

## HOW TO SQUARE A CIRCLE?

Sandra Kocijan Lovko, Sandra Caratan, Ana Ivrlač, Lada Gorišić,  
Ivona Šimunović Filipčić & Igor Filipčić

Psychiatry Clinic Sveti Ivan, Zagreb, Croatia

### SUMMARY

*Psychodynamic group psychotherapy in Daily Hospital for non-psychotic disorders was held through Hangouts program during CoViD-19 pandemic lockdown. In our pilot study we compared patients' impressions and their satisfaction with online program vs. usual, in-person setting program. We analyzed the impressions of group therapists as well. Our conclusion is that according to our patients' impressions and satisfaction, online psychodynamic group psychotherapy is good enough option in extreme situations such as infectious disease pandemic, although it cannot completely replace all the aspects of usual "live" setting.*

**Key words:** online group therapy - group setting - CoViD-19 pandemic - daily hospital

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### INTRODUCTION

As a result of CoViD-19 pandemic, peoples' lives drastically changed in multiple aspects, including individual and societal (Van Rheenen et al. 2020, Holmes et al. 2020). Due to recommended societal measures including social distancing and self-isolation, availability of standard ways of medical care have also been restricted or altered. The above mentioned reflected on everybody in some proportion, especially on patients with mental health problems. According to several studies, people with psychiatric illnesses showed more symptoms of anxiety, stress (Mazza et al. 2020, Ozamiz- Etxebarria et al. 2020, Ozdin & Ozdin 2020), depression and PTSD (Xiong et al. 2020). Patients in our Daily hospital for non-psychotic disorders (DH) suffer from disorders in anxiety spectrum and mood disorders as well as PTSD.

For that reason, our team in DH had switched to online program as soon as we were back to work after 2 weeks of self-isolation, in which our patients lacked any form of group psychotherapy.

The aim of our study was to obtain and present patients' impressions and their satisfaction with online program vs. usual, in-person setting as well as impressions of group therapists.

### SUBJECTS AND METHODS

Participants (n=28) were DH patients who engaged at least a month earlier in usual, in-person setting psychodynamic group psychotherapy so that they could compare the impressions of both settings. Online psychodynamic group psychotherapy was held 3 times a week for one month.

Participants were given instructions by e-mail on how to start and use the online Hangouts platform as well as instructions related to privacy maintaining setting.

They all completed the anonymous online questionnaire designed exclusively for our study.

Therapists were not given any questionnaires but wrote down their objections and impressions.

After having explained our study to all participants, they signed informed consent.

The study complied with the World Medical Association Declaration of Helsinki and was approved by Psychiatric Hospital Sveti Ivan Ethics Committee.

Answers were analyzed using descriptive statistics.

### RESULTS

There were 19 females (67.9 percent) and 9 males (32.1%). 20 of them (71.4%) were between 41-60 years old, 6 of them between 18-40 years old (21.4%), and the last 6 (7.1%) between 61-80 years old.

Quantitative results of the study are summarized in the Figure 1-4.

In the question what had changed if the confidentiality changed, there were three important answers: sense of distance, lack of feedback and approval caused by technical reasons, and the presence of other people in the background of the conversation.

In perception of group therapists there are no substantial changes, therapists are perceived very positively.

Concerning the period when they lacked any form of group psychotherapy, they report a sense of uncertainty and abandonment.

### DISCUSSION AND CONCLUSION

To our knowledge, studies comparing online psychodynamic group psychotherapy and in-person psychodynamic group psychotherapy in DH during CoViD-19 pandemic have not been so far reported. Exception is a study done in Netherlands for older patients with chronic affective disorders and personality problems which focused on schema, behavioural and art therapy (Van Dijk et al. 2020). They too observed patients' needs for informal contact.

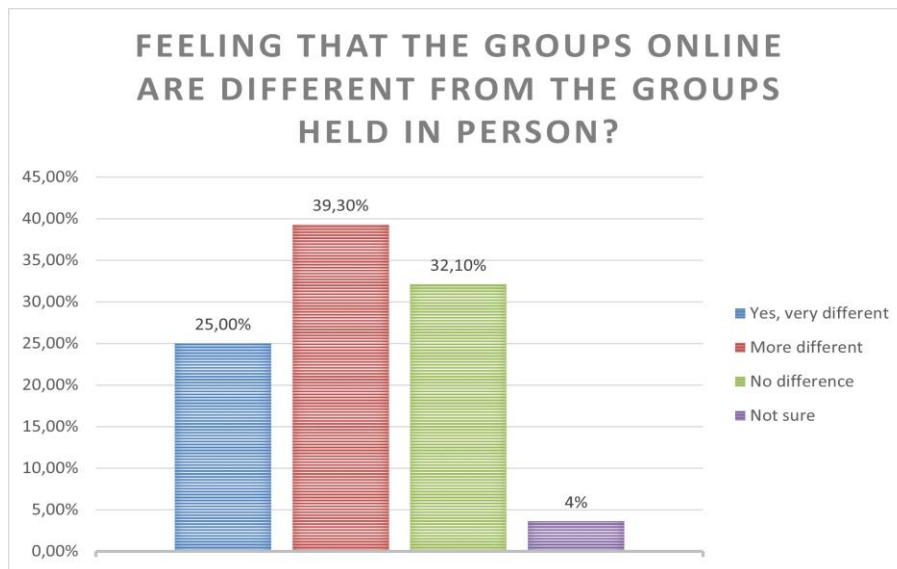


Figure 1. Difference of the groups online and in person

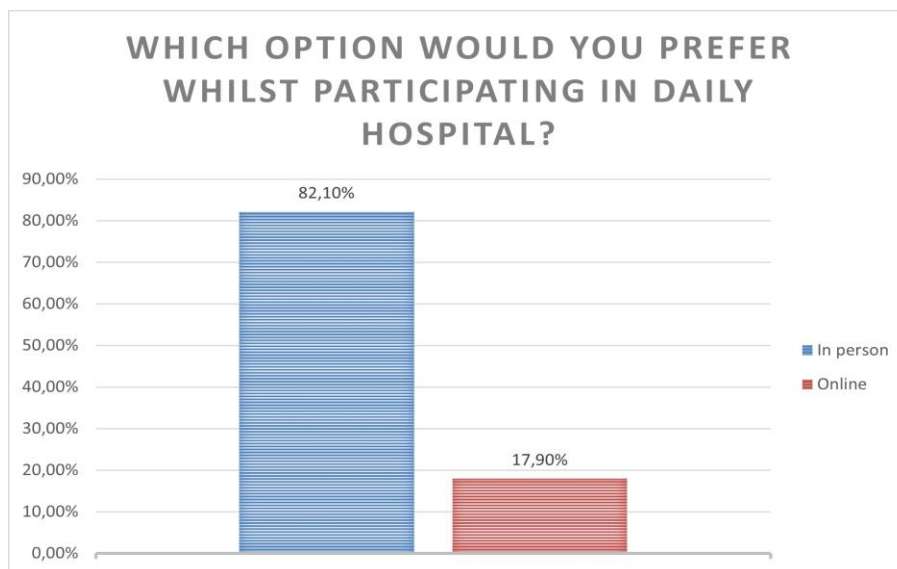


Figure 2. Type of preferred group format

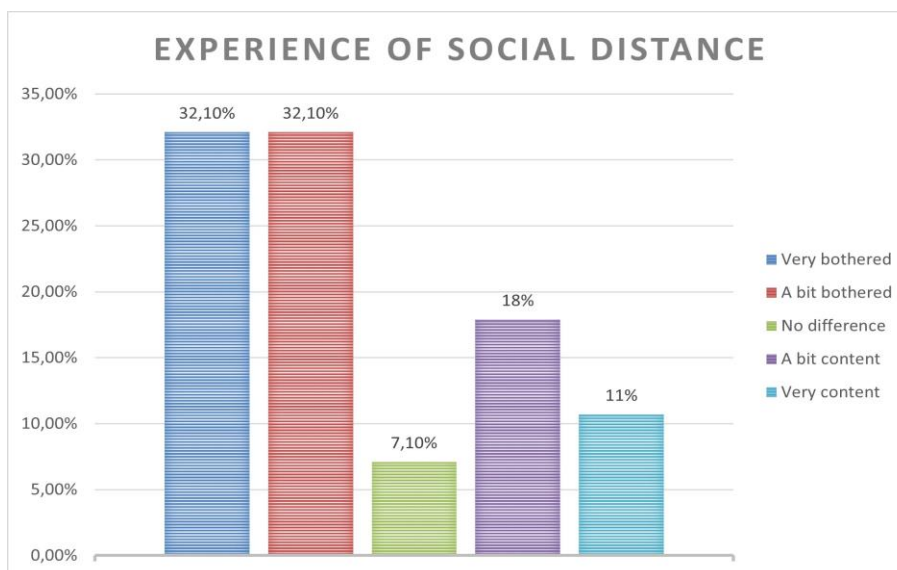
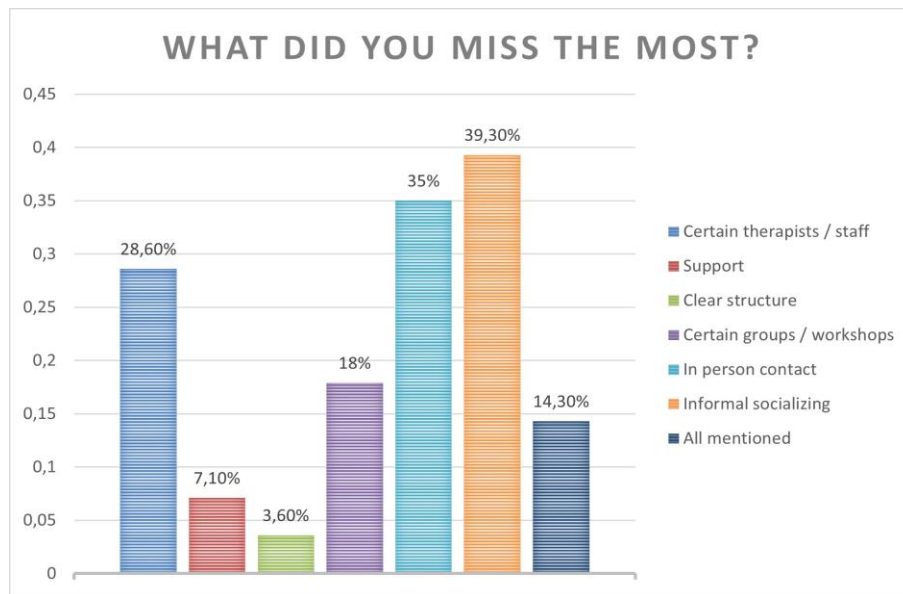


Figure 3. Experience of social distance



**Figure 4.** Perception of what they missed most in online groups

On the other side, there are studies published before CoViD -19 pandemic comparing online group therapy with in- person treatment (CBT and group therapy for education) and found that video-based groups have resulted in similar treatment outcomes as in-person groups (Barnbury et al. 2018, Gentry et al. 2019, Khatri et al. 2014).

Weinberg's review (Weinberg 2020) focused on online setting and underlined some of the challenges that we had also found in our study: the absence of body- to- body interaction and presence which leads to sense of distance. They also reported an easily achieved therapeutic alliance which can be seen in answer that therapists are perceived very positively. Weinberg too focused on transparent background, e.g. when someone passed behind one of the group members or a cat/dog suddenly appeared on screen, and he suggested that the therapists do not ignore these events. This is exactly what we found in our study to be a possible obstacle in the confidentiality for the group members and also a new circumstance for the therapists that needs to be discussed and interpreted.

There is one study also done during CoViD-19 pandemic which examined psychotherapists' attitudes toward online psychotherapy (Bekes & Aafjes-van Doorn 2020). It found reasonably positive attitudes toward online psychotherapy, although many psychotherapists reported feeling more tired, less competent and less confident. It was more difficult for psychodynamic psychotherapists than for CBT therapists because of strong focus on in-session relational processes and nonverbal communication. It is in line with our observations that technical glitches had minimized our capabilities to observe nonverbal signs. What we observed and interpreted as resistance, is, in fact, the result of using technical "advantages" such as shutting down the

camera (eg. when crying or using chat instead of speaking out loud). That contributed to our lesser control over group processes and consequently feeling of exhaustion and less confidence. This manoeuvre can also be interpreted as their way of titrating intimacy allowing them a greater feeling of control and safety (Lemma & Fonagy 2013). What would be interpreted in an in-person setting as resistance or acting-out (walking during session, drinking coffee/tea and smoking) had been interpreted in online setting as a way of building holding environment for themselves. That happened because we, as therapists, couldn't take care of their environment which is normally done in the in-person setting.

This preliminary study suggests that it is possible to maintain psychodynamic group psychotherapy online at a relatively satisfactory level for both patients and therapists, but with having in mind that the preferred type of psychotherapy would still be in-person. What helped us was probably the fact that they had all been previously engaged in an in-person setting long enough to create transference and online group served as transitional object (Winnicott 1971) while waiting for the in-person groups to start again. It would be interesting to see the dynamics of the group which had not previously met in-person and to compare their results with this research, preferably on a larger scale and longer time of observation.

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### Contribution of individual authors:

All authors reviewed and discussed the manuscript draft and contributed to the final manuscript and all authors give final approval of the version to be submitted.

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### Correspondence:

Sandra Kocijan Lovko, MD  
Psychiatry Clinic Sveti Ivan  
Jankomir 11, 10 090 Zagreb, Croatia  
E-mail: [skocijan.lovko@gmail.com](mailto:skocijan.lovko@gmail.com)