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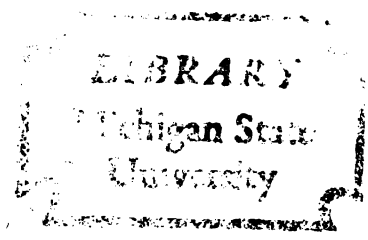
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GROUP THERAPY WITH PARENTS IN A
CHILD GUIDANCE SETTING

by

Lois N. Mark and Leone A. Norton

May 1961



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CHAPTER I

INTRODUCTION

The Problem: Its Nature, Importance, and Organization

Social work has long recognized that the understanding of the individual includes understanding his relationships as a member of groups, particularly his family. The research project in which we were engaged has grown out of the recognition of the wholeness and interrelatedness of individuals--the importance of group and individual interdependence to social functioning and survival. It is recognized that the family has a major influence upon the individual's personality and his subsequent relationships with others. Specifically, the purpose of this study was to review literature relevant to group therapy with parents of children in child guidance settings in order to consider the effectiveness of group therapy in enhancing the social functioning of the family and in achieving agency goals.

The reaction of the individual to the group has been considered an indication of his health, and the pressure of the group upon him as a force in molding personality. The effect and counter-effect make the group a rich resource as a way of understanding the individual and modifying his

adjustments.¹ Ackerman, a leading proponent of group therapy, notes that while the idea of ameliorating emotional suffering through the medium of group experience is not new, the conceptually integrated group treatment methods of recent years do represent an innovation.² The literature reveals that the method of treating patients in groups is increasingly being used in such settings as hospitals, private psychiatric practice, child guidance clinics, various institutional settings, and social agencies. The writers feel this study is important to the field of social work where there is a current trend toward the modification of practice as seen in social work's increased utilization of group treatment methods. It appears that this trend will continue. A workshop held recently at the Tulane School of Social Work points out that we may be observing a widespread modification in practice which is currently unsettling to some schools of social work and many agencies. It was indicated that several schools, as a result, are re-thinking their curriculum and that many agencies are uncertain about standards with regard to this trend in practice.³

¹S. R. Slavson, An Introduction to Group Therapy (New York: Columbia University Press, 1950), pp. v-vii.

²Nathan Ackerman, "Some Structural Problems in the Relations of Psychoanalysis and Group Psychotherapy," International Journal of Group Psychotherapy, Vol. 4 (1954), p. 131.

³The Use of Group Methods in the Practice of Casework, A Workshop Report (New Orleans: Tulane University, August, 1959), p. 1.

This confusion can be witnessed in the literature which reveals disputed areas in theory and practice of group therapy. There is a confusion and lack of conceptual clarity in terminology, theoretical understanding, and practice. The interplay of these factors contributes greatly to the lack of effective communication on group therapy. Group therapy has been claimed and used by various fields including medicine, psychology, psychiatry, social work, and others. It is hoped that the review of representative literature on group therapy in this study will contribute some clarity toward social work's more effective and integrated use of this method as a tool in achieving its goals. The writers feel that the group therapy method has significance as an approach to relationship problems and to meeting social work's need for more flexible methods in order to deal with growing community demands. It is also felt that this method has important contributions to make toward more effective treatment of individual and family malfunctioning as well as facilitating the achievement of agency goals. With the recognition of the varied viewpoints and settings in which group therapy may be practiced, this study's focus of group therapy was applied to the treatment of parents in a child guidance clinic setting.

Our basic assumptions included the belief that human behavior can be changed, and that it can be changed through group interaction. On the basis of our assumptions, we

hypothesized that effective treatment of individual and family malfunctioning is facilitated through group therapy in addition to casework. It was also hypothesized that group therapy with parents will facilitate the achievement of agency goals.

The organization of this study included a presentation of the historical and theoretical background of group therapy. Through a general survey of the literature, we have attempted to determine how group therapy is being used in various settings and under what conditions. We have noted the differentiation in approaches and applied what is relevant to the achievement of child guidance clinic goals and the enhancement of the social functioning of the family. The review of literature was guided by the use of a schedule, and books and periodicals in the related fields of sociology, psychiatry, psychology, and social work relevant to the study problem were reviewed. The application of group therapy to child guidance clinics relates to goals which are:

- A. To alleviate and prevent mental disorders.
- B. Early treatment of childhood problems, namely, adjustment in the home, school, and community.
- C. Interpretation and education for parents, teachers, and others working with children.

CHAPTER II

HISTORICAL AND THEORETICAL BACKGROUND OF GROUP THERAPY

Historical Background

Group therapy had its inception in the United States in the first decade of the twentieth century with Dr. J. H. Pratt's organization of "thought-control" classes for patients with tuberculosis and other chronic diseases. Through his influence at the Boston Dispensary other physicians began group treatment of physical ailments.⁴ Emerson successfully treated a group of undernourished children and their mothers;⁵ Buck worked with a group of hypertensive patients; Chappell, Stefano, Rogerson, and Pike reported good results with the group treatment of patients with peptic ulcers.⁶

Among the early experimenters with group therapy was Dr. L. C. Marsh, whose writings show a remarkable insight into the possibilities for the future development of treatment groups.⁷ Shortly after World War I Dr. Edward Lazell

⁴J. W. Klapman, Group Psychotherapy (New York: Grune and Stratton, 1946), pp. 2-3.

⁵Ibid., pp. 3-5.

⁶Ibid., pp. 5.

⁷Ibid., pp. 8-11.

began the lecture method of group therapy at St. Elizabeth's Hospital, basing the lectures on psychoanalytic psychology simply explained. The results were so encouraging that the method was later extended to large groups of psychoneurotic patients in Veterans' Administration Hospitals.⁸ It is interesting to note that the second psychodrama theater to be built in the United States by Moreno was at St. Elizabeth's Hospital in 1940 for the rehabilitation of ex-service-men, using the technique of dramatizing their emotional problems.⁹ About 1930 Schilder and Wender first treated non-psychotic groups, and Schilder is credited with the development of analytic group techniques.¹⁰

Slavson's activity group therapy,¹¹ Redl's groups for children,¹² Burrow's phyloanalysis,¹³ Moreno's psychodrama,¹⁴ and Lowery's group treatment of mothers¹⁵ have developed as specific treatment approaches. Slavson, Redl, and Moreno have written widely on their methods.

World War II gave great impetus to group therapy, and it is now used extensively in psychiatric settings, general hospitals, and social agencies. A current example of the

⁸Ibid., pp. 6-7.

⁹Ibid., p. 6.

¹⁰Ibid., pp. 11-12.

¹¹Ibid., p. 19.

¹²Ibid., pp. 20-21.

¹³Ibid., pp. 7-8.

¹⁴Ibid., p. 6.

¹⁵Saul Scheidlinger, "The Relationship of Group Therapy to Other Group Influence Attempts," Mental Hygiene, XXXIX (1955), p. 377.

trend to expand the use of group therapy is the Windsor Group Therapy Project in Windsor, Ontario.

Theoretical Background

The present diverse methods of group psychotherapy have a common theoretical basis in the various schools of psychological and sociological thought.

Freud's contributions to theories on group relationships lie in his psychoanalytic concepts of behavior representing the ego's attempts to maintain or to establish equilibrium among the drives of the id, the superego, and the reality of the social and physical environment. The dynamic concept deals with the interaction and conflicts of internal forces and their reaction to external reality at any given time. The genetic concepts describe how any observed behavior is a product of the individual's past, which is structured in the present. Freudian psychology postulates that the dynamic and genetic concepts of behavior hold true for groups as well as for individuals and that group behavior is actually the behavior of the individuals who are in a process of social and emotional interaction. The Freudian ideas of group behavior have been elaborated by Slavson, Erikson, and Redl to make explicit the concept that all group behavior is a combination of the dynamic and genetic properties of the individual and the group elements of organization, climate, structure, and ideals which result

from the dynamic interaction of the group members.¹⁶ The Freudian theory of group cohesiveness deriving from common identifications of the group members with one another is important to the general theory of group dynamics.¹⁷

Adler's socio-teleological approach to the understanding of human personality, in contrast to Freud's biologic-instinctual concept, looks upon man as a social being whose behavior is purposive, the purpose being primarily social in nature. His philosophy of the social derivation of the individual's problems makes group therapy a natural method for diagnosis and treatment through a group, which he saw as a value-forming agent. Adler began group therapy in child guidance clinics in Vienna in 1921.¹⁸

Sullivan's interpersonal theory of psychiatry, in which human behavior and personality development are described in terms of the sum total of the interpersonal relationships of the individual, lends itself to the use of group therapy as a means of changing behavior through group interaction.¹⁹

¹⁶Saul Scheidlinger, "Freudian Concepts of Group Relations," Group Dynamics, eds. Dorwin Cartwright and Alvin Zander (Evanston, Illinois: Row, Peterson, and Company, 1953), pp. 52-61.

¹⁷Ibid., p. 12.

¹⁸Rudolf Dreikurs, MD, "Group Psychotherapy from the Point-of-View of Adlerian Psychology," International Journal of Group Psychotherapy, VII (1957), pp. 363-375.

¹⁹George Goldman, "Some Applications of Harry Stack Sullivan's Theories to Group Psychotherapy," International Journal of Group Psychotherapy, VII (1957), pp. 385-391.

Horney's philosophy emphasizes the environmental and cultural factors in helping the individual to the self-realization for which healthy parts of his personality strive. The potentiality of group therapy for working through the neurotic patterns lies in the group mutuality and group spirit which emerge in the group interaction.²⁰

Cooley, a sociologist, was among the first to use the term "small group" and was a pioneer in the study of the importance of group membership for the individual. Kurt Lewin's field theory is very similar in its theoretical approach to Freudian psychology but differs in placing its major emphasis on explaining both individual and group behavior as a function of the present social field to the neglect of the influence of past experience.²¹ Lewin has emphasized small groups with their potential for influencing change in the members.²² With the development of sociometry by Moreno, which involved working with many groups in a large variety of settings, the practice of group therapy was given a scientific foundation.²³ Considerable research in

²⁰Sidney Rose, MD, "Horney Concepts in Group Psychotherapy," International Journal of Group Psychotherapy, VII (1957), pp. 376-384.

²¹Saul Scheidlinger, MD, "The Relationship of Group Therapy to Other Group Influence Attempts," Mental Hygiene, 39 (1955), pp. 376-390.

²²Kurt Lewin, Field Theory in Social Science (New York: Harper and Bros. Publishers, 1951), pp. 188-237.

²³J. L. Moreno, MD, "Philosophy of the Third Psychological Revolution with Special Emphasis on Group Psychotherapy and Psychodrama," Progress in Psychotherapy, ed. Frieda

group dynamics is being done to test hypotheses derived from the large body of theory. The results should add disciplined knowledge valuable to the group therapist on the processes of group structuring and the emotional integration of the individual into the group.²⁴

A Concept of Group Therapy

To define or to delimit group psychotherapy is not within the scope of this study. The purpose of our review of a portion of the literature on group psychotherapy or group therapy, the terms being used interchangeably, has been rather to develop an understanding of what is included within the terms and to consider the applicability of group therapy to the child guidance settings. The immediate impression of confusion and ambiguity in the multiple definitions and descriptions is due in part to each therapist's attempt to defend his own approach as unique. The result is strongly reminiscent of Humpty Dumpty, "When I use a word, it means just what I choose it to mean, neither more nor less. When I make a word do a lot of work, I always pay it extra."²⁵

Fromm-Reichmann, MD, and J. L. Moreno, MD (New York: Grune and Stratton, 1956), pp. 25-26.

²⁴Nathan Ackerman, MD, "Some Structural Problems in the Relations of Psychoanalysis and Group Psychotherapy," International Journal of Group Psychotherapy, IV (1954), p. 142.

²⁵Lewis Carroll, Through the Looking Glass (Mt. Vernon, New York: Pauper Press, undated edition), p. 406.

From the previous summary of schools of psychological thought, it is apparent that basic differences in interpretation of observed phenomena and their significance in the therapeutic process add to the problem of finding areas of agreement on definition. The depth of treatment is indicated by the qualifying terms psychoanalytic, analytic oriented, didactic, directive, non-directive, and intensive, but the lack of consensus on terminology makes the qualification relative and not specific. Different types of groups known as short contact, non-structured, play, and activity groups add verbiage but no consistent meaning. Rather intriguing terms like excitatory group therapy, social club technique, round table, and behind-the-back technique testify to the ingenuity of therapists to add to the array of non-definitive terms.²⁶

The obvious conclusion reached after surveying the literature is that group psychotherapy is not a neatly defined treatment method but is better thought of as methods of group treatment. We found three general categories of group psychotherapy included in the literature: (1) guidance or re-education for support, emotional release, or clarification of attitudes; (2) reorganization of the conscious functions of the personality; (3) reorganization of the

²⁶Walther Joel, "A Glimpse at the Group Psychotherapy Literature," International Journal of Group Psychotherapy, VII (1957), p. 194.

of the unconscious functions of the personality.²⁷ All therapists do not accept each of these categories as constituting group psychotherapy, and again we state that we have not attempted to define or delimit group psychotherapy but have found in our review of literature that the above broad categories are included within the term "group psychotherapy."

Analysis of definitions and descriptions reveals several common denominators which are not dependent upon a specific designation or point-of-view: (1) Group psychotherapy is a psychological process which has as its goal the treatment of the emotional problems of the individual through the multiple interactions of the group members. (2) The level of treatment varies from the attempt to accomplish basic personality change comparable to that obtained through individual analysis to the acceptance of the personality as it is, using supportive techniques to strengthen the individual's assets. Between these two extremes modifying techniques are employed.²⁸ (3) Implicit in all the definitions, and explicitly stated in some, is the clinical setting which differentiates group psychotherapy as a method of treatment

²⁷Nathan Ackerman, MD, The Psychodynamics of Family Life (New York: Basic Books, Inc., 1958), p. 285.

²⁸Nathan Ackerman, MD, "The Training of Caseworkers in Psychotherapy," American Journal of Orthopsychiatry, XIX (1949), p. 15.

from the therapeutic effects of groups in non-clinical settings.²⁹

From our readings we conclude that by some writers group psychotherapy is viewed as a specific treatment method and by others as a broad term including several levels of psychological treatment of the individual's emotional problems through the use of a group within a clinical setting. We believe, therefore, it would be preferable to use the term "group treatment" to avoid the present confusion and ambiguity in the usage of "group psychotherapy."

²⁹Gisela Konopka, "Knowledge and Skills of the Group Therapist," American Journal of Orthopsychiatry, XIX (1949), p. 56.

CHAPTER III

THE USE OF GROUP THERAPY IN CHILD GUIDANCE CLINICS

In recognizing the close psychological relationship between children's emotional problems, their behavior, and their parents' conscious and unconscious conflicts and attitudes, the child guidance movement and related disciplines have increasingly revealed the necessity of dealing with this relationship therapeutically.³⁰ In view of this the following chapter deals specifically with the literature relevant to group therapy with parents of children in child guidance settings.

The method used has been to review books and journal articles over a period of at least twenty years, from 1940 to 1960, in the fields of psychology, psychiatry, and social work as much as their relevancy to group therapy with parents has permitted. The writers recognize that very little has been written on the subject per se and do not claim that their sample of fifteen articles and one book is the majority of the literature, but feel it is representative of the literature published within the stated period of time and in these related fields. Our selection of

³⁰S. R. Slavson, editor, The Fields of Group Psychotherapy (New York: International Universities Press, Inc., 1956), p. 153.

literature was guided mainly by titles in that all of the publications had titles clearly stating that group therapy or group treatment was the method employed. A schedule was used to review the literature systematically. It served as a guide in extracting information about: (1) The setting; (2) The definition of group therapy given; (3) The description of group therapy practiced; (4) The length of time the therapy group was in existence; (5) The aims or purposes of employing this method; (6) On whom it was used; (7) Any selectivity factors; (8) By whom it was used--a psychiatrist, social worker, et cetera; (9) Results; (10) Conclusions--whether conclusions supported aims, any implications, unresolved questions, and trends; (11) Whether the literature described by theoretical or research bases.

Helen Durkin, a leading practitioner of psychotherapy with mothers' groups, notes that the literature on mothers' groups seems to have made its first appearance in about 1939.³¹ The dates of the publications reviewed in this study ranged from 1944 to 1959. The analysis of the literature through the use of the schedule revealed that the sixteen writings represented eleven different settings, including one unstated setting. It was found that four

³¹Ibid., p. 154.

articles represented the setting of the Jewish Board of Guardians' Child Guidance Institute; two represented the Brooklyn Child Guidance Center; two represented the Council Child Development Center of New York; one represented a hospital setting; one setting was unstated, and the remaining six represented various child guidance settings.

Only four of the sixteen writings gave definitions of what they meant by the term "group therapy," and two of the four were writings originating from the same setting which used a consistent definition. However, all of the writings described their use of group therapy, and some used process recordings to illustrate the content of the group dynamics.

Nine of the writings indicated the length of time their groups remained in treatment, and this varied from about four months to two and a half years. However, it would be difficult to determine the length of therapy for any one group since it was reported that original group members would drop for various reasons, and new members would be added to the group.

All of the writings indicated aims or purposes of this group approach were related to the treatment of parent-child problems. The depth of treatment was of course varied, but these were therapy groups as indicated by their titles and not parent education, guidance, or counseling types of groups which could have therapeutic values but not necessarily therapeutic aims. Of the sixteen writings the common thread

of group treatment aims might be said to be the support of the child's treatment through the treatment of one or both parents, helping them to understand and deal with their own emotional problems, the effects upon the child's problems, and parent-child relations. Aims were to modify parental attitudes and increase the adequacy of functioning in parental roles; some therapists attempted to achieve these aims through the modification of personality, while others did not seek basic personality changes.

The study revealed that group therapy was used more with mothers. Out of the sixteen writings, ten reported the use of group therapy with mothers, three with fathers, and three with both parents-presumably seen in one group. The groups for fathers represented publications in the last three years, that is 1956 to 1959.

Only three writings clearly stated by whom group therapy was being done. In each of the three cases a social worker was indicated to be the therapist. The thirteen other writings either implied by authorship that the group therapist was a Ph. D. or just vaguely referred to the "therapist." Some articles did state what they thought the therapist's qualifications should be, and that generally the person should have had some background and experience in individual psychotherapy.

The results of all of the writings were stated in various ways and generally implied that improvement was made

by individuals within the therapy groups. Only one study clearly stated its results in terms of how many out of the total members had been discharged, how many had dropped, and how many improved out of those remaining with the group.

In the area of conclusions fourteen writings indicated that their aims had been supported. Two indicated a type of halfway support of their aims and further elaborated on whom they felt group treatment was or was not successful, and the qualifications of the therapist. The conclusions represented a wide variation of what group therapy had accomplished. Some conclusions contradicted those supported by other writers. In general the conclusions seemed to fall into three broad categories describing what group therapy was able to accomplish, how it affected family relationships, and certain conclusions about group therapy as a treatment method. It is stressed that the content of each category may vary in degrees and does not necessarily represent a consensus of opinion.

It was found that group therapy could accomplish the modification of attitudes, personality, and behavioral patterns. Group therapy relieved staff caseloads enabling the psychological service rendered to treat more patients than with individual therapy. Faster progress in treatment was noted. Group therapy provided opportunities for relationship, emotional release, insight, and emotional re-education. It secured diagnostic understanding, the

breakthrough of resistances, and helped to initiate, supplement, terminate, or substitute for individual treatment. The latter was a contradictory and debatable point.

Conclusions in relation to the family constellation included the recognition that group therapy for both parents was used effectively by social workers in child guidance settings. Group therapy with mothers has an established place in child guidance clinics and among child therapists. The parallel group treatment of children of varied ages including pre-schoolers and their mothers was effective. There was evident and direct relation between the mother's improved attitudes and subsequent facilitation and progress of the child's treatment. The group treatment method enabled parents to become more emotionally involved in family treatment. The group interaction enabled parents to acknowledge and understand their own problems and their relatedness to their children's problems and behavior. Family tensions were reduced, and children were relieved from unhealthy parental patterns bearing upon their problems.

Conclusions about group therapy as a treatment method perhaps represent the more controversial issues. It was found that direct treatment could be carried out effectively in small groups. The therapeutic process for groups was felt to be the same as for individual psychotherapy. Group therapy was also considered to be more effective than individual therapy. It was emphasized that the therapist should

have the same skill and training as one doing individual psychotherapy. Combining groups diminished in number or adding new members proved workable. It was found that a non-selective group could be drawn into and readily accept group therapy. Some contradictory conclusions pertained to the success or lack of success of group therapy on certain types of people. Some writers felt that group therapy could not be universally applied nor substituted for individual treatment of persons suffering from deeply rooted fears and anxiety, while others felt deeply rooted material could be treated. Others reported group therapy was found effective with characterological problems, i.e., those patients suffering from strong feelings of inadequacy and having poor relationships with others, those with personality and behavior difficulties, and those having a basic hunger for peer and social acceptance.

Some unresolved questions presented by the literature reviewed concerned the use of group therapy on psychopathic personalities and the lack of improvement. Further questions on the size of the group, criteria of selection, the use of alternate meetings from which the therapist is absent, occasional individual interviews for group members, need further controlled experimentation for more substantiating answers. It was felt in some cases that withdrawal from treatment was related to inadequate preparation as to the actual need for psychiatric services. In some instances

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cases unsuitable for group therapy could be detected only after a testing period. One important point which would seem applicable to all cases is the impossibility of controlling factors which would contribute to valid comparisons and scientifically based conclusions without detrimental effects on the clinical treatment.

Some implications drawn from the literature indicated that the satisfactory changes in the child can best be consolidated and supported if the parent is enabled to accept change. The group approximates the family, and the therapist, the parent substitute, helps to recreate the family scene. It was implied that group therapy is not essentially different from individual therapy. It was also implied that group therapy with parents can be used by social workers in settings other than child guidance settings. The main trend indicates the expansion of this method to both fathers and mothers in the future.

Out of the sixteen writings all described in various ways the practice of group therapy. One discussed the theory on which its concept of group therapy was based, but this was to a limited extent. Only one article reported a basis of research, but the research was related to a grant concerned mainly about gaining more information on schizophrenia and not group therapy as a treatment method with parents.

In summary the review of literature through the use of a schedule has revealed that these sixteen writings published

between 1944 and 1959 by far represent settings located in New York. It was noted that the Jewish Board of Guardians led in publishing more articles on the subject than did other settings.

Although all of the writings included descriptions of their use of group therapy, the majority did not offer any clear definition of what they meant by the term "group therapy." This would seem to support the fact that there is a lack of conceptual clarity in terminology. Other areas which seem to be representative of controversial issues were on whom and by whom group therapy could be used, the size of the group, factors of selectivity, alternate meetings from which the therapist is absent, and occasional individual interviews for group members. The literature revealed that the substantiation of results was weak, and there was a wide range of conclusions which at times were contradictory. This again seemed to bear out the lack of conceptual clarity of group therapy, poor communication due to inconsistent and vague terminology, a lack of standards and uniformity in practice, and the realistic difficulty of evaluating psychotherapeutic results. This study reveals that there is a need for more controlled experimentation and research on group therapy, the latter being an extremely neglected area.

Agreement was indicated in the area of aims as writers consistently referred to the treatment of parent-child

problems through involving parents in treatment, helping them to understand, deal with their own problems, and increase the adequacy in functioning in their parental roles, thus supplementing and consolidating their child's treatment. The literature implies that the degree of change of attitudes, personality, and behavioral patterns is contingent upon the therapist's own orientation and experience.

The study revealed that although the majority of the therapy groups were for mothers, parents' and father's therapy groups, particularly the latter, represented the more recent publications. This would seem to support the trend which increasingly attempts to involve more fathers in treatment and possibly both parents. The trend seems to be the increased use of group therapy in child guidance clinics for the treatment of parent-child problems, and as related to this the increased recognition of the validity of group therapy's facilitation and extension of clinical staff time and the relieving of waiting list problems.

CHAPTER IV

SUMMARY AND CONCLUSIONS

Trends in the Literature

Some of the rather definite trends revealed in the literature are reviewed again for more clarity:

1. Group therapy is increasingly being used by workers functioning in a variety of settings and concerned with different therapeutic aims.

2. Much group therapy has been used with children; more has been used with mothers than with fathers or with both parents.

3. Increased attempts are being made to include fathers and both parents in treatment. The trend seems to be the increased use of group therapy in child guidance clinics for the treatment of parent-child problems, and, directly related to this, for the extension of clinical staff time and the relieving of waiting list problems.

4. With the increased evidence of emotional disturbances in children, in the family group, and in the adult population, concern continues to mount as to how to provide for more adequate family living. A prevalent trend is the development of a wide variety of programs to help parents learn to function in ways that will prevent emotional

disturbances. Parent education, guidance, and discussion groups are increasing in number.

5. Attempts are being made to use small groups for advancing mental hygiene objectives. The settings vary and may include educational, industrial, community, or religious centers and some governmental agencies.

Findings

The review of literature on group psychotherapy has led to the following findings:

1. Today the use of group therapy involves workers from many different points-of-view, representing a variety of settings, working with a variety of patients, and concerned with different therapeutic problems. A survey of literature makes it more realistic to speak of group therapies than of group therapy.

2. There is a lack of conceptual clarity and standard or uniform terminology which hinders the communication on group therapy. Often the terms "group therapy," "group psychotherapy," "group counselling," et cetera, are used interchangeably and in such a way as to encompass a broad range of approaches. However, others may use carefully delineating terms and view group therapy as being a specific approach within the field of psychotherapy. The majority of writers seemed to refer to group therapy as a treatment method; a few referred to it as a field. From our study we

conclude that the degree of change in attitudes, behavioral patterns, and personality is contingent upon the therapist's own orientation and experience.

3. There is an absence of definitive and objective criteria to substantiate findings. It is realized that evaluation of psychotherapeutic results is difficult, and the paucity of studies that have applied experimental principles of research to group therapy material is recognized.

4. The literature gives much support to the effectiveness of group therapy, particularly individual benefits from small group, but the substantiation of results is weak. There is a definite need for more research on group therapy and group dynamics.

5. The purpose of this study has not been to produce a definition of group therapy as such, but the review of the literature leads us to the broad concept that views group therapy as any level of psychological treatment of the individual's emotional problems through the use of a group within a clinical setting.

There are potentials indicated by this study for the use of group therapy in child guidance settings:

1. The new experience adds another technique to social workers' professional equipment and helps in refining their skills.

2. The major problems of those served in child guidance clinics are of a child-parent relationship nature. Group

therapy is an effective method of treating children's emotional and behavioral problems in relation to their parent's conscious and unconscious conflicts and attitudes.

3. Group therapy with parents not only treats problems of the parents but helps to consolidate the child's treatment through modification of attitudes, personality, and behavioral patterns.

4. Group therapy can help to initiate, supplement, and terminate individual treatment.

5. Group therapy provides opportunities for relationship, emotional release, insight, emotional re-education, and mobilization of those resistive to individual therapy or to participation in their family's treatment.

6. It may provide diagnostic understanding and reveal problem areas unrecognized before.

7. There is evidence that group therapy may relieve staff caseloads and permit therapeutic help to be offered to more patients, thereby shortening both the period of waiting for treatment and the waiting list.

Analysis of the data in Chapter III suggests:

1. The new focus in which the client is seen may lead to new understanding and re-evaluation of planning.

2. There is need for more intensive research on the dynamics of the therapeutic group. The therapeutic process for groups is indicated by many writers to be the same as for individual therapy. However, unresolved areas are the

unpredictability of group action or reaction and the effect on individuals in the group.

3. There is need for more controlled experiments and research in other unresolved areas such as the use of group therapy with particular disorders, e.g., personality disorders and ambulatory psychotics; size of the therapeutic group; criteria for selection; group composition, i.e., homogeneous, heterogeneous, et cetera; combined group and individual therapy; qualifications of the therapist; and justification for the use of group treatment for economic reasons.

4. Child guidance clinics need to be more active in the area of prevention, especially in carrying out more programs emphasizing mental health education for persons who work directly with children.

The implications of this study for the profession of social work lie in both education and practice. The increasing demand for adequately prepared group therapists requires evaluation of the adequacy of the social work curriculum to meet the need. Agencies are likewise faced with the task of providing in-service training for their staffs and field training for social work students. The trend toward increased use of group therapy in social work agencies presents a task and a challenge to the profession of social work.

From our study we conclude that the group therapy method has significance as an approach to relationship problems and to meeting social work's need for more flexible methods in order to deal with growing community demands. We believe our findings support our hypothesis that group therapy facilitates the effective treatment of individual and family malfunctioning and the achievement of child guidance goals.

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