



Interpersonal Psychotherapy

IPT for Groups

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Interpersonal Psychotherapy

IPT for Groups

Introduction

- How is this group going to help me?
- What does this group have to do with my problems?

Types of Groups

- Balint/Process groups
- Time-limited therapy groups- similar patients
- Psychoeducational groups
- Support groups



Common Elements of Groups

- Installation of hope
- Universality
- Psychoeducation
- Altruism
- Interpersonal learning and support
- Group cohesion

Common Elements of Groups

- Corrective recapitulation of primary family group
- Catharsis
- Existential factors

Common Elements of IPT Groups

- Installation of hope
- Universality- **Feeling Understood**
- Psychoeducation
- Altruism- **Social Support**
- Interpersonal learning and support-
Modeling and Problem Solving
- Group cohesion- **Decrease Isolation**

Common Elements of IPT Groups

- Corrective recapitulation of primary family group- Establish positive social support
- Catharsis- Corrective therapeutic experience
- Existential factors- Emphasize meaning in current situation

IPT: Overview of Group Structure

Goals:

- 1) Psychoeducation
- 2) Increase social support
- 3) Resolve interpersonal problems

IPT Group Structure

Assessment/Initial Phase

Individual Intake

Group Phase

Conclusion of Group Treatment

2 Sessions

7 Sessions

1 Session

IPT Group Structure- Group Phase

Group Phase

Introductions

1 Session

Role Transitions

2 Sessions

Disputes

2 Sessions

Grief and Loss

2 Sessions

Conclusion

1 Session

Group Structure- General

- Open vs Closed
- Terminated vs Continuing
 - ◆ Duration
 - ◆ Maintenance
- Frequency
- Duration of Sessions
- Size
- Therapist(s)
- Setting

Stages of Groups- General

- In or Out
- Top or Bottom
- Conflict
- Resolution
- Challenge of therapist(s)
- Cohesiveness
- Termination

Stages of Groups- IPT

- In or Out- IN
- Top or Bottom- EQUAL
- Conflict- OUTSIDE OF GROUP
- Resolution- PROBLEM SOLVING
- Challenge of therapist(s)- POSITIVE SUPPORT
- Cohesiveness- from the outset
- Termination- Conclusion

IPT: Overview of Groups

■ IPT Therapist Stance

- ◆ Active

- ◆ Supportive

- ◆ Protective

- ◆ Directive

- ◆ Modeling and Socializing

- ◆ Minimizing Transference

IPT Group Microskills

- Modeling
 - ◆ *Openness*
 - ◆ *Collaboration*
 - ◆ *Graciousness*
 - ◆ *Empathy*
 - ◆ *Problem Solving*
- Clarification
- Positive Reframe
- Directive Inclusion

IPT for Groups: Empirical Evidence

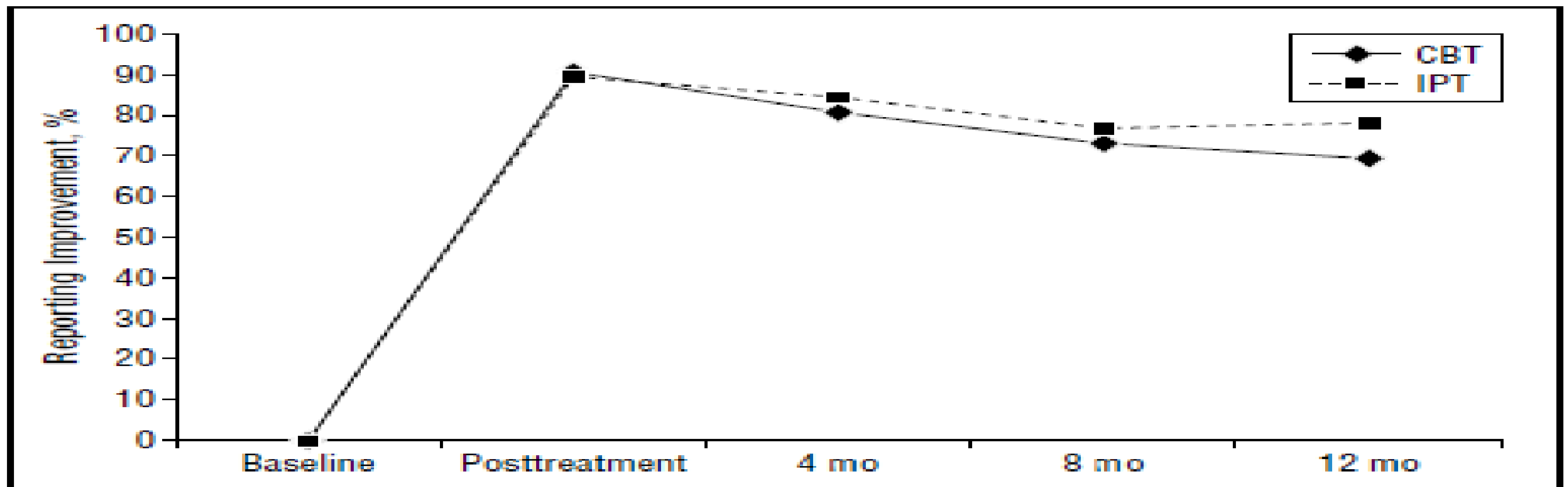
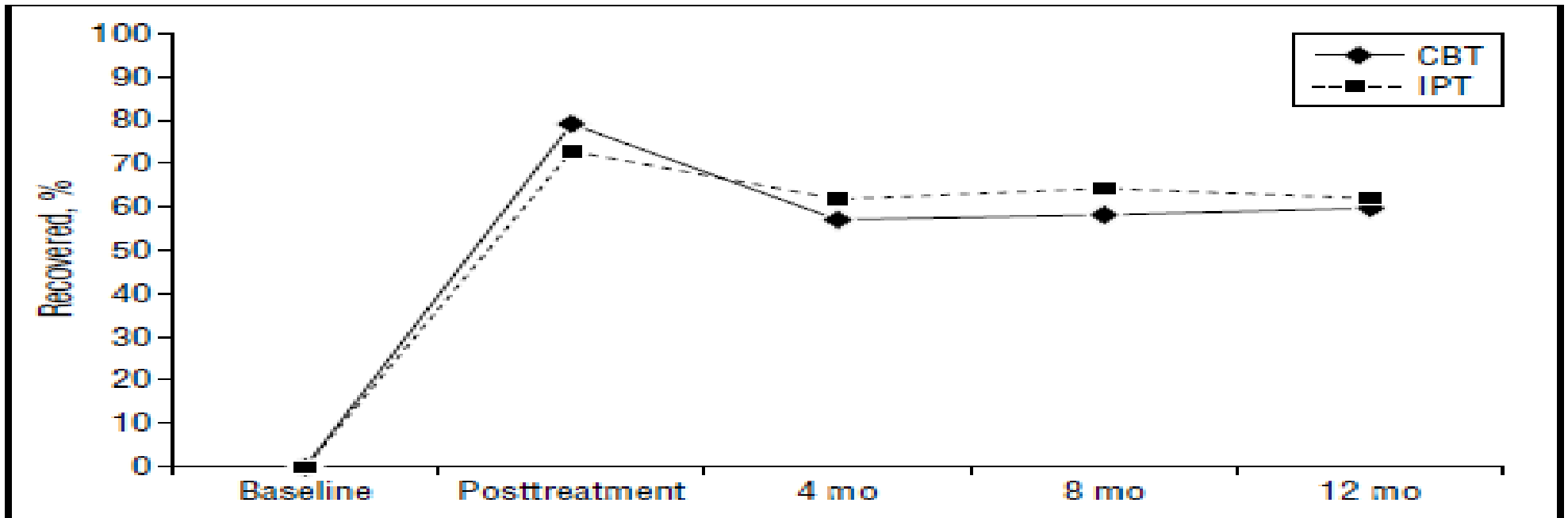
IPT for Groups Evidence

- IPT is a well-established individual treatment
(Cuijpers et al., 2011)
- Similar outcomes in individual and group psychotherapies
(Cuijpers et al., 2008; McDermut et al., 2001; McRoberts et al., 1998)
- No difference in individual vs. group IPT for adolescents with depression
(O'Shea et al., 2015; Rosselló et al., 2012)

IPT for Groups Evidence

- RCT of Group CBT and IPT for BED
- $n = 162$
 - ◆ 20 weekly sessions Group CBT
 - ◆ 20 weekly sessions Group IPT
 - ◆ 10% dropout rate
- Measures of eating pathology, weight, and general psychological functioning

(Wilfley et al., 2002)

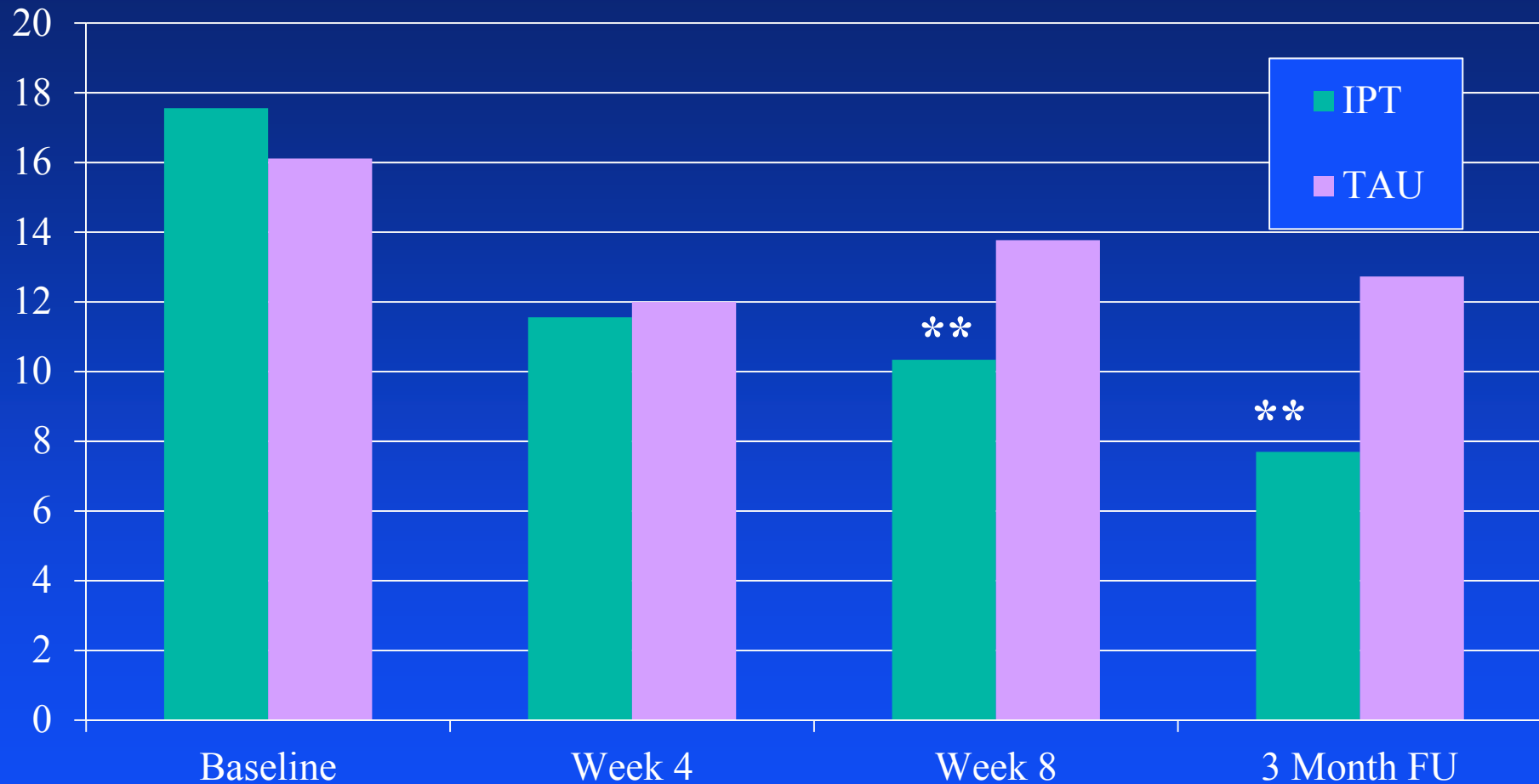


IPT for Groups Evidence

- RCT of Group IPT for PPD
- $n = 50$
 - ◆ 8 weeks of Group IPT
 - ◆ Treatment as Usual
 - ◆ Dropout rate = 15%

(Mulcahy et al., 2010)

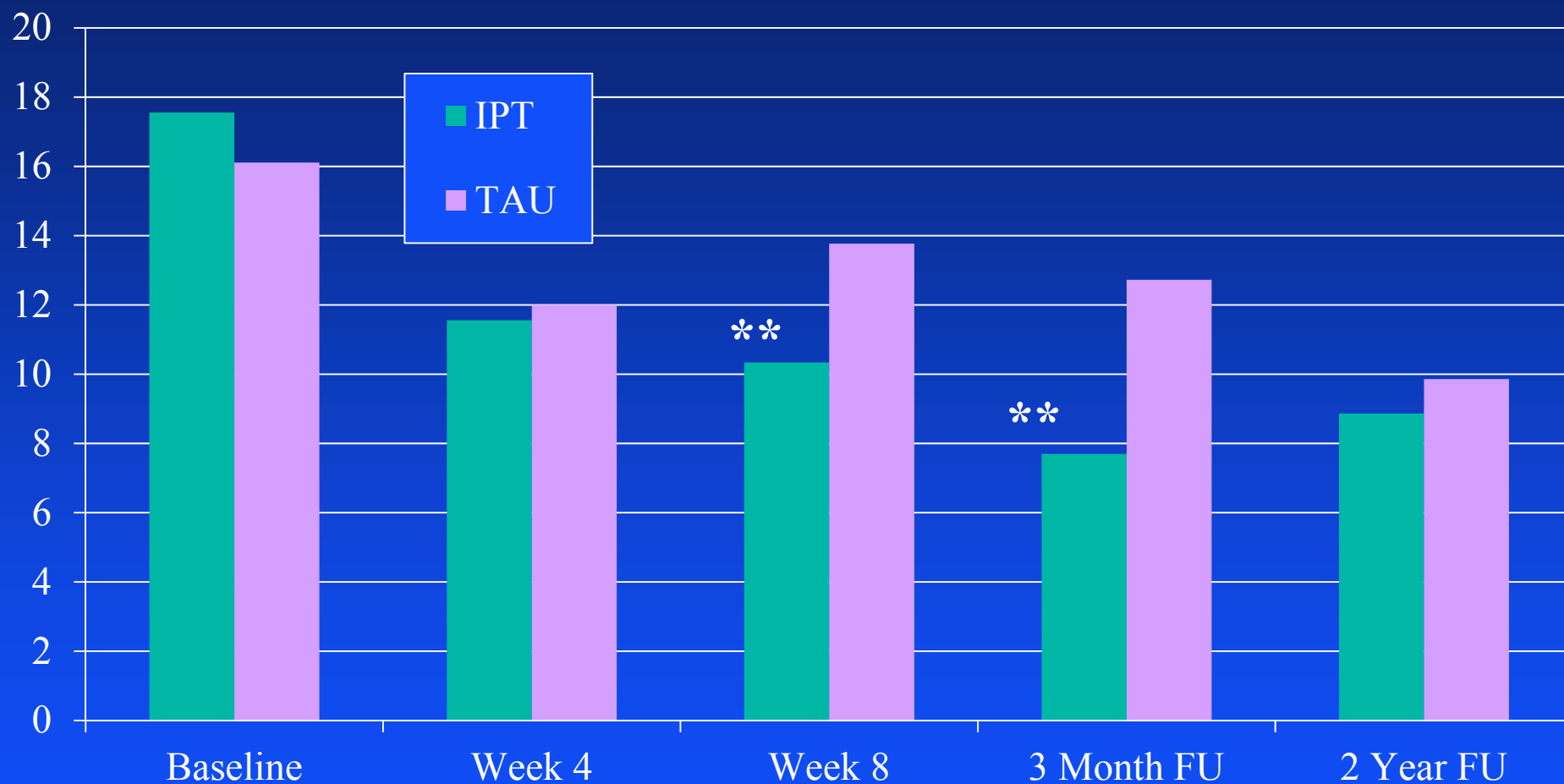
IPT for Group PPD Results



Edinburgh Postnatal Depression Scale (EPDS)

(Mulcahy et al., 2010)

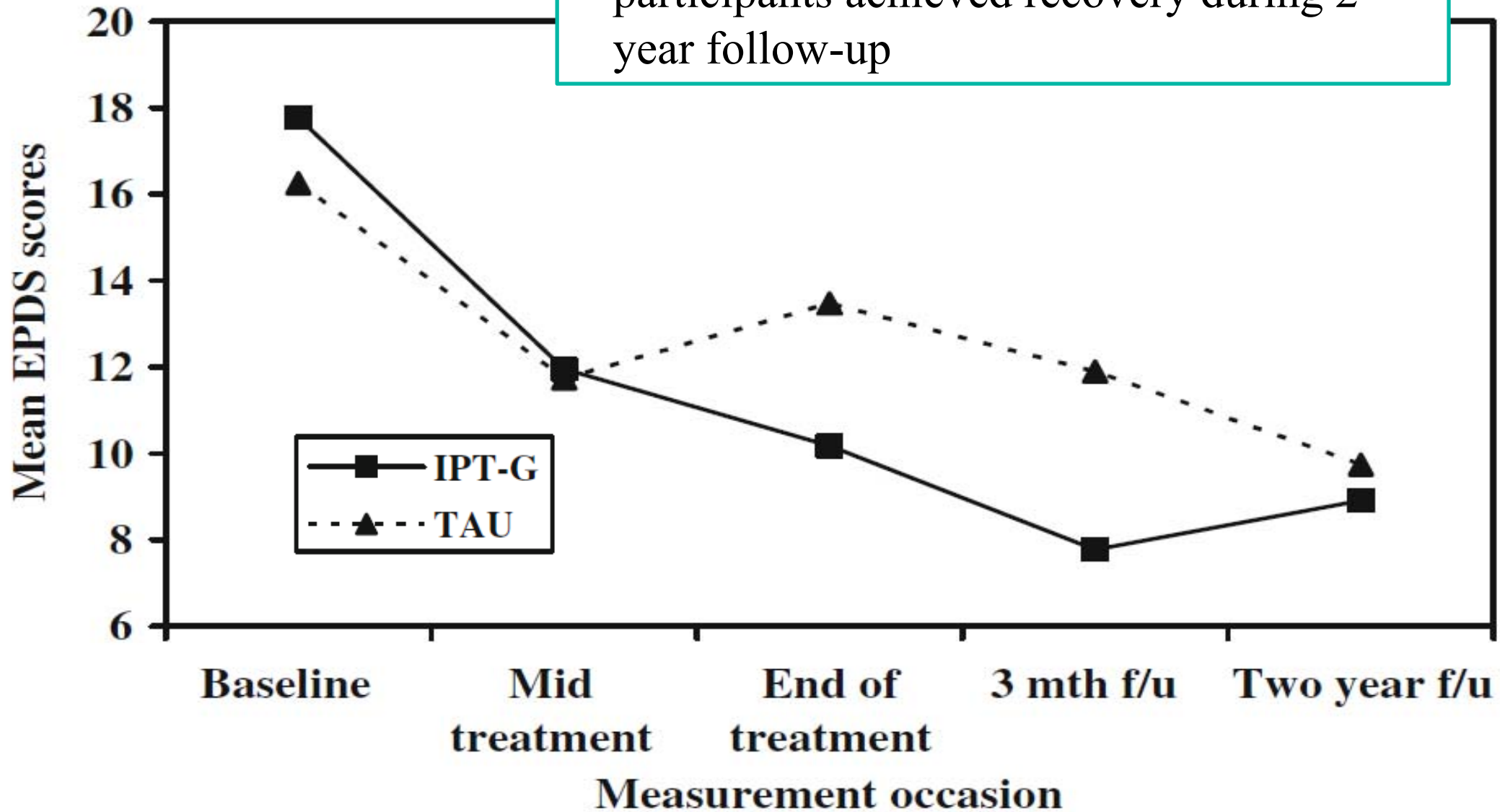
IPT for Groups PPD Results



Edinburgh Postnatal Depression Scale (EPDS)

(Reay et al., 2012)

- 57% of IPT participants sustained recovery
- 86% of initially non-recovered IPT participants achieved recovery during 2 year follow-up



Group IPT for Depression

- Postpartum Depression (Field et al., 2013; Klier et al., 2001, Reay, 2006)
 - ◆ Prevention for at-risk women (Kao et al., 2015, Zlotnick et al., 2006)
- Depression following perinatal loss (Johnson et al., 2016)
- Depression in older adults (Scocco et al., 2002)
- Prevention of depression in adolescents (Young et al., 2015)
- Incarcerated women with MDD and SUD (Johnson & Zlotnick, 2008; 2012)
- Depression in women with history of interpersonal violence (Cort et al., 2014)
- Depression in International Populations (Peterson et al., 2012; Verdeli et al., 2003)

Group IPT: Additional Indications

■ Bulimia

(Wilfley et al., 1993)

■ Binge Eating Disorder

(Wilfley et al., 2002)

■ PTSD

(Campanini et al., 2010; Krupnick et al., 2008; Ray, 2010; Robertson et al., 2004; 2007)

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Group Phase

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IPT Group Structure- Group Phase

Group Phase

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Disputes

2 Sessions

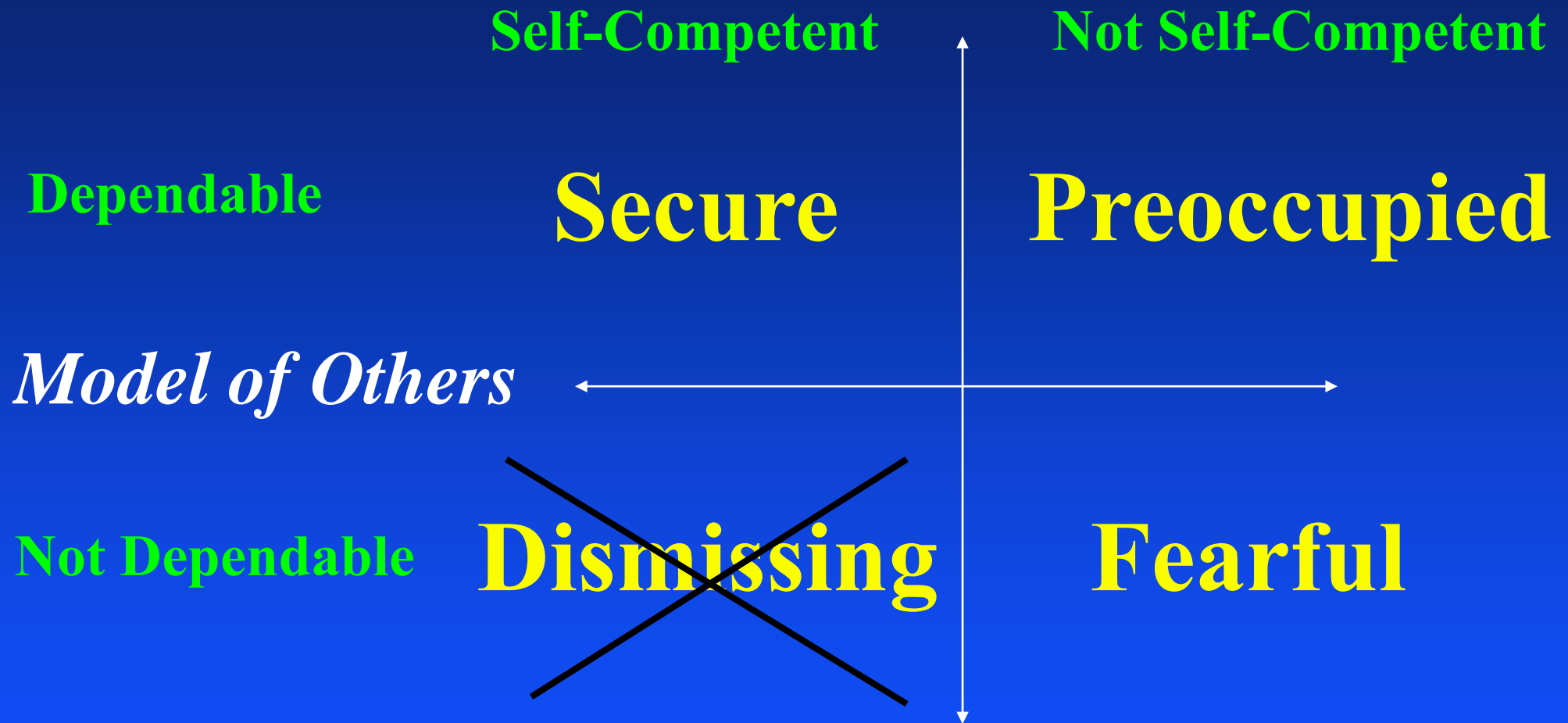
Grief and Loss

2 Sessions

Conclusion

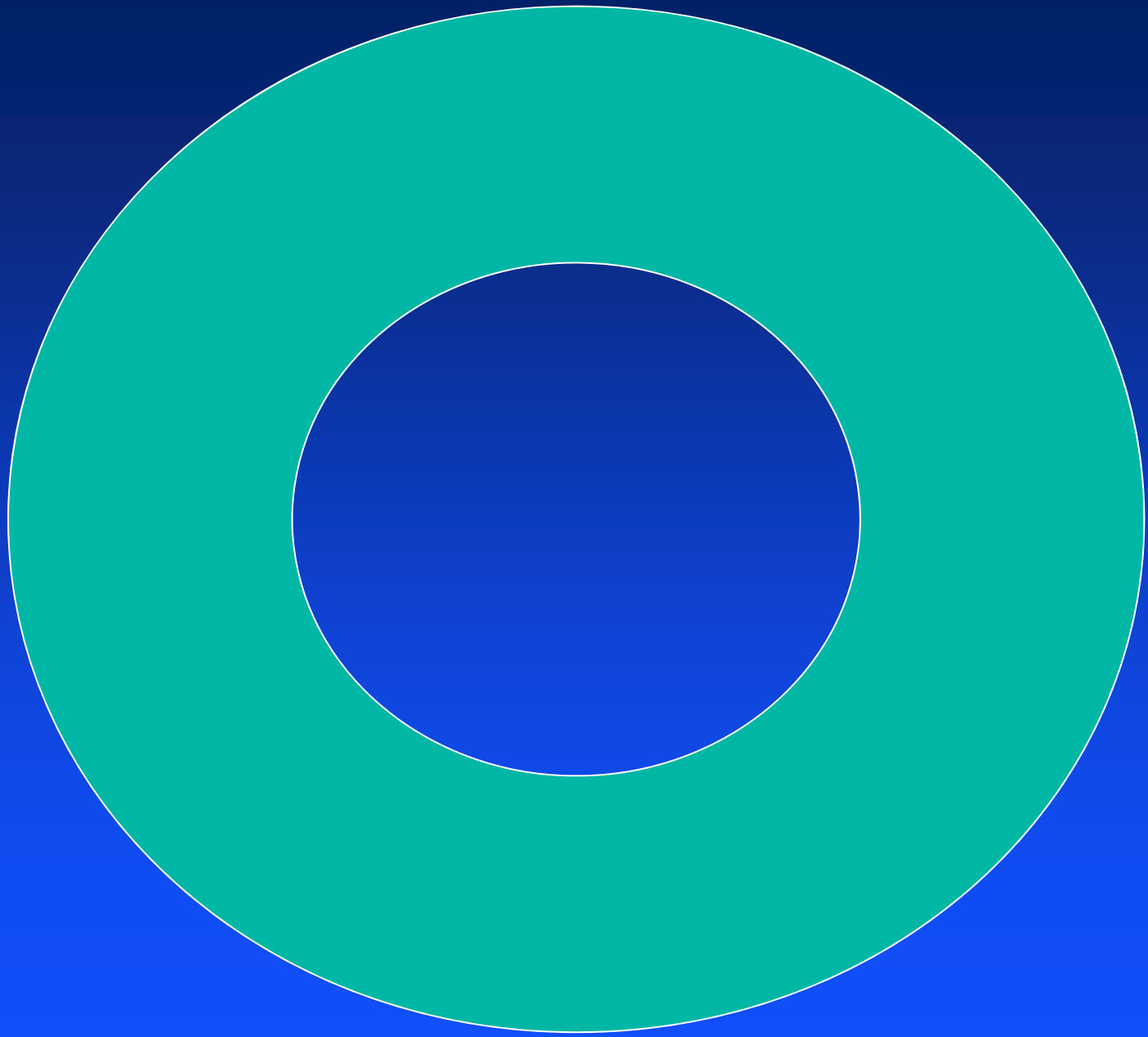
1 Session

Patient Selection- Groups



IPT: Interpersonal Inventory

- Overview of Social Network
- Evaluate
 - ◆ *interpersonal problems*
 - ◆ *communication*
 - ◆ *narrative*
 - ◆ *attachment style*
 - ◆ *general suitability*



IPT Formulation

Biological Factors

Age
Genetics
Gender
Substance Use
Medical Illnesses
Medical Treatments
Diet, Exercise

Social Factors

Intimate Relationships
Social Support
Employment
Education
Health Care System
Means of Communication

Psychological Factors

Attachment
Personality
Temperament
Defense Mechanisms
Trauma History
Stigma

Cultural Factors

Tradition
Family

Unique Individual

Spiritual Factors

Tradition
Social Support

Acute Interpersonal Crisis

Interpersonal Dispute
Role Transition
Grief and Loss

IPT Summary

**Cancer
Fear of
Death
Fear of Pain**

**Isolation
Loneliness**

Goals:

- 1) Cope better with cancer**
- 2) Feel less isolated**

**Husband
tries to
problem
solve**

**Problem Solver
Competent
Humor**

**Conflict
with
mother**

In groups, the Inventory and Summary are even more important since the patient will be USING these documents to tell their story to the group in the 1st and 2nd sessions. This becomes a literal roadmap or outline for their story

The IPT Summary is an opportunity to develop common problems and social support. For instance, with cancer groups, all individuals should have “coping with cancer” as one of their goals in the summary. Thus they ALL have that common goal before the groups even start.

Later the group can coalesce around other goals developed in the group. For instance, in postpartum groups “doing what is best for our kids” or “sharing sisterhood” are examples.

IPT Group Process

- Driving vs. Guiding
 - ◆ Contrast to individual work
- “Processing” will likely be perceived as scrutiny
- Positive reinforcement will shape behavior

Problems in Groups

- Resistance vs reality
- Dropouts
- Dependent patients
- Passive patients
- Aggressive patients

Problems in Groups

- Subgrouping
- Exclusion
- Conflict resolution- emphasize the positive
- Self-disclosure
- Conclusion/Termination

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Concluding IPT Groups

- Additional treatment
- Additional group contact
- “Reunion” session
- Rigid vs. flexible protocol

A dark blue background featuring a faint, light blue grid of latitude and longitude lines, with the outlines of the continents visible.

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