Group Psychotherapy: A Newly Introduced Approach in Alexandria

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Group therapy, although accepted internationally, is still subject to controversy in Egypt on the basis of cultural beliefs and stigma. The main purpose of this group was to investigate the acceptability and effect of this method of treatment among a sample of Egyptian psychiatric patients. A weekly session of one and half hours was held in a private office for a period of 2 and 1/2 years. The subjects of the study were 6 members of both sexes, and the leaders 2 females. Results revealed that resistance to the group method was replaced by trust and acceptance within the first 2 weeks. Confidentiality, self revilement, help support of each other were taking place smoothly. Aggression and sexuality were much inhibited, which reflect the Egyptian culture. Aggression could be manifested at the last 6 months by two members and in particular towards the leaders. A seven - month follow up of group members revealed proper adjustment as manifested by successful work record, better interpersonal relationship, absence or minimal drug therapy, and relapse or psychotic breakdown.

(Egypt.J. Psychiat.,1992,15:23-26).

Introduction

Group techniques can be very valuable in many branches, but according to Simmer (1965) they are of most importance in a psychiatric setting.

As mentioned by Arafa (1981) group therapy in Egypt has started for the first time in Cairo at Abbassiya hospital. It was in the form of casual patients meetings rather than psychotherapy groups.

In 1966, Fakhr El-Islam conducted a University student group for a short period. Rakhawy in 1971 lead a group of couples (non patients). Both groups were in Cairo University (Arafa, 1981). Shaalan in 1972 started inpatients' groups at Cairo University hospital. Since 1974 Rakhawy has started multiple regular outpatient group therapies. This has been parallel with an open didactic group sessions both in Kasr El - Aini Faculty of Medicine and Dar El - Mokattum for Mental Health. Both groups were immediately followed by post - group discussion and were supervised through weekly seminars among the therapist and trainees held in both institutes. The movement by now 1992 includes 5 groups in Kasr El - Aini and 6 groups in Dar El - Mokattam inpatient and outpatient practice (Rakhawy, 1992).

In Alexandria (1981) two training groups were conducted by the senior author for the neuropsychiatric residents and post-graduate students at Alexandria University and Maamoura hospital. They were mainly self-awareness and sensitivity groups.

The present work is the first group therapy for patients, in private practice in Alexandria.

Subjects and Method

Six members were the subjects of the group, 3 males and 3 females. A fe-

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male psychiatrist and a female psychiatric nurse were the leader and co-leader of the group, respectively.

Patient's diagnoses were: one female: manic depressive (in remission), 3 patients with personality disorders; a female borderline personality, a male anxious personality and a female obsessive-compulsive personality; one male with social phobia, and the sixth member, a male heroin-dependent.

Their age ranged between 21-44 years with a mean of 29.5 years. All members were under individual psychotherapy by the leader-Psychiatrist for variable period of few months to few years, they were prepared for the group for about 2-3 months and they met the co-leader for the first time on the first group session.

The group was held in a private clinic on weekly basis for one and half hours. Group contract was for 6 months which started January 1986 and was renewed every six months for 2 and half year period. The group process was recorded after each session by both leaders. Emotion-expressive and insight orientation were the main techniques used, with occasional Gestalt techniques. The members were followed up for 7 months after cessation of the group.

Results and Discussion

The first session started smoothly by the group members introducing themselves. This was followed by questioning the usefulness of the group. Two major issues were brought up, the first was how patients can help each other, the second was how each member can tolerate the problems of the others.

Confidentiality, trust and being open were discussed.

The prevailing behavior was "keeping back". Rejection of the co-leader (who was not known to all members) was apparent. This was resolved gradually in the following meetings.

The following two sessions involved mainly testing behavior which commonly occurred in groups as reported by Tuckman (1965). Approach-avoidance conflict was a major behavioral dilemma; this is in accord with concepts of Garland et al., (1965), and Tuckman (1965). Members tended to be overly nice to one another, what was termed by Levied (1979) as "company manners"

Self-disclosure appeared in the form of talking about troubles in a broad sense. Labelling themselves as inadequate or dependent were used to test the reaction and acceptance of the group. This leads to early development of trust and empathy among members.

Resistance was manifested by 2 behaviors: coming late for 2-20 minutes, or silence during sessions (by two members only).

Starting as early as the 4 th group meeting, signs of cohesion appeared by members revealing personal embarrassing experiences. Three members talked about their attempted suicide. Two members shared in detail their disturbed home atmosphere and lack of parental care, while another one discussed her marital disharmony which lead to divorce. According to Yalom (1985) revealing embarrassing topics and taking risks and benefit from it was very helpful to group members.

Belonging and acceptance by the group as well as self disclosure continued to occur and produced close contact.

Group cohesion progressed, and members provided support, encouragement, understanding and help to each other. Silent members were encouraged to participate by the more active ones.

Good empathic listening was a dominant group behavior.

Pairing started as early as the 2nd session and was alternating between members as the group progressed. Bien (1961) postulated pairing in the development of the group.

Information seeking was an important theme in the early sessions. Ques-

tioning the differences between spontaneity and impulsively; being open or lacking tact were discussed.

Neimeyer and Merluzzi (1982) termed "systemic information exchange" which permits self-disclosure and more psychological constructions of one another.

From the 4th session, aggression towards the mother was transferred to the 3 female mothers in the group (2 leaders and eldest lady member), while aggression towards the father was displaced on the group leader (taken as the authority figure). Sibling rivalry appeared during the group meetings. One of the therapeutic factors mentioned by Yalom (1985) is the family reenactment. This also goes with Freudian's transference, and Sullivan's parataxic distortions.

Sexual issues appeared around the 3rd month of the group (12th session) as firm establishment of trust took place. It was brought up by a female who discussed her frigidity that lead to divorce, and her difficulty in dealing with the opposite sex. She mentioned how uncomfortable she was at the beginning of the group due to the presence of men. Two male members were very supportive, understanding and clarified to her that the responsibility may be partly due to lack of tact from her husband. A male patient discussed his masturbation and anxiety about impotence. Egyptian culture does not permit discussion of sexual matters.

With the progress of the group, deep personal conflicts were brought up and worked through gradually.

Strong aggression was expressed by 2 members around the last few months of the group particularly towards the leader which was sometimes blocking the group process; this showed how difficult separation was.

During the group period (2 1/5 years), a lady member had 2 hypomanic attacks precipitated by family stresses. Support of the group helped her overcome it within a short period and with minimal use of major tranquilizers. In fact she was absent for only one session during the first attack.

Attendance of members during the first 6 months was 94. 5%. The social phobia patient (a male) refused to come for the 2nd contract of 6 months, and hence a new member joined the group. He was a manic depressive and of the same age. After a year and a half, the borderline personality disorder refused to come, inspire of her success in finishing her University study, and the cessation of suicidal attempts. She was replaced by patient a male obsessive - compulsive neurosis. The renewal of members did not derange the group process.

During the group, a female member finished her Ph D, and a male succeeded in his university study after previous failures.

The 7 - month follow up showed that members were well adjusted, and regular at work. More understanding about human nature improved their interpersonal relationships and allowed them withstand frustration and stress. Family conflicts were somewhat managed in a better way. No breakdown or need for psychiatric consultations took place during this period.

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La Thérapie de Groupe: Une Nouvelle Approche Introduite à Alexandrie

La thérapie de groupe, reste une pratique controversée en Egypte en raison de l'influence socio-culturelle. Le goupe en question tentait d'évaluer l'acceptabilité et l'effet de cette modalité de traitement chez un groupe de patients psychiatriques Egyptiens. Il était mené par deux thérapeutes femmes, au rythme d'une scéance hébdomadaire pour une durée de deux ans et demi. Les résultats ont montré que la résistance initiale au groupe a été surmontée au bout de deux semaines pour faire place à un climat d'échange et de confiance.

Le pronostic au bout d'un suivi de 6 mois après le groupe est aussi présenté.

العلاج الجمعى: إتجاه علاجى جديد فى الإسكندرية

رغم أن العلاج الجمعى يلقى قبولاً واسعاً إلا أنه مازال أقل رواجاً فى مصر بسبب بعض المعتقدات البيئيه عن المرض النفسى، وتهدف هذه الدراسة إلى بحث درجه تأثير هذ النوع من العلاج على المرضى النفسيين وقبولهم له، ففى خلال العامين الماضين تكونت مجموعه علاج جمعى من سته مرضى من الجنسين وتشير النتائج إلى أن المقاومه للأسلوب الجماعى قد تحول إلى قبول وثقه فى خلال الأسبوعين الأولين، وقد بدت مظاهر الحفاظ على السريه والثقة والمساندة للأخرين كما ظهرت دلائل عدوانيه وخصوصاً تجاه قائده المجموعه. قد أظهرت المتابعه بعد سته أشهر تأقلم المشتركين فى شكل نجاح فى العمل والعلاقات الشخصيه وعدم استخدام العلاج بالعقاقير.