

# The effectiveness of a short-term schema focused group therapy on persistent anxiety and depressive symptoms: A Single Case Experimental Design

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In the present study we aim to investigate the effectiveness of short-term schema group therapy (protocol of de Jager and Burger) on (1) persistent anxiety and depressive symptoms, and (2) dysfunctional schemas, experiential avoidance and the mode...

<b>Ethical review</b>	Approved WMO
<b>Status</b>	Recruiting
<b>Health condition type</b>	Other condition
<b>Study type</b>	Interventional

## Summary

### ID

NL-OMON53660

### Source

ToetsingOnline

### Brief title

Schema focused group therapy for anxiety and depression

### Condition

- Other condition
- Mood disorders and disturbances NEC

### Synonym

Anxiety and depression

### Health condition

angststoornis en klachten

## Research involving

Human

## Sponsors and support

**Primary sponsor:** GGZ Noord-Holland-Noord

**Source(s) of monetary or material Support:** GGZ Noord-Holland-Noord

## Intervention

**Keyword:** anxiety, depression, group therapy, schema focused therapy

## Outcome measures

### Primary outcome

Anxiety and depressive symptoms, as measured by (an idiosyncratically chosen set of) a self-report questionnaire (DASS-21)

### Secondary outcome

Dysfunctional schemas, experiential avoidance, and healthy adult mode, all measured by (an idiosyncratically chosen set of) self-assessment questionnaires (YSQ-S3, BEAQ, SMI, respectively).

Furthermore, by means of self-report scales we also examine the degree of personality pathology (LPFS-BF) and general psychopathology (OQ-45).

## Study description

### Background summary

Around 50% of clients with anxiety and/or depressive symptoms do not benefit sufficiently from the first-choice treatment. There is no suitable alternative for this group of clients. There is a high level of comorbidity between anxiety and depression. A transdiagnostic approach, which focuses on maintaining factors of anxiety and depressive symptoms, is interesting in this regard. One of the hypotheses about maintaining factors is that there are underlying personality features that impede recovery. Schema therapy has proven to be an effective therapy for people with personality disorders. There are initial

indications that schema therapy is also effective in the treatment of anxiety and depressive symptoms. A short-term schema group has been developed within GGZ-NHN, which is expected to benefit clients with persistent anxiety and depressive symptoms, but has not yet been studied.

## **Study objective**

In the present study we aim to investigate the effectiveness of short-term schema group therapy (protocol of de Jager and Burger) on (1) persistent anxiety and depressive symptoms, and (2) dysfunctional schemas, experiential avoidance and the mode of the healthy adult. .

## **Study design**

We will use a Single Case Experimental Design (SCED). SCED is an experimental design that tests the effect of an intervention with a small number of participants, using repeated measures over different phases. In this study, 10 participants will be assessed during four different phases.

## **Intervention**

There are two intervention phases. The first concerns the pre-treatment phase, which consists of five online sessions and three face-to-face sessions with one of the group therapists. Pre-treatment includes psychoeducation about schema therapy and an individual case conceptualization for illustration purposes, showing how schemas and schema modes are characteristic of this specific client. The second intervention phase is the short term schema group therapy. The SFGT consists of 17 weekly group sessions. The SFGT is a structured therapy format based on the protocol written by De Jager and Burger (2022). The group sessions are divided into four phases, each focused on a different category of schema modes.

Unlike previously investigated short-term schema group therapies, which were mainly cognitive in nature, this protocol has an experiential approach. The goal of the intervention is that it leads to less maladaptive coping, less punitiveness towards oneself and an increase in the healthy adult mode in which there is more contact and compassion for one's own vulnerability.

## **Study burden and risks**

Participants will complete questionnaires in addition to their participation in the intervention. The assessment of anxiety and depressive symptoms will take place twice a week for 37-40 weeks, and will take a few minutes each time. Once every two weeks the assessment is more extensive and will take around 8 minutes. Beyond that, there are five larger measurement moments, before baseline, before start of pre-treatment, before start of group treatment, after completion of group treatment and after three months of follow-up. These

measurement moments will take an estimated 40-45 minutes.

Although every effort is made to make the assessment procedure as easy and accessible as possible for the participants, the design with repeated measures does ask the participant to rate their symptoms twice a week. These assessments vary between short and fast, and somewhat more extensive. Constantly dwelling on the things that bother you can be confrontational for participants.

## Contacts

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### Scientific

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## Trial sites

### Listed location countries

Netherlands

## Eligibility criteria

### Age

Adults (18-64 years)

### Inclusion criteria

Clients currently in treatment at GGZ-NHN (mental health organization), who meet the following criteria:

- Persistent anxiety or depression symptoms (at least moderate score at the subscale depression ( $\geq 7$  or anxiety  $\geq 6$  on the DASS-21).
- History of at least one previous evidence-based therapy focused on anxiety,

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depression or PTSD according to the Dutch national guidelines.

- Able to comprehend Dutch at a level sufficient to complete the self-report questionnaires.

- Age between 18-65.

## Exclusion criteria

- Clients with severe problems that need to be addressed first, including substance abuse, psychosis, anxiety disorder, PTSD or depression that not have been treated.

- Start of (or change in) medication which is not yet stabilized at the start of this study.

- Psychosocial problems such as homelessness, no income or high debts which would make the clients unable to participate in a group.

## Study design

### Design

**Study type:** Interventional

Masking: Open (masking not used)

Control: Uncontrolled

Primary purpose: Treatment

### Recruitment

NL

Recruitment status: Recruiting

Start date (anticipated): 18-07-2023

Enrollment: 10

Type: Actual

## Ethics review

Approved WMO

Date: 21-06-2023

Application type: First submission

## Study registrations

### Followed up by the following (possibly more current) registration

No registrations found.

### Other (possibly less up-to-date) registrations in this register

No registrations found.

### In other registers

Register	ID
CCMO	NL83423.018.22