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
  (Ciujpers et al., 2011)

- Similar outcomes in individual and group psychotherapies
  (Ciujpers 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; Verdelli 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)
IPT Group Structure

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Group Phase

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2 Sessions

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1 Session
IPT Group Structure - Group Phase

Group Phase
Introductions 1 Session
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Grief and Loss 2 Sessions
Conclusion 1 Session
Patient Selection - Groups

Secure | Preoccupied

Self-Competent | Not Self-Competent

Dependable | Not Dependable

Model of Others

Secure | Dismissing | Fearful
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

**Spiritual Factors**
- Tradition
- Social Support

**Unique Individual**

**Acute Interpersonal Crisis**
- Interpersonal Dispute
- Role Transition
- Grief and Loss
Cancer
Fear of Death
Fear of Pain

Isolation Loneliness

Goal:
1) Cope better with cancer
2) Feel less isolated

Husband tries to problem solve

Problem Solver Competent Humor

Conflict with mother

IPT Summary
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
IPT Group Structure

Assessment/Initial Phase

Individual Intake

2 Sessions

Group Phase

7 Sessions

Conclusion of Group Treatment

1 Session
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Concluding IPT Groups

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