

Title: Addressing mental health needs of post-ICU COVID patients through process group psychotherapy

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Background: Recent studies indicate that individuals infected with COVID-19 develop mental health issues even after they have recovered from the infection. Currently, there are limited specialized mental health support services for this patient population. This clinical program and study aimed to evaluate the feasibility and effectiveness of virtual peer-based process group psychotherapy in addressing the mental health needs of long-haul post-ICU COVID patients following ICU admissions.

Methods: A psychotherapy process group was set up in an outpatient specialty clinic operating at an urban teaching hospital. The group co-facilitated by a supervising psychologist, a psychiatry resident, and a fourth-year medical student entering the field of psychiatry, but participants guided the topics and discussion process. Members asked each other questions, provided feedback, and vulnerability shared their unique experiences with each other. Each session was 1.5 hours long occurring on a bi-weekly basis. Patients (N=16) could opt to attend as frequently as they wish. The (Hope) Future Scale (HFS) and the UCLA Loneliness Scale (UCLA-LS) were administered before each member participated in the first session (pre-evaluation), and again after attending at least 6 group sessions (post-evaluation). Plan in place for surveys to be repeated approximately every three months. These scales evaluate participants' level of hope and quality of connection with others, respectively. Scores will be analyzed using descriptive and inferential statistics. Progress will also be measured with qualitative responses summarized as major themes. Participants were interviewed for additional perspectives on the impact that the process group has on their mental health and the degree to which it has helped them.

Results: There were 22 process group sessions occurring during January 2021 to February 2022. The average number of attendees per session ranged from 2 to 5 patients. Majority of patients (74%) attended more than 1 session. Upon interview, participants (n=4) indicated significantly positive sentiments about the impact that participating in the process group has had on improving their mental health, well-being, and outlook on life and the future. Some statements that have stood out include: "It's been comforting to me to hear that someone has kind of been where I've been", "you guys all can relate and understand... it's nice to know I'm not alone", "you guys give me hope", "you guys are accepting", and "the format is great". The virtual sessions were generally well-received by attendees with very little technological barriers.

Conclusion: Participants indicated a spectrum of experiences related to grief and trauma associated with being infected and recovering from COVID-19 following an ICU admission. The psychotherapy process group provided an outlet for them to find healing through discussing relatable experiences. Logistically, the process group was feasible to be integrated in the clinical operations.