

# Toward a Theory of Integrative Group Therapy

Morteza Alibakhshi Kenari \*

Martyr Beheshti University of Medical Sciences and Health Services, Tehran, Iran

Received: 23 Apr. 2014, Revised: 25 May 2014, Accepted: 27 May 2014

Published online: 1 Jan. 2015

**Abstract:** This article examines a theory of existential/humanistic group therapy to determine if it meets the criteria of a theory of integrative psychotherapy. The basic constituents of this existential/humanistic theory are described and then compared with the components or common factors of a theory of integrative psychotherapy. It is determined that the basic elements of this theory of group therapy meet the requirements to be defined as an integrative theory of psychotherapy.

**Keywords:** group therapy, integrative psychotherapy, existential/humanistic therapy.

## 1 Introduction

Group therapy is a frequently used treatment by different health care professionals including psychiatrists, psychologists, counselors, marriage and family therapists and social workers. Group therapy has been identified as an effective treatment with drug and alcohol abusers (Page, 1983; Page & Berkow, 2005), inmates in prisons (Page, 1979), high-risk students in public schools (Page & Chandler, 1994), people with physical disabilities (Page, 1978; Page, 2010), individuals with psychiatric problems (Page, 1978; Page, 2010; Yalom, 1995), as well as persons with other problems (Page, Weiss & Lietaer, 2002; Yalom, 1995). Therapy groups have been conducted in many countries including the United States (Page & Berkow, 1994), Ireland (Page & OLeary, 1992), the United Kingdom (Foulkes, 1975), Germany (Page, Weiss & Lietaer, 2002), Portugal (Oliveira, Milliner & Page, 2004; Page, 2010) as well as others. Group therapy is a significant treatment option for helping individuals cope more effectively with a variety of personal and interpersonal relationship issues. Health care professionals from many theoretical perspectives have conducted therapy groups. Psychoanalytic therapy was one of the first group therapies to be practiced, even though Freud did not accept the effectiveness of conducting psychoanalysis in groups (Page & Berkow, 1994). Among the first psychoanalysts who advocated psychoanalytic group therapy as an effective treatment were Bion (1959), Foulkes (1948), Slavson (1951) and Wolf and Schwartz (1962). Other prominent theories

advocating the use of group therapy include rational emotive therapy (Ellis, 1982), cognitive behavioral therapy (Rose, 1982), multimodal behavioral therapy (Lazarus, 1982), person-centered therapy (Rogers, 1970; Wood, 1982), existentialism (Page & Berkow, 1994; Yalom, 1995), gestalt therapy (Polster & Polster, 1973), psychodrama (Moreno, 1964) among other approaches. Many leading therapists advocating the use of specific theoretical approaches to conducting therapy groups believe their approach is superior to other approaches (Hawkins & Nestoros, 1997). There is a tendency in the helping professions for individuals who promote specific theories of therapy to claim their method is the most effective way to treat specific disorders or problems or sometimes all types of problems or disorders (Wampold, 2001). The effectiveness of therapy is likely more complex than determining a single theoretical approach is superior to other approaches and may depend on additional factors such as the nature of the client problem, the personality of the therapist or client, the quality of the therapeutic alliance or relationship, the socioeconomic or cultural background of the client, the motivation of the client, whether or not therapy is voluntary, and many other factors. A meta-analysis of psychotherapy research frequently cited in the professional literature supports the idea that the theoretical position of the therapist is of limited importance in determining the effectiveness of therapeutic outcomes (Bozarth & Motomasa, 2005; Lambert, 1992; Lambert & Barley, 2001; Wampold, 2001). This meta-analysis revealed the following variables and the percentage of variance associated with

\* Corresponding author e-mail: [morteza.alibakhshikenari@gmail.com](mailto:morteza.alibakhshikenari@gmail.com)

successful therapeutic outcomes for these variables: Extra therapeutic change, 40 %; Common factors, 30%; Expectancy, 15% and Techniques, 15% (Bozarth & Motoomasa, 2005; Wampold, 2001). Extra therapeutic Change included variables related to the client or environment and Common Factors included variables that are part of any therapy, regardless of the theory, such as a warm and empathic therapeutic relationship. Expectancy was associated with a placebo effect and Techniques were linked with approaches advocated by specific theories. According to the results of this meta-analysis, the effects of approaches advocated by specific theories of psychotherapy were the same as the effects of a placebo in terms of affecting positive therapeutic outcomes. Therefore it may be more productive to define the common integrative factors that foster effective, therapy, regardless of the theoretical approach of the therapist, rather than continually searching for a theory that is more effective than all others. Additionally, a discussion could be valuable concerning what takes place in a specific therapeutic relationship, whereby a convergence of factors that are unique to a particular relationship and process increase the momentum for constructive change. Page and Berkow (2005), in the book *Unstructured Group Therapy: Creating Contact, Choosing Relationship*, provide an integrative theory to dealing with the dynamics of, therapy groups. This analysis of the dynamics of therapy groups is based in part on the theory of Paul Tillich (1954) as described in the book *Love, Power and Justice*. Tillich has been described by Honderich (1995), in the *Oxford Companion to Philosophy*, as one of the most influential existentialist philosophers of the twentieth century. A minimal understanding of the ways that Tillich described the effects of the gestalt of love, power and justice on human relationships is requisite for understanding how this gestalt can provide an integrative theory for analyzing the dynamics of therapy groups conducted from different theoretical viewpoints.

## 2 Tillich's Views of Love, Power and Justice

Tillich never wrote about therapy, yet his ideas about love, power and justice have been used to describe the dynamics of therapy groups (Page & Berkow, 1994, 2005). The writings of Tillich are complex; he states that his ideas about ontology can be used to analyze the nature of any human relationship. Tillich (1954) defines ontology as the rational work that grasps being as such or being insofar-as-it-is-being (Tillich, 1954, p. 18). Tillich considers love, power and justice to be universal elements that emerge when an ontological analysis is made or when an examination of what it means to be is undertaken. According to Tillich, the elements of love, power and justice have what he calls ontological dignity. By this he means that the concepts of love, power and justice offer themes that can be used to analyze any human discipline including history, art, philosophy, religion, literature and

others. According to Tillich (1954), love, power and justice are aspects of the process of being that operate in the between or in the here and now of relationships. The dynamic of love, power and justice provides a matrix or context for human interactions as these interactions occur in the now. This dynamic forms an underlying dimension to reality that is intuitively experienced by individuals as they engage in their normal, day-to-day relationships. Its operation, according to Tillich, affects or mediates a persons relationship with self, nature= and other people. A full explanation of Tillich's views on the operation of love, power and justice is presented in Tillich's (1954) book, *Love, Power and Justice*. Love, power and justice operate in the now of human relationships in ways that are balanced or unbalanced, healthy or unhealthy. The harmony of self with others is blocked when power functions without care for the being of others, or when power operates separately from love and justice. Abusive interpersonal relationships can occur when this imbalance arises. Love that operates separately from power and justice can distort relationships by not acknowledging differences or boundaries that exist between people. Enmeshed interpersonal relationships may result. Justice that is rigid or unfair does not recognize others needs for empowerment (power) and love. This may result in rule-oriented, judgmental, or rigid ways of interacting that stifle personal growth. Conversely, personally enhancing interpersonal interactions, can take place when an integrated or balanced gestalt of love, power and justice is experienced as these interactions unfold. This occurs when love, power and justice are all emphasized equally and in a synergistic way in a relationship that is experienced in the now by one or more individuals. Tillich (1954) wrote that all relationships are unbalanced at least to some degree as the gestalt of love, power and justice affects human interactions. Relationships can stay highly unbalanced for long periods of time as can be witnessed when nations assert unjust power over their citizens, or other nations, or when families treat children in abusive ways. Relationships vary greatly concerning whether the gestalt of love, power and justice is balanced or unbalanced. While Tillich applied the concepts of love, power and justice in a manner that has wide applicability, the purpose of this article is to relate the operation of love, power and justice to the dynamics of a theory of integrated group therapy.

## 3 Love, Power and Justice in Group Therapy

The gestalt of love, power and justice affects the dynamics of therapy groups as the members and leader interact in the group setting. These dynamics are affected by this gestalt in both structured and unstructured therapy groups. Page and Berkow (2005) defined a structured therapy group as a group that teaches members skills and in which the leader takes an active teaching role in the group. An unstructured therapy group is defined as an

organized human activity where members share common resources for growth without having a preconceived structure imposed on the group either by the leader or by other members. Unstructured therapy groups are affected by two process goals that include the disclosure of individual concerns and personal problems and the emergence of personally meaningful interpersonal learning (Page & Berkow, 2005). Examples of structured therapy groups are assertiveness training and RET groups and examples of unstructured therapy groups are existential (Page and Berkow, 2005; Yalom, 1995) and psychoanalytic groups (Foulkes, 1948; Wolf and Schwartz, 1962). Both structured and unstructured therapy groups can help clients gain personal insights and learn about the ways they relate interpersonally. The degree of balance or imbalance that exists during member and leader interactions affects the therapeutic dynamics of both structured and unstructured groups. For example, members generally become alienated from a group if they sense other members or the facilitator are being unfair to them (justice), don't care about them or lack empathy for their situation (love) or are asserting abusive power over them or disrespecting their efforts to self-actualize or assert themselves in the group (power). Conversely, a balanced gestalt of love, power and justice is experienced by the participants in the group when members feel the other participants and facilitator care about them, listen and respond to their concerns and respect their efforts to assert themselves and self-actualize. The dynamic process of a group involves unbalancing, then rebalancing love, power, and justice. Because life is a dynamic, non-linear process, there is no assumption that a, static, final configuration of love, power, and justice is desirable. For example, if one group member asserts power by offering feedback that another member perceives as confrontational or inappropriate, there will temporarily be an imbalance. One member is likely to perceive another as not caring, not understanding, or perhaps as overly aggressive. The challenge to group members at such a point is to use active listening and feedback (justice), assertive expression from different points of view (power), and understanding and empathy toward each participant (love), in a, fluid and unpremeditated manner. As members feel heard, included, and feel themselves responded to in a caring and perceptive manner, the harmony of the group re-establishes. By going through recurring processes of imbalance and re-balancing, group members learn about themselves and each other in the process of relating. They learn to trust their own intuitive process of contacting self and others, as well as the groups process to establish balance in creative ways. Clients in a structured therapy group who are taught interventions or learn material may unconsciously or consciously resist what is being taught to them if they don't feel at ease with the therapist or other members. If the interactions members have with a facilitator in a structured group are imbalanced, the members will generally be less likely to accept what is being taught in

the group. It is evident that the underlying gestalt of love, power and justice that influences the level of trust the members have in a group affects both structured and unstructured therapy groups and how participants respond to goals of these groups. It is also evident that the dynamic can shift in ways that enhance the development of trust in self and others to care and to be fair, or discourage such development. The personal problems clients discuss in therapy groups and how participants interact are influenced by unresolved issues they have concerning the ways past dynamics of love, power and justice have affected them in important relationships. For instance, if clients have experienced abusive family relationships, have not experienced loving relationships, or have been treated unjustly in significant relationships, these past experiences typically affect their perceptions of current relationships both in and out of therapy. If members can experience a more balanced dynamic of love, power and justice during their interpersonal exchanges in a therapy group, they can learn new ways of relating that can affect their relationships in the group and by extension in the outside world (see Page & Berkow, 2005). The members will generally develop increased trust in the group as interactions become more balanced and will therefore be more likely to discuss their personal problems. The unresolved personal issues of therapists that have been influenced, by past imbalances of love, power and justice can impact their self-awareness and interpersonal relationships. Such unfinished business can also impact whether they develop balanced or imbalanced relationships with clients. For example, therapists can sometimes unknowingly be abusive, uncaring or lack empathy, or be rigid and rule oriented in the relationships they have with clients. These kinds of therapist behaviors do not contribute to the development of a therapeutic group atmosphere. On the other hand, therapists who are aware of their own unresolved problems or issues and who engage in balanced interactions with group members and facilitate these kinds of interactions among participants help to create a therapeutic group atmosphere. One way the facilitators of therapy groups can assess if a group is therapeutic or not is by intuiting whether the dynamics of a group are characterized by balanced or unbalanced love, power and justice. To do this a leader needs to empathize with the members experiences of love, power and justice during ongoing group interactions. It is important for a facilitator to assess his or her impact on how the dynamics of love, power and justice affect group interactions. While a group leader may model ways to communicate that are fair, open, and caring, a group leader can also enhance a balanced dynamic by trusting the group process. Thus, the therapist doesn't need to have all the answers, and hopefully can trust the members to deal with most of the conflicts or challenges that arise in the group. Therefore, the dynamic of love, power, and justice grows through a collaborative process that includes the contributions of both the participants and leader. If the participants are

uncomfortable with how this dynamic affects their group, it is doubtful they will develop trust in the group process. Unless the participants develop trust for their group, they are not likely to discuss their problems or explore how their personal relationship issues affect their lives either inside or beyond the group.

#### 4 An Integrative Theory of Group Therapy

An analysis of the ways love, power and justice affect the interactions of the participants and leaders of therapy groups conducted from different theoretical perspectives can provide a rationale for a theory of integrative group therapy. According to Hawkins and Nestoros (1997), a theory of integrative psychotherapy emphasizes common factors that affect the process of therapy conducted from diverse theoretical orientations. Grencavage and Norcross (1990) have identified these common factors of psychotherapy as Client Characteristics, Therapist Qualities, Change Processes, Treatment Structures and Relationship Elements. The gestalt of love, power and justice may satisfactorily account for the operation of these common factors of a theory of integrated group therapy, as outlined below. For instance, the common factors identified as Change Processes, Treatment Structures and Relationship Elements of psychotherapy are each influenced by the interaction of love, power and justice. It has already been suggested how this interaction affects the relationships between the therapist and members, and the relationships of the members with one another (Relationship Elements) and whether or not the process goals (or Change Processes) are fulfilled. The interaction of love, power and justice is a part of the structure of the therapeutic process (Treatment Structures), because developing more balanced relationships happens in a healing group as the members relate to the therapist and other participants. Grencavage and Norcross (1990) also identified Client Characteristics and Therapist Qualities as being common factors of a theory of integrated group therapy. The kinds of relationships that clients develop (Client Characteristics) in therapy are influenced by the imbalanced interaction of love, power and justice and as clients grow in therapy, their relationships become more balanced. To reiterate, the quality and effectiveness of the interactions of a therapist (Therapist Qualities) can also be defined in terms of balanced love, power and justice. The changing dynamics of love, power and justice can be used to describe the common factors of different theoretical models of group therapy, including structured and unstructured groups, and for this reason provide a theory of integrated group therapy.

#### 5 Conclusion

Tillich portrayed love, power and justice as a dynamic gestalt that, affects the ways people relate to each other in any culture. He postulated the themes symbolized by the interaction of love, power and justice in human affairs can be used to analyze any human discipline. Tillich's ideas have applicability to therapy groups and can provide a model for defining whether the dynamics of any therapy group are helpful or hurtful. If leaders can intuit when therapy groups have interactions characterized by balanced love, power and justice and when they don't, these facilitators can determine if their groups are therapeutic or not. Love, power, and justice are abstract constructs used to discuss qualities that occur in specific situations in unique ways. One must understand how a person hears and experiences communications to see whether or not a balanced interaction is taking place. Because the concepts of love, power and justice are abstract and difficult to define in a precise manner, it makes doing quantitative research on their effects challenging to say the least. Qualitative research rather than quantitative research is generally the preferred approach for assessing the effects of common factors such as love, power and justice on different kinds of therapy groups. Although conducting any kind of research on common elements such as love, power and justice is difficult to implement, the influence of these elements on the process goals of therapy groups is important to recognize. The kinds of relationships that are established in therapy groups among the facilitators and members affect the responses of members to these groups and whether or not the process goals are realized. The facilitators of therapy groups have a responsibility to the participants to conduct their groups in ways that are supportive of interactions characterized by balanced love, power and justice. Hawkins and Nestoros (1997) have aptly stated that more attention should be placed on assessing the common factors of therapy that produce therapeutic change rather than constantly searching for a theory that is correct for all situations and clients. It is important to develop theories that account for the operation of the common factors of helpful therapeutic change. Such theories represent a first step in defining the common factors that explain curative change in therapy groups regardless of the theory of the facilitator. The interaction of love, power and justice as described in this paper affects the dynamics and change processes of any therapy group and thus provides a theory of integrative group therapy.

#### References

- [1] Bion, W. R. (1959). *Experiences in Groups*. New York: Ballantine Books.
- [2] Bozarth, J. D. & Motomasa, N. (2005). *Searching for the core: The interface of client-centered principles with other*

- therapies. In S. Joseph & R. Worsley (Eds.) 293-309). Ross-On-Wye, United Kingdom: PCCS Books.
- [3] Ellis, A. (1982). Rational-emotive group therapy. In G. M. Gazda (Ed.) Counseling. (3rd Ed) (pp. 381- 412).
- [4] Springfield, IL: Charles C. Thomas. Foulkes, S. H. (1975). Paris, France: Interefare Books.
- [5] Foulkes, S. H. (1948). London: W. Heinemann. Grencavage, L. M. & Norcross, J. C. (1990). Where are the commonalities among the therapeutic common factors? Professional Psychology: Research and Practice, 21, 372- 378.
- [6] Honderich, T. (1995). Existentialism. Oxford Companion to Philosophy., (pp. 257-261) New
- [7] York: Oxford University Press. Hawkins, P. J. & Nestoros, J. N. (1997). Beyond the dogmas of conventional psychotherapy: The integration movement. In Hawkins, P. J. & Nestoros, J. N. (pp. 23-96), Athens, Greece: EllinikaGrammata Publishers.
- [8] Lambert, M. J. (1992). Psychotherapy outcome research. Implications for Integrative and Eclectic Therapists. In Norcross, J. C. & Goldfried, M. R. (Eds.).
- [9] Lambert, M. J. & Barley, D. E. (2001). Research summary on the therapeutic relationship and psychotherapy outcome. In J. C. Norcross (Ed.). Empirically Supported Therapy Relationships: Summary of the Division 29 Task Force (Special Issue). 336-357.
- [10] Lazarus, A. A. (1982). Multimodal group therapy. In G. M. Gazda (Ed.) (3rd Ed) (pp. 213-234).
- [11] Springfield, IL: Charles C. Thomas. Moreno, J. L. (1964). Psychodrama: Volume 1. (3rd Ed.) New York: Beacon House.
- [12] Oliveira, R. A., Milliner, E. K., & Page, R. C. (2004). Psychotherapy with physically disabled patients. American Journal of Psychotherapy, 58, 1-12.
- [13] Page, R. C. (1978). The social learning process of severely disabled group counseling participants. Psychosocial Rehabilitation Journal, 2 28-36. Page, R. C. (1979). Developmental stages of unstructured counseling groups with prisoners. Small Group Behavior, 10, 271-279.
- [14] Page, R. C. (1983). Marathon group counseling with illicit drug abusers: A study of the effects of two groups for one month. The Journal for Specialists in Group Work, 8, 114-125.
- [15] Page, R. C. (1994). Effects of group counseling on ninth grade at risk students. Journal of Mental Health Counseling, 16, 340-351.
- [16] Page, R. C. (2010). Group therapy with the disabled. In Oliveria, R. (Eds), Psychotherapy with the Disabled. (pp. 135-148).
- [17] Lisbon, Portugal: Manuel Barbosa & Filhos. Page, R. C. Berkow, D. N. (1994). Creating Contact, Choosing Relationship: Dynamics of Unstructured Group Therapy. San Francisco, CA: Jossey Bass Publishers.
- [18] Page, R. C. & Berkow, D. N. (2005). Unstructured Group Therapy: Creating Contact, Choosing Relationship. Ross-On Wye, United Kingdom: PCCS Books.
- [19] Page, R. C. & OLeary, E. (1992). A pilot study on the effects of a training group on Irish counseling students. Journal of Multicultural Counseling and Development, 20, 23-34.
- [20] Page, R. C., Weiss, J. F., & Lietaer, G. (2002). Humanistic group psychotherapy. In David J. Cain (Ed.). Humanistic Psychotherapies: Handbook of Research and Practice. (pp. 339- 368).
- [21] Washington, DC: APA Press. Polster, E. & Polster, M. (1973). Gestalt Therapy Integrated. New York: Vintage Books.
- [22] Rogers, C. R. (1970). On Encounter Groups. New York: Harper and Row. Rose, S. D. (1982). Group counseling with children: A behavioral and cognitive approach. In G. M. Gazda (Ed.) Basic Approaches to Group Psychotherapy and Group Counseling (3rd Ed) (pp. 466- 506). Springfield, IL: Charles C.
- [23] Thomas. Slavson, S. R. (1951). The dynamics of analytic group psychotherapy. International Journal of Group Psychotherapy, 7, 131-154.
- [24] Tillich, P. (1954). Love, Power and Justice. New York: Oxford University Press.
- [25] Yalom, I. D. (1995). The Theory and Practice of Group Psychotherapy. (4th Edition). New York: Basic Books.
- [26] Wampold, B.E. (2001). The great psychotherapy debate: Models, methods and findings.
- [27] Mahawah, N. J.: Lawrence Erlbaum. Wolf, A. & Schwartz, E. K. (1962). Psychoanalysis in Groups. New
- [28] York: Grune and Stratton. Wood, J. K. (1982). Person-centered group therapy. In G. M. Gazda (Ed.) Basic Approaches to Group Psychotherapy and Group Counseling (3rd Ed) (pp. 235- 275).



#### **M. Alibakhshi-kenari**

was born in February 1989 at Iran, Mazandaran, Babolsar. He received the B.S. degrees from the Sari University of Medical Sciences and Health Services at Iran, in February 2011, and he is now a graduate student at the martyr Beheshti University of Medical Sciences and Health

Services, Tehran, Iran. He is currently working in the field of Evidence Base Nursing.