

The reasons for its growth which have been operative are even more powerful in the present. It is obvious, therefore, that the future of group treatment will be even brighter than its recent past history. The desire of more professionals to offer active treatment, combined with the ever-increasing awareness of cost effectiveness, will result in further utilization of these techniques. Perhaps even more importantly, the desire of many individuals to form self-help groups without professional leadership is a movement whose

impact is only beginning to be felt. It is always an act of foolishness to prophesize the future, but it seems safe to conclude that these next years will show an increasing popularity and utilization of group techniques.

Not only utilization but the status of the group therapies has changed dramatically. The formal teaching of group techniques is now a requirement for an approved residency training program. Virtually every professional is exposed to group therapy training of one or another type, and virtually every group of people interested in helping themselves with a particular problem has turned to self-help techniques. There is an increasing recognition that there is a method to these activities, and that the method is worthy of scientific study. As is so often the case in the history of science, that which was scorned by one generation is respected by the next. One cannot help but be reminded of Max Born's bitter comment that new ideas are accepted by science only as their opponents die off.

Harold I. Kaplan and Benjamin J. Sadock have combined their diverse and complementary talents once again to produce an outstanding source book for the field. The book is divided into five areas. The first focuses on basic principles, the second on specialized techniques, the third on special categories, the fourth on training and research, and the last on the international scene. They have been successful in obtaining an outstanding group of colleagues to write 58 chapters. They have also appended a glossary for those who are unfamiliar with some of the terminology. It is difficult to imagine that someone interested in an overview of group psychotherapy would require anything beyond this volume. This is an updated edition of a book they first published in 1971, which was very well received by the field. Advances during the intervening years have required a new edition, and the authors have responded to this need in a way that deserves considerable credit. This is an essential volume for any professional interested in the topic, and it is difficult to conceive of a professional who should not be so interested.

Robert Cancro, M.D., Med. D.Sc.

Preface

The first edition of *Comprehensive Group Psychotherapy* appeared over a decade ago. Since then the continued emergence of group psychotherapy constitutes one of the most significant and extraordinary developments in the mental health field.

During this period, alternate views of group therapy as a substitute for individual treatment and as a viable solution to the shortage of trained personnel qualified to care for a growing patient population, the lack of adequate community resources for psychiatric patients, and the high cost of individual treatment have accounted, in part, for the growth of the field. In addition, and more importantly, group therapy has come to be regarded as the treatment of choice for a widening range of patients with highly diverse problems. Concurrently, professionals and laymen alike have evinced a growing interest in the relationship of group therapy to sociocultural processes and systems and to sociological and educational concepts. Predictably, these theoretical developments have been paralleled by the development of myriad therapeutic approaches which vary not only with respect to their underlying philosophy, but also with respect to the planning and conduct of treatment.

The development of an armamentarium of group treatment techniques to meet the diverse therapeutic needs of a varied patient population is commendable in itself, as an indication of the vigor and relevance of group psychotherapy. However, the rapidity with which these techniques have been developed has given rise to serious problems which require prompt resolution if group psychotherapy is to achieve maturity as a scientific discipline. For one, many of the group therapy techniques which are currently utilized, and particularly those which have emerged within the past 5 years, have not been described with sufficient specificity in terms of their goals, the patients for whom such treatment is indicated, and the results they have achieved. Second, there is a dearth of trained professionals qualified to ensure the proper and effective implementation of these techniques.

The organization and orientation of this edition of *Comprehensive Group Psychotherapy* were determined by these considerations. The prescribed aim of this textbook is, of course, to foster professional competence. And, to this end, an attempt has been made to provide a comprehensive survey of the therapeutic techniques which dominate contemporary group practice and the theories and hypotheses on which they are based.

There are no final answers, as yet, to the problems

and issues which currently face group psychotherapy and account for the confusion which has permeated this field. But, at the least, the survey presented herein may help to identify these problems and issues and place them in proper perspective.

As noted above, one of the most crucial of these problems is the lack of professionals who must be charged with the responsibility for the future growth and development of group psychotherapy. Thus, a correlative goal of this volume is to underscore the need for adequate—and standardized—training in this discipline, to conform with prescribed professional standards. An attempt has been made in this volume to provide a dynamic and eclectic, but nonetheless structured and systematic, presentation of the body of knowledge currently available in group psychotherapy. Hopefully, the availability of a body of knowledge which can be taught and communicated will stimulate efforts to establish additional programs for training in the skills of group psychotherapy and will enhance existing training programs.

Both editors, in addition to being psychiatric educators, are actively engaged in clinical practice and, in that capacity, have treated patients both individually and in groups. Too often the educator and clinician assume separate functions within our social structure. In fact, this is a false dichotomy, especially when applied to the helping professions. Psychotherapy is an art as well as a science. Consequently, what is taught via the lecture hall or seminar room constitutes just one aspect of the teaching curriculum. Training in psychotherapy must also include clinical exercises performed under the supervision of an experienced clinician who acts as a model for the student.

Authorship

A book written by a single author has certain distinct advantages: It ensures unity and continuity of text and consistency of viewpoint. On the other hand, its scope and dimensions are necessarily limited. The group method of treatment encompasses so many diverse approaches that it would be difficult, if not impossible, for any single individual to discuss them all in sufficient depth and with sufficient objectivity. The editors decided, in light of these considerations, to invite many authors to contribute to this textbook.

The compelling advantage of multiauthorship, in the editors' view, was that each of the group treatment methods covered, as well as those areas in the volume

which are concerned with broader theoretical issues, could then be discussed in depth by an expert with special experience or knowledge in a particular phase of theory or practice. Indeed, most of the contributors to this book introduced and developed the group techniques they describe. When the innovators of a particular method were not available for this purpose, their work was summarized by outstanding educators in the field.

At the same time, multiauthorship raises problems with regard to the integration and cohesiveness of material. The editors attempted to deal with these problems by asking our collaborators to follow a specific outline in preparing their contributions. By so doing, we hoped to ensure that each contribution would form an integrated part of the text, without sacrificing each author's unique, creative approach.

Major Modifications in the Second Edition

Although we have retained the basic organization of the first edition of *Comprehensive Group Psychotherapy*, important modifications and changes have been made.

All major psychiatric and emotional disorders discussed in this textbook are in accord with the nosology of the third edition of the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* (DSM-III).

In addition, all the sections have been expanded and updated. At least 75 per cent of the material is new, representing significant developments in the field.

Two sections which the editors consider to be classical contributions in group psychotherapy have been retained, although in a somewhat modified form: "Psychoanalysis in Groups" by Alexander Wolf and "Psychodrama" by Zerka Moreno.

Finally, a new and long-overdue innovation is the section on International Group Psychotherapy. This section recognizes the use of the group method of treatment around the world and the original contributions in both theory and technique from investigators working in many different countries.

Acknowledgments

Completing a task of this magnitude required the help of an accomplished and dedicated staff. Nancy Barrett Kaplan and Victoria Sadock provided important aid and assistance throughout the project. We wish to make special mention of Gene Usdin, M.D., and Gail Brenner, M.D., who were especially helpful in advising the editors in the area of international group psychotherapy. Others who helped in the production of this book and who deserve thanks are James W. Sadock, Peter Kaplan, Phillip Kaplan, Jennifer Kaplan, and Judy Drummond.

We wish to offer special thanks to Joan Welsh, head of editorial supervision, for her superb help in the editing of this book. Both her talents and continued friendship are deeply valued. At Williams & Wilkins, James Sangston, Jonathan Pine, Jr., Diana Welsh, and Jacqueline Karkos were of inestimable help. Sara Finnegan, Book Division President of Williams & Wilkins, was also especially helpful.

Virginia A. Sadock, M.D., in addition to writing a number of sections for this book, served as assistant editor and deserves particular mention for her outstanding help in the many editorial discussions and decisions in which she participated.

Finally, the editors wish to thank Robert Cancro, M.D., Professor of Psychiatry and Chairman of the Department of Psychiatry at New York University School of Medicine. He has served as their trusted advisor and collaborator in a variety of psychiatric endeavors including the *Comprehensive Textbook of Psychiatry*. Dr. Cancro heads one of the most important academic and clinical training programs in psychiatry in the United States. The editors have been most pleased to participate and work with the outstanding faculty he has gathered at NYU Medical Center.

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AREA A

BASIC PRINCIPLES

A.1 History of Group Psychotherapy

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Introduction

In the first edition of this textbook, the importance of studying the origins of the group method of treatment was set forth by Anthony (1971):

The past is conglomerate, complex, confabulatory, and conflictual, but it is incumbent on every worker to resolve these perplexities and complexities for himself and, by so doing, discover his own professional identity and ultimate purpose. Each group psychotherapist must become his own historian and thread his way with open-mindedness and relative impartiality through the shoals of psychobiologically improbable, mythological, mystical, and paralogical ideas of the past and present, asking his own questions and seeking his own answers within the totality of what is known or imagined. He has to undertake this job for himself, since no one can do it for him.

That being so, the very least required of the authors is to point out various landmarks to help Anthony's lonely traveler find his or her way.

Group psychotherapy has been influenced by many persons and philosophies, both American and European, but Americans are usually regarded as the major contributors and innovators in the field. It is especially true today that the major impetus stems from this country. But all along, in this country and Europe, many workers were grappling with similar problems at almost the same time.

American influences

Pratt. The man credited with beginning the practice of group therapy in this country was not a psychiatrist but an internist, Joseph H. Pratt (see Figure A.1-1). In July 1905, Pratt, working in Boston, organized his first group, composed of tuberculosis patients (Hadden, 1975). Most of his patients were severely ill, generally debilitated, and despondent. They were often ostracized from the community, much the same way many mental patients are ostracized today.

Grouped together and often rejected and feared, they seemed ideal subjects for group techniques.

Pratt would meet once or twice a week with 20 to 30 patients at a time. Referring to them as a class, rather than a group, he would lecture about the disease of tuberculosis and the method of cure, and was generally supportive and encouraging about the prognosis. Patients who had responded successfully would present themselves before the group and tell how they had been helped. Difficult patients—those who resisted the method of treatment, which required that they remain at bedrest 8 to 12 hours a day—were seen individually by a nurse, who was known as the “friendly adviser.”

Certain techniques used by Pratt are still found in some group methods used today, particularly in homogeneous groups, in which all patients have a common condition. In Alcoholics Anonymous (AA), it is standard practice for the alcoholic to present himself before the group and tell how he achieved the goal of abstinence from alcohol and about the benefits derived therefrom. In both AA and Pratt's group, the process of identification, whereby the sick member takes on qualities and behavioral patterns of the healthy member, is among the therapeutic influences at work.

Marsh. In 1919, L. Cody Marsh, both a minister and a psychiatrist familiar with Pratt's work, began to apply the group method of treatment to institutionalized mental patients. Like Pratt, he referred to the group as a class and to the patients as students. They attended weekly lectures given by Marsh on a variety of topics pertaining to the origins and manifestations of mental illness. Students were expected to take notes during the lectures, and attendance, punctuality, and attentiveness were recorded for each student. Outside reading was assigned, written papers were required, and graded examinations were given. If a student did poorly, he might be required to repeat the course, which was given several times a year. He might also be assigned a tutor to work with him privately.

Marsh arranged discussion groups with all hospital personnel who came into contact with patients—doctors, nurses, social workers, attendants, and so on. He was one of the first psychiatrists to recognize that every encounter a patient had