15 Online Group Therapy

In Search of a New Theory?

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New Ideas – New Concepts

When Foulkes (1964), the founder of group analysis, probably the most practiced modality of group therapy in Europe, Israel, the United Kingdom, and Australia, started working with groups, he understood that moving from the couch to the circle (as the title of John Schlapobersky's book about groups from 2016 goes), is not just a shift in technique, but involves a change of theory, using new concepts. Scholz (2011) writes: "Like Freud, Foulkes innovation was first a methodological one: He changed the setting – from the couch to the circle, from the rule of free association to that of free discussion. Foulkes was very much aware of the fact that changing the setting required a change in theory. He had to integrate into his theoretical thinking the fact that in his groups, unconscious material was communicated and understood" (268). Moving from the couch to the screen, or from the circle to the screen when talking about groups, involves no less a dramatic change in the setting and the technique. Shouldn't such a change require a change in theory, then?

Actually, most group therapy theoreticians faced the same dilemma in establishing their school of thought. The question of creating a new theory involves the dilemma of using new concepts. Usually, inventing a new theory means creating new terms, in order to be clear that we are not talking about the same theory and same concepts of the old one. Most of the psychodynamic group theoreticians made a mistake by using concepts such as transference and resistance for group therapy as well, thus confusing the reader that assumes that we are talking about the same phenomena as in individual therapy. Some, like Rutan, Stone and Shay (2014) do emphasize that groups allow for multi-transferences and show a horizontal one in addition to the vertical one we see in individual therapy, however they still use the same concept of transference. Foulkes himself struggled with this dilemma and finally distinguished between Transference towards the therapist (with capital T) and transference towards other participants (with a small t). In fact, only Foulkes and Yalom seem to consider this important question, as Foulkes used the new terms of mirroring, resonance and exchange to describe the main mechanisms of change in the group, and Yalom (1970) used concepts such as cohesion and universality to describe some of the therapeutic factors in the group. Yalom's concept of cohesion proved especially fruitful, as research showed that in groups, the therapeutic alliance is replaced by the group cohesion, so that while in individual therapy the alliance with the therapist is highly correlated with positive outcomes (Safran and Segal, 1990), in groups – the group cohesion is the factor highly correlated with these results (Yalom and Leszsz, 2005).

So, which new concepts shall we use for online relationships and groups? As mentioned in the introduction to this book, *E-ntimacy* is one example of a phenomenon that is different online from the regular intimacy we encounter in face-to-face (f2f) interactions. Intimacy is commonly related to concepts such as love, closeness, self-disclosure, support, bonding, attachment, and sexuality. It can be defined as an exchange that involves sharing what is personal and private (Prager, 1995). Moving to online interactions results in new ways to experience and actualize intimacy, since physical proximity disappears, and privacy is questionable. This concept online and the difference from f2f interaction can be better understood in the group section, by being acquainted with the dynamics of Large Groups. In large psychodynamics process-oriented groups (above 30–40 members), in which the participants cannot be seated in one small circle, people lose the ability to connect intimately and to see one another's faces, and the intimate quality of the usual small therapy groups is lost (see Weinberg and Schneider, 2003; Weinberg and Weishut, 2012). However, people can still feel connected to the Large Group and its members, though not necessarily to specific members. This intimacy is based more on confluence and belonging than on the "into-me-you-see" popular version of intimacy. Weinberg (2014) identified large group processes on Internet forums such as Google groups, and described those forums as large groups disguised as small groups, so it is only natural to assume that the intimacy created online has similarities with the one constructed in large groups.

Weinberg's (2014) conclusion about online intimacy (*E-ntimacy*) is:

> "Psychoanalysis is about what two people can say to each other if they agree not to have sex" (Bersani & Phillips, 2008, p. 1). The psychoanalytic/psychotherapeutic setting allows for an intimacy that is not exactly the same as the intimacy created when two people are not bound to the therapeutic rules. *E-ntimacy is about what people can say to each other if they agree not to have a body*. It is not an impersonal intimacy, it is a different kind of intimacy. In fact, it challenges the Western cultural norms of independence, as always-on connection is sensed as a more collaborative self.
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> (147)

If this is the case, we can assume that when we do group therapy through Internet forums (using only text), we face and should take into consideration Large Group phenomena, such as feeling lost in Cyberspace and some threats to identity and one's subjectivity (Turquet, 1975), and that people sense *E-ntimacy*, not intimacy.

Wondering whether a new theory about online group therapy is needed, we should not only use new concepts, but also suggest what works in online groups, and explore whether it is the same as in f2f groups. Yalom's famous therapeutic factors (1970), enhancing change in every psychotherapy group, might not all function in online groups. Indeed, Weinberg and Raufman, in Weinberg's book (2014) about the dynamics on Internet forums, summarize the evidence from both research and personal experience that an Internet forum can become cohesive, and that universality is a common factor on Cyberspace. Catharsis, Instillation of Hope, Imparting Information and Altruism were also found in studies to be helpful in Internet support groups. However, the corrective recapitulation of the primary family, might not work for everyone. In addition, they identified that two other factors, typical of the Large Group, such as representation of society and the struggle for power exist on the Internet as well.

In contrast to Internet forums, there is no reason to believe that any of those therapeutic factors would not work in online groups using video, however, it might take more time for the group to develop a sense of belonging and cohesion, so change might take more time online. On the other hand, just as it happens in text-based forums, universality and existential factors are strengthened online. The possibility of expanding human limitations beyond time and space, rising above the restrictions of physical existence, to create a disembodied interaction, and allowing an experience that crosses boundaries, is very powerful. If we see the group as a social microcosm (Yalom and Leszsz, 2005), online there is a greater chance to gather people from different cultures, so diversity is prominent and many times the group becomes a concrete representation of society, a factor identified by Weinberg and Weishut (2012) as typical to large groups.

Transference to the group-as-a-whole is one of the important factors distinguishing individual therapy from a group setting. In f2f groups, in addition to the regular transference and countertransference towards the therapist (the group leader in the case of the group), people experience also the horizontal transference toward one another (the Foulksian small t transference, as mentioned above), but also transference (and counter-transference, by the therapist) towards the entire group. Does this element appear online? As said earlier, both in text-based forums and in video group setting, we lose the circle form of the f2f group. This might make it more difficult to experience the group-as-a-whole, and we might have to rely solely on our imagination. However, actually, the group-as-a-whole is

another abstract concept, and we always use our imagination to perceive the group as an entity. Weinberg (2016) included online groups as an example of "impossible groups that thrive and flourish in leaking containers," as Cyberspace is a huge, boundless, unlimited container, which threatens the sense of safety, privacy and confidentiality. He claimed that these groups succeed due to the secure presence of the group conductor, holding the reflective space in his/her mind, and the group members having a fantasized invisible group in their mind. It might take more time and become more complicated to do so online, but it is still possible.

Setting and Dynamic Administration

In the introduction to this book, we mentioned that one of the unnoticed differences between in-person (f2f) therapy and online one, is the fact that in online therapy the therapist lost control over the setting. We clarified that although it seems like a subtle change, it has a huge influence on the session, due to the impact of the setting on therapeutic processes. In group therapy this change has a specific meaning and emphasis.

Foulkes focused on the importance of the "dynamic administration." The conductor takes charge of the administration of the group's setting and translates "external material" brought within these boundaries, where appropriate, as matter pertaining to the dynamic flow of communication "here and now." This is why Foulkes (1975: Chapter 6) calls this task, which includes attending to events at and beyond the boundaries of the group, ever in the service of the group's better understanding of its experience, "dynamic administration." This concept conveys the message that administrating the group, taking care of its environment and even physical setting, carries a deep dynamic meaning. Administrative functions provide the group with a sense of safety and continuity, and enhance a dynamic flow of communication. Therapists tend not to pay attention to the impact of their physical actions on their patients, because they usually focus on psychological processes. However, actions such as arranging the group seating in a circle, with sufficient comfortable chairs (all of them similar to one another), with enough (but not too much) space between them − are crucial for a healthy group function. Symbolically, the group analyst is acting like a maternal figure creating a holding environment for the group.

In small f2f groups the holding function of the group leader is similar to the work of the blue-collar worker. The leader provides the basic conditions for making the environment comfortable. The group members should be free of worries about the physical environment in order to be able to work on their psychological issues. How does the group leader achieve this function on the Internet (both in forums and in video setting)? In the simplest form, holding occurs by being available to quickly respond to technical questions and solving technological difficulties. We

need to remember that many adults participating in virtual communication still feel anxious when they enter this unknown country and behave like immigrants who do not know the norms and language, who depend on their children's competence and skills navigating in this scary land. Of course, younger participants who were born into the Internet era might not need this leader's technical help.

Conducting group therapy through the Internet imposes severe challenges for this dynamic administration. If we conduct it by text messages, in an asynchronic forum (such as Google Groups, or a text application such as WhatsApp), we have no way of creating this physical holding environment. Those Internet groups, text-based, resemble more a boundless, new, unsafe and unknown environment, especially for those inexperienced with technology. However, sometimes, the mere fact that the group therapist can handle technical difficulties, or even just subscribes the members to the forum, makes the members feel that someone is taking care of them. When we move to a group video setting, which requires even more technological skills, the technical assistance of the therapist is no less important. This does not mean that the group therapist should be an IT expert, but that s/he should certainly be more experienced in overcoming technical difficulties than the average group member. In a way, the group therapist should compensate for the loss of the control on the setting by developing suitable online administrative functions.

Add to these considerations the fact, mentioned above, that the online group loses its classical format of people sitting in a circle. In a f2f group, when the group therapist arranges the chairs for the group in a circle (at least in private practice), this closed circular form, with its archaic associations of a womb, conveys the unconscious meaning of a perfect maternal container. Most of the group therapy theories cherish the availability of such a safe and good-enough container in order to work through deep unconscious psychological group processes. Moving from the physical reality to cyberspace tears this container apart. In text-based groups, no circle is evident at all. In video-conferencing groups (e.g. using Zoom application), group members are shown on the screen in boxes, one besides, above and below the other, with no specific order. Actually, we do not even have the same order on all the screens, as each computer is generating a different group composition.

The fact that group members decide from where they connect to the meeting, allows them to control the background and actually "decorate" the meeting room in any way they choose. Some connect to the group from their office and some from their home. Sometimes they unconsciously choose a picture in the background that has an unconscious meaning and sometimes they deliberately think in advance about the background and "choreograph" their environment to make a specific impression. The group leader should be aware of the decoration and explore its meaning when appropriate. In one of my groups, a woman

constantly chose to connect from a room with a huge picture of a general on a horse hanging behind her. After some time, the group members mentioned the picture and one of them said that it has a powerful impression on him. "Indeed, that was the impression I wanted to create," replied the woman.

Another topic mentioned in the introduction is the fact that many boundary crossings or even violations that therapists would not ignore when the patients are in their office, become transparent and ignored when it happens online. In a video group session, where there are many people on the screen, this obliviousness is even stronger, and the group usually joins the silence about the boundary crossing. Fortunately, when group therapists do notice that something is happening "in the background," they can recruit the group to work it through, and do not have to carry the burden of processing the event alone. The following group vignette is a good example of such a case:

> In an online group using video conferencing, one of the participants, Sima, that had missed the previous session, appeared on the screen sitting in the back seat of a car, probably a cab, using her iPhone to connect to the group. The group members wondered what happened to her that she had been absent last time, but nobody mentioned the fact that she is in a car with someone else driving it. After a while, when the group leader saw that the group continues to ignore the situation, he wondered aloud whether he is the only one that noticed that Sima is on her iPhone in a car, and how do people feel about it.
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> One group member, Nora, said that she doesn't feel safe and she is worried about confidentiality, to which Sima replied that it is okay because she does not know the driver, so she feels free to talk about anything she wants. This response enraged some group members who felt that she does not consider their privacy. Another member, Fiona, was concerned that Sima will not be able to emotionally connect with the group while her attention would be on the road. Hella, on the other hand, expressed her sympathy with Sima, saying how glad she is that Sima did not want to miss this group session as well, and made the effort to connect despite her not being at home. Sima was touched by this empathic response and acknowledged that she wanted to eat the cake and have it all: drive to an important business meeting and still not miss the group. She asked the group what they think she should do. Nora said that she still feels unsafe and wanted Sima to leave the session and come back next time, connecting from home. David joined her, saying that Sima violated the rules and the agreement they all have made entering the group.

After a lengthy discussion, the group leader decided that a decision should be made: He suggested that Sima leave the group session and welcomed her to join next session and discuss it. Sima became rageful, shouted that the group and its leader act like machines, in a nonhuman way, and that she doesn't want to be there anymore. She disconnected her iPhone and disappeared. The group continued to process their feelings for the rest of the session, shifting between people expressing anger at Sima and the group leader (who should have intervened earlier, in their opinion), and between people fearing that they will be rejected if they deviated from some group norms. The group leader encouraged them to express their feelings, saying how important it is to allow different opinions and attitudes, and that safety is about the freedom to discuss difficult issues no less than setting boundaries.

The next meeting Sima showed up as usual, in her home, to the relief of everyone (including the group leader). After they expressed this relief and wanted to move forward, the group leader suggested discussing the dramatic events from last meeting. Following some conversation, Sima thanked everyone for the previous meeting, saying that she thought a lot about what has happened and her strong emotional reaction. She brought memories of rejection by her family of origin and peers. Other members who had felt rejected through their life, joined her. These two meetings became a turning point for the group and increased the ability of the members to express differences and to feel safe in opening up.

In order to deal with the fact that the group members determine most of the group setting and to gain back some control over the "dynamic administration," the group therapist should instruct the members in advance how to create the suitable environment for which they should take responsibility. This should be done partly in the preparation meeting-(s). It goes without saying that although some group members live thousands of miles away, the group therapist should never give up a screening and preparation meeting with the group candidates, just as the standard practice of in-person therapy, even though it has to be done online. In that preview meeting, the group therapist checks the suitability of the member for group therapy in general, and the specific group in particular, prepares the candidate for the group meetings, and educates him or her about the conditions that the group member should keep in order to maintain safety and confidentiality. The group agreement (which should be also sent to the candidate as a document) should include

a specific paragraph about online "etiquettes" in order to adjust to the fact that the therapist does not control the group members' environments any more. Here are some sentences from my online group using a video setting: "The group members agree to connect with both video and audio, unless other arrangements are made on occasion. To arrange for a quiet room with full privacy and no interruptions. This includes no phone calls, emails or texting during the entire session. To stay focused on the group interactions. To connect from the same place each session, unless you are away and notify us of the change."

As said in the introduction to this book, in online therapy we need to overcome the media barrier and find ways to be present despite the mediated communication, causing disconnection and distraction. It requires special attention from the group therapist to stay connected in the session and be attentive to all the group members. However, sometimes these technological obstacles obscure other difficulties in close relationship, and we can easily fall into the trap of "blaming" the online modality for members' difficulties to be in touch and connect emotionally with one another.

Another group vignette:

Karin joined an online process group led by the author after participating in an intensive workshop he was leading in a professional conference. In that workshop she was very impressed by the group leader's skills and felt that he understood her deeply. She perceived him as giving her special attention and being very attuned to her. However, a few months after she had joined the weekly online group she felt very disappointed. She did not feel as special as she felt in the intensive f2f workshop and she thought that she does not draw the leader's attention as she expected. She said something about losing his attention in the group, but the topic was not explored much further.

A few weeks later she wrote an email to the group leader, letting him know that she considers leaving the group. She blamed it on the fact that it is an online group and that she cannot build the connection she is used to create in a group meeting in-person. She wrote that the online format did not work very well for her. She added that there is something about not being in the same physical space at the same time that presents a barrier to the group process for her.

The group leader suggested that she will bring this issue for discussion in the group, sticking to the common practice of in-person groups that everything relevant to the group process that is discussed outside the group, should be brought back to the group, especially when someone considers termination. She agreed and in the next online group session she told the group that she does not think that the

online format suits her. As usual with such announcements, people's reactions varied between expressing sorrow and sadness and between being irritated. They did not suggest exploring her motives further. Eventually, the group leader asked whether it means that they agree with her that the online modality does not allow for "real" connection. This intervention helped the discussion to deepen, and one member suggested that perhaps there are other issues that block her ability to connect. The group leader reminded her how disappointed she was about not getting enough attention from him and wondered whether it was more meaningful than she had allowed herself to imagine or experience.

After the conversation began to move away from this dialogue between Karin and the leader, Nina said, "Karin, I can see that the connection between you and Haim (the group therapist) is important to you right now, and I want you to have that. I want to do whatever I can to help you have it." Karin became tearful and was deeply touched by this sacrifice. She remembered that in her family of origin, her youngest sister always received her father's full attention and she painfully longed for him to pay attention for her as well. She was shocked that this group "sister" of her did not play the role she had expected. All the group members were touched by Nina's generosity. When the group leader asked Nina whether she can reflect on her motivation, Nina understood that Karin was her "sister," too, that in fact, at that point in time, Nina's father was battling the end stages of cancer, and Nina desperately wanted her own sister to receive the validation of her relationship with their father. Nina had the opportunity to realize the painful impact of her sister's longing to be validated by their father.

We can see in this vignette how easy it can be to accept the member's arguments about the impossibility of "real" online connection as the only truth, and ignore the important exploration of other barriers. When we do remember to do so, the results might be reconnecting and very satisfying.

The Disembodied Group

Creating a holding environment (Winnicott, 1960) is one of the main tasks of the group therapist. The group members need to feel securely held by a maternal container (Rutan, Stone and Shay, 2014). Maintaining the group's external boundaries is one way of holding the group and making

the members feel protected, and we have discussed above the difficulty of doing it online. Another way of holding the group is through the leader's gaze. Just like the mother's mirroring, looking at the infant with glittering eyes, making him or her feel accepted, worthy and even admired, the group therapist looks at every group member, sustaining his/her gaze, encouraging the member to speak out or making them feel appreciated for what they said. This look is essential in fulfilling the need of group members for mirroring, as Kohut (1971) reminds us in individual therapy. Of course, members of the group can also get approval and satisfy their mirroring transference needs by looking at one another. This important gaze is clearly lacking in online groups. Even if the group therapist tries deliberately to look at a specific member in video meetings, this member will not be able to perceive that.

The gaze is only one aspect in the important presence of the body in therapy in general, and group therapy in particular. The interpersonal neurobiological (IPNB) perspective enabled clinicians in understanding interpersonal aspects of brain functions, and especially in developing models of the social brain (Badenoch, 2008; Cozolino, 2006). It has been applied successfully to group therapy (see a special issue on this topic of the *International Journal of Group Psychotherapy*, edited by Susan Gantt and Paul Cox, 2010). Integration between the body, the limbic system, and the neocortex is necessary for wellbeing. As Siegel writes: "Integration is seen to be the heart of health. Transformative experiences recruit the sharing of information and energy flow within relationships to actively move the synaptically stuck brain to fire off in new ways—ones that are now shaped toward integration" (2010: 484). In the IPNB approach, much emphasis is put on the emotional regulative impact that the physical and emotional presence of the group therapist has on different group members (and sometimes the regulation that group members exert on one another). In Cyberspace all this seems to be lost, and the question is whether anything can replace it. My answer is that the there are other ways for the group therapist to become present and compensate for the "loss of the body."

The Group Therapist's Presence

One of the ways to overcome "the media barrier" is by a more intensive use of the therapist's self (compared to groups that meet in-person). Most of the time this can be achieved by a certain self-disclosure of the group therapist. The traditional psychoanalytic approach discards disclosing of personal details of the (group) therapist's life and history, and recommends that the therapist remains a blank screen, mostly in order to allow for projections and the development of pure transference. Yalom and Leszsz (2005) distinguish between two kinds of self-disclosure, one regarding the personal life of the therapist (information from the there-and-then), and

the other is about the therapist's feelings in the group (which is actually emphasizing the here-and-now). They recommend that the group therapist will practice transparency of the second kind and they claim that the therapist who judiciously uses his or her own person increases the therapeutic power of the group. Such a transparency can become a model for group members to reveal their feelings toward one another. Of course, this use of self should be executed cautiously, always bearing in mind that the end goal is the benefit of the group members and not the relief for the group therapist. Online, this transparency can become a very useful tool to show group members how to overcome the difficulty that the screen imposes. It might be easier for intersubjectively-informed self psychologists, who stress therapist attunement and empathy, than for conservative therapists. Although this recommendation can be applied to online individual therapy as well, it is especially applicable in groups therapy because unlike individual psychotherapy, in the group setting the therapist is not the sole object of patients' transference projections (Durkin and Glatzer, 1997).

Cohen and Schermer (2001) provide some directions when to use transparency in the group: "The therapist's self disclosure is likely to be an effective element of the total therapeutic process insofar as: (1) the group's developmental level has prepared members to contain the disclosure without it being a 'shock to the system' (Rachman, 1990), (2) the act of disclosure is perceived as spontaneous and appropriate to the group's ongoing discursive content, and (3) the therapist's disclosure clearly, even if implicitly, accords legitimacy to the member behavior to which it is 'responsive'" (Bacal, 1998). In short, I recommend that the group therapist discloses positive attitudes toward group members, only when the group reaches advanced stages (see Berman and Weinberg, 1998).

Especially powerful and connecting are the group therapist's interventions in which he or she takes responsibility for mistakes s/he has made in approaching some group members. When the therapist notices some subtle expression of dissatisfaction of a group member (say, by a facial expression that in an online video meeting can be noticed more easily because of the close-up posture), reflects on his or her intervention, checks with the participant and acknowledges the mistake, it usually has a strong impact on the member and the entire group. For many group members, it creates a corrective experience as a contrast to parents who never admitted or acknowledged their mistakes. Apparently, many people who still carry scars from their parents' insensitive attitude towards them in childhood, hold the fantasy that their parents will ask for their forgiveness. When the group therapist notices the hurt online and acknowledges the mistake, it is especially impressive because it overcomes the "screen barrier" and helps the group members feel that they can also stay sensitive and compassionate despite the limitations of online connection.

Here is an example:

In an online group using video conferencing, one of the group members, Sheila, requested feedback from the group, saying that she is usually satisfied with her life, happy and easy going, wondering whether she is denying something. Some group members said that they find it hard to believe that she is always content. Summarizing their responses, the group leader suggested to Sheila that her limited range of emotions is perceived superficial to the group members. The leader noticed that some group members' facial expressions online seemed shocked or irritated (but not Sheila's). After some reflection, he got back to Sheila and said that he wanted to correct his previous intervention, because it might have been understood as if Sheila is superficial, which was not the therapist's intention. He corrected himself by telling Sheila that when she only expresses joy and never any sign of irritation, dissatisfaction or any negative emotions, it makes it difficult for him, the group leader, to get closer to Sheila. She had a strong emotional reaction to this intervention and later on it became clear how much her parents did not allow for any emotional strong reaction, and never acknowledged that they had made mistakes.

In this example the group leader's intervention combined both elements recommended above: Acknowledging a mistake and being transparent. The online component intensified the power of this intervention for both Sheila and the other group members.

In Summary

Online groups present a special challenge for the group therapist, greater than in online individual therapy, mostly because of the many factors involved that include the different members and the group-as-a-whole dynamics. The dilemma of staying present, focused and attuned is intensified, and the fact that the group therapist does not control the setting, thus posing obstacles to the "dynamic administration," makes the group leading even more challenging. However, with enough awareness of the obstacles, trying not to ignore the subtle background events and decoration, and finding ways to stay connected, the group can thrive and become no less successful than in in-person group, although sometimes in a slower pace. If we want to go online, we need to be aware of the similarities and differences pointed out in this chapter. We might need new concepts, and it might be essential to go through specific training (only after being experienced enough in leading group in-person). As for the question of

whether a new theory is need, group therapy online might not be the same as when it is done f2f – but it is not that different.

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