



# Virtual Therapy Groups and Group Cohesion

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## Introduction

- Mental Health therapy provided via video teleconferencing has been shown to have a therapeutic relationship similar to that of face to face treatment (1).
- While literature indicates this works in individual treatment, there is less known about the relationship for group therapy, and specifically, group cohesion (2,3).

## Methods

- Dialectical Behavior Therapy for Depression
  - Online and in-person groups offered
- Two Group Comparison / Mixed Methods
- Rovai Scale of Community Connection (4)
- Attendance Rate
- Qualitative Survey – open ended questions

## Participants

- 35 participants self-selected into an in-person or an online group (15 online/20 in person)
- Primary diagnosis of Major Depressive Disorder
- 70% women, 90% Caucasian, age ranged 22-70 (40.7, sd=15.7).
  - No statistically significant differences between groups on demographics

## Results

### Rovai Scale of Community Connection

- No differences between the groups on relationship with the facilitator subscale
- Statistically significant differences on connection to other members subscale, as well as on the total score, with online group rating lower overall cohesion

### Attendance

- Online group had statistically significantly higher attendance
- ### Qualitative
- The convenience of the group outweighed any negative effects of not being able to meet in person
    - *“It is kind of odd not meeting in person, but the online meetings make it logistically possible for me to participate.”*
  - Participants commented on finding it easier to connect with others when using interactive features, like the breakout rooms and chat

## Conclusions

- Participants still learned and felt connected to the leader but more work needed to increase cohesion
- Intentional use of technology such as white board, breakout room, reactions, and polling can increase connection and interaction with other members
- Future groups will also allow a “waiting room ” for more informal interaction
- Attendance was better in online group, indicating fewer barriers to attending treatment in person
- Online group remains an option, especially for those with barriers limiting in-person participation, but facilitators may have to take additional steps to encourage interaction and cohesion

Group Type	Facilitator Relationship Subscale Score	Group Member Role Subscale*	Total Scale Score*	Attendance*
Online Group	14.1 (sd=1.5)	20.3 (sd=2.4)	35.3 (sd=3.9)	91%
In-Person Group	14.7 (sd=1.0)	23.6 (sd=1.7)	40.5 (sd=2.8)	75%

\*denotes statistically significant difference of p<.01

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