The use of narrative therapy in a group setting supports the client as the expert in his or her own life, addresses multicultural issues, and is appropriate for a multitude of mental health concerns across the lifespan (Clark, 2014). However, research demonstrating the efficacy of this treatment modality is limited. The purpose of this paper is to synthesize the current literature to provide a stronger, more comprehensive understanding of Narrative Group Therapy (NGT).

Through a thorough analysis of the current literature, several themes in the research were found, including feelings of isolation (Clark, 2014; Looyeh, Kamali, Ghasemi, & Tonawanik, 2014; Szabo, Toth, & Pakai, 2014; Yanos, Roe, & Lysaker, 2011), the impact of internalization of negative messages on individuals (Duba, Kindsvatter, & Priddy, 2010; Looyeh, Kamali, & Shafieian, 2012; Ricks, Kitchens, Goodrich, & Hancock, 2014; Robinson, Jacobsen, & Foster, 2015), and the installation of hope and empowerment (Baumgartner & Williams, 2014; Butera-Prinzi, Charles, & Story, 2014; Carrio & Rasera, 2010; Mertz, 2014; Mohammadi, Sohrabi, & Aghdam, 2013). Methodology in these studies included pre- and post-test questionnaires, post hoc measures, and self-reports of improved mood, coping, and emotion regulation. Additionally, multiple case studies were reviewed. Overall, the findings strongly suggest that NGT is effective and can be viewed as a universal treatment modality.

Sixteen articles related to NGT were found in the current review of the literature. Only five of these articles provided data from participants who received NGT. Due to the limited number of data, and participants, a meta-analysis was not feasible and a literature review...
was conducted instead. The purpose of this literature review of NGT is to consolidate the existing literature, to strengthen the current findings, and to provide direction for future research.

Methodology

A review of the existing literature on NGT started with a search using CINAHNL Plus with Full Text, ERIC, PsychINFO, ScienceDirect, Social Sciences Citation Index, and SocINDEX with Full Text databases. Search terms included narrative, group, and therapy. The term literature review was included initially to verify that no previous literature review has been completed and was eliminated from search terms when no results were found. Based on these keywords, 16 articles were found and utilized in this literature review. All articles were published in peer-reviewed journals within the previous 10 years.

Selection Criteria

Selection criteria used for this review included the following: a group model of counseling with a narrative therapy approach; either a study, case study, or review of techniques involving this method of treatment; a thorough description of the approach used as well as a discussion of the outcome and implications; and publication in peer-reviewed journals in or later than January of 2007. Sixteen articles meeting these criteria were included in the current review of the literature. While reading the articles, the authors identified common findings and made notes. Upon reading the articles a second time, the notes were then consolidated to three primary themes utilizing a rubric (see Appendix A). Themes found throughout these articles included reducing feelings of loneliness and isolation, teaching clients to externalize their problems, and empowering individuals to be the change they desire. Existing literature suggests that group therapy often addresses loneliness while Narrative Therapy emphasizes the externalization of problems and empowering the individual (Szabo et al., 2014). However, the synthesis of Narrative and Group Therapies addresses isolation and feelings of loneliness (Baumgartner & Williams, 2014; Butera-Prinzi et al., 2014; Carrijo & Rasera, 2010; Mertz, 2014) while simultaneously developing individual experiences of empowerment and externalization (Clark, 2014; Duba et al., 2010; Lane et al., 2016; Looyeh et al., 2012; Looyeh et al., 2014; Mohammadi et al., 2013; Ricks et al., 2014; Robinson et al., 2015; Szabo et al., 2014; Yanos et al., 2011).

Results

Narrative therapy (NT) is effective in helping individuals to recognize their own authority in their lives and redefine their struggles through the narrative process of rewriting one's story (Clark, 2014). The group model allows for and encourages universality, instillation of hope, and the development of socializing techniques (Yalom & Leszcz, 2005). While universality and autonomy (becoming the authority of one’s own life) may appear to be opposing factors, the integration of group and narrative treatment synthesizes these goals of counseling to help clients understand that they are not alone (Clark, 2014; Looyeh et al., 2014; Szabo et al., 2014; Yanos et al., 2011), that their problems do not define who they are (Duba et al., 2010; Looyeh et al., 2012; Ricks et al., 2014; Robinson et al., 2015; Lane et al., 2016), and that they can take authorship of their own life.
Impact on Isolation

When faced with challenges of homelessness (Baumgartner & Williams, 2014), traumatic brain injury (Butera-Prinzi et al., 2014), abuse or neglect (Mertz, 2014), mental illness (Carrijo & Rasera, 2010), or similar difficulties, clients can encounter feelings of isolation. The group setting allows individuals to come together with others struggling with similar situations to communicate that they are not alone. Witnessing others rewriting their stories encourages and strengthens one’s own willingness and ability to rewrite their own story.

Baumgartner and Williams (2014) found that, before NGT, homeless individuals who have recently been approved for housing experienced “loneliness, overwhelming quietness, guilt towards peers who remained homeless” but by the end of treatment, these same participants expressed gratitude toward learning that they were not alone (p. 3).

Over the course of three years, Baumgartner and Williams (2014) conducted over 120 sessions of NGT. Participants in their group were individuals who had recently been approved for housing in an apartment and were transitioning out of homelessness. Although this transition was a positive change in their lives, many of the participants felt isolated, lonely, guilty, and overwhelmed by their new living arrangements. These feelings were amplified by the guilt of leaving others behind. Baumgartner and Williams (2014) wanted to explore whether an NGT approach would help those overcoming homelessness to cope with the difficult feelings that come along with these positive changes. Over the course of three years, they had on average six to eight participants at weekly meetings lasting one hour each. Meetings were open, and members could come and go as they pleased, regardless of how recently they had moved into their apartments. Additionally, no requirements regarding sobriety were implemented. Open meetings with limited requirements allowed for all who wanted to participate to do so, with the purpose of sharing their stories with others across various stages of change. Each group session was structured as “Check-in, Reviewing Mutual Safety Expectations, Group Discussion, Announcements, and Check-out” (Baumgartner & Williams, 2014, p. 6). As a result of NGT, Baumgartner and Williams (2014) found that individuals dealing with isolation and guilt before treatment were better able to identify both problems and solutions after treatment, and participants resoundingly shared that they no longer felt alone. Participants also reported feeling more hopeful, connected, and comfortable with the new living arrangements after involvement in NGT.

Utilizing a short-term NGT approach consisting of 12 sessions, Carrijo and Rasera (2010) sought to identify how those suffering from depression, anxiety, and other mental illness overcome feelings of isolation. Sessions lasted one and a half hours and the study included seven participants. Carrijo and Rasera (2010) found that participants were able to recognize that they were not alone and were not isolated due to their mental illness. Participants were able to identify new meaning in their lives and an increased sense of autonomy previously
distorted by their perception of isolation. One participant shared that after NGT she was able to “relate better with herself, her life, as well as others” (Carrijo & Rasera, 2010, p. 126). This research suggests that NGT increases autonomy while simultaneously decreasing loneliness associated with overcoming one’s mental illness.

Changes that occur as a result of an external event can also be difficult to manage. Butera-Prinzi et al. (2014) found that even when working with families, individual members reported feeling isolated after a loved one acquired a brain injury. Victims of abuse and neglect also report a similar experience of isolation, and Mertz (2004) found that this population could benefit from NGT as well.

Butera-Prinzi et al. (2014) implemented NGT with families living with an acquired brain injury (ABI). They wanted to find ways to assist families who had a member with an ABI to overcome their expressed feelings of isolation and loneliness. While the family was dealing with this loss, each member dealt with it differently. Butera-Prinzi et al. (2014) developed a model that applied NGT to working with groups of families to “find ways to continue living according to their preferred values, goals, and identities” (p. 81) and overcome the isolating effects ABIs can have on the family unit as well as individual family members. A case study of one family involved in the group was presented and the outcome of this study suggests that NGT has a lasting impact on reducing feelings of isolation among each member of the family, as well as with the family unit as a whole. The group lasted for two years and the families were allowed and encouraged to tell their story while simultaneously bearing witness to the stories of other families. Through the use of NGT among multiple families, members were able to re-write their story and tell one in which they are not alone and not defeated. The family unit grew closer to each other and they were able to recognize that others are facing similar trials.

Another study conducted by Mertz (2014) explored the impact physical or sexual abuse or neglect had on adolescents and young adults. The group was conducted in a residential treatment center for teenagers, was open, lasted for one hour per session, and averaged 15 participants at a time. Mertz (2014) found that the use of NGT among teenagers of abuse or neglect reduced isolation by teaching participants to “redefine themselves amidst a safe, supportive community” (p. 42). Through the use of various narrative activities in a group setting, teenagers began to work together to develop their own treatment process, reporting echoing feelings of empowerment and togetherness.

Through each of these studies, NGT assisted individuals to focus on the knowledge they have gained through their lived experience. An emphasis on NT encourages members to share with one another their successes, failures, and goals. An additional tenet of NT that has been found to be effective in the group setting is bearing witness to one’s story (Baumgartner & Williams, 2014). Through the telling and re-telling of one’s story, along with peers who can bear witness to this story, individuals are able to “bring together previously fragmented and isolated aspects of the self,” (Yanos, et al., 2011, pg. 585). This process increases insight and reduces feelings of isolation.
Externalizing the Problem

Individuals struggling with substance abuse (Clark, 2014 & Szabo et al., 2014), severe mental illness (Yanos et al., 2011), and social phobias (Looyeh et al., 2014) often internalize messages of self-worth and see themselves as the problem rather than the illness as the problem. Learning to externalize the problem stimulates the installation of hope to promote positive change and growth (Clark, 2014; Looyeh et al., 2014; Szabo et al., 2014; Yanos et al., 2011). Among individuals struggling with substance abuse, self-blame and low self-worth are commonly held belief systems. Learning to separate the problem of substance abuse from the self has been found to promote change and facilitate recovery (Clark, 2014; Szabo et al., 2014).

Clark (2014) provides several case illustrations demonstrating the effectiveness of NGT in treating substance abuse and improving self-esteem. Through the use of narrative approaches in substance abuse groups, individuals are able to become the experts in their own lives and learn to control the problem rather than the problem controlling them. The groups are open, varying in size, and do not have a time frame specified. Rather than focusing on the structure of the groups, Clark (2014) suggests the use of the “Narrative Novel” and “Letter of Letting Go” as the necessary tools to externalize the problem of substance abuse and promote long-term change. In groups with female substance abusers, NGT participants learned that they are not defined by their problems. Findings suggest that by removing blame from the individual, recovery was improved (Clark, 2014).

Szabo et al. (2014) conducted a group based on the narrative restructuring model. The group consisted of six to eight alcohol dependent participants and lasted for three weeks, with four sessions per week. It was hypothesized that “therapeutically controlled restructuring of alcohol abusers’ autobiography (which serves as self-representation) has measurable therapeutic effects and facilitates their recovery” (Szabo et al., 2014, p. 471). Pre- and post-tests were implemented utilizing the Hopelessness Scale (HS) and the means-ends problem solving procedures (MEPS). Results of the study found that hopelessness decreased in 80% of the participants while problem solving ability increased in 97% of participants. These findings suggest that NGT is a highly effective mode of treatment for substance abusers.

In addition to self-worth issues related to substance abuse, Looyeh et al. (2014) and Yanos et al., 2011) found that there are multiple negative stigmas are associated with depression, anxiety, and social phobias, among other mental illnesses that are commonly associated with negative self-image. The use of NGT, specifically the technique of externalizing the problem, can be a powerful tool for overcoming stigma. Yanos et al. (2011) found that individuals suffering from severe mental illness often “have difficulty differentiating themselves from their disorder” (p. 582). In their treatment manual, Yanos et al. (2011) describes a NGT approach that requires two facilitators for every four to eight participants, with one hour sessions in an eight week closed group. Case studies utilizing this approach were presented with findings suggesting that externalizing the problem of severe mental illness can have a profound impact on reducing...
internalized stigma while improving hope, self-esteem, and social relationships. This is an especially significant finding as the current literature on treatments to address internalized stigma among severe mental illness is quite limited (Yanos et al., 2011). More research is suggested to determine if the results are generalizable to less severe mental illnesses and individuals seeking help that do not have a mental health diagnosis.

Adolescents with social phobia often times have negative views of self, externalizing positive situations or events while internalizing negative situations or events (Looyeh et al., 2014). In an effort to understand the implications of externalizing problems for adolescents with social phobia, Looyeh et al. (2014) conducted a study consisting of 24 boys. The participants were ages 10 to 11 years old and were placed into a NGT group and a control group. The group lasted 14 sessions, twice a week, lasting 90 minutes each. The goal of the group was to teach these adolescents to externalize their problems and begin to see the problems from various perspectives. The study utilized Children Symptoms Inventory (CSI-4) to measure the efficacy of NGT. A pre-test and two post-tests at one week and thirty day intervals were administered at home and school to measure the severity of social phobia symptoms. Results were analyzed utilizing an ANOVA and found significant decrease in symptoms at both post-test intervals. Findings suggest that externalizing problems through NGT has a positive impact on both symptom reduction and perception of internalized stigma associated with social phobia.

The NT technique of telling one’s story increases the ability for the individual to externalize the problem and identify positive aspects of oneself while the group process creates an environment that is supportive and reinforcing of the newly authored story (Garte-Wolf, 2011). In working with clients who have been diagnosed with HIV/AIDS and are struggling with chemical dependency, Garte-Wolf (2011) found that individuals feel trapped and often internalize their experiences. Narrative Group therapy was found to be effective in externalizing their problems while emphasizing and reinforcing hopeful, positive stories.

**Empowerment**

Empowering clients is a central tenet of Narrative Therapy. Applying this to group treatment through the use of NGT offers significant advantages for those faced with issues of body image, struggles with intimacy, behaviors associated with ADHD and mental illness, and the results of trauma (Duba et al., 2010; Looyeh et al., 2012; Ricks et al., 2014; Robinson et al., 2015; Mohammadi et al., 2013, Lane et al., 2016). Oppression and low self-esteem are often associated with these issues, but can be overcome through the use of NGT.

Messages about body image and self-worth are prevalent in the media and leave many individuals experiencing oppression (Duba et al., 2010; Ricks et al., 2014). When these experiences are not addressed, severe pathology can result. Distorted body image and chronic mental illness are not uncommon and NGT can benefit these populations by empowering oppressed persons. Duba et al. (2010) found that “women have internalized the message that to be beautiful and attractive, one must also be youthful and slender” (p. 103). They outline various NGT techniques that “creates an environment of
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empowerment through the questioning of societal norms” (Duba et al., 2010, p. 109). The NGT process challenges oppressive belief systems, normalizes one’s experience, and encourages group members to identify healthier lifestyles that may fall outside of the negative societal norms that have been imposed throughout their lifetime. The group process allows for individuals to recognize that they are not alone and the narrative techniques encourage empowerment through re-writing one’s story. Participants engaged in artistic activities, mapping, and constructing alternative stories. Group members were also encouraged to participate in a Spreading the Word exercise and creating a Wisdom Manual. Spreading the Word is a process completed during the termination process of NGT. Participants share what they have learned about themselves and discuss techniques, tools, and tricks that worked for them through essays and art projects. All of the projects would then be collected and used to create a Wisdom Manual. The manual could be copied and given to each member for future reference as well as provided to new group members. Both techniques involve sharing information they have learned throughout the process of rewriting their story. This process fosters a sense of accomplishment and empowerment, as well as developing a united community (Duba et al., 2010).

Many individuals struggling with mental illness also report oppressive experiences, limiting how much they are willing to share with family, friends, or helping professionals due to a fear of what others might think (Ricks et al., 2014). Ricks et al. (2010) suggested a NGT approach identified various techniques to be used. Techniques included phototherapy, movies, music, memoirs, journaling, and scripts. These techniques are focused on listening, rather than solving the problem, which empowers participants to overcome stigma and oppression to rewrite their story as one in which their problem does not define who they are. Ricks et al. (2014) conducted NGT utilizing these techniques and found that “allowing clients to tell their story in their own words can be very empowering and revealing, and it allows clients to potentially gain a new perspective on who they are and where they have come from” (p. 107). These findings suggest that individuals who have experienced oppression may benefit from NGT by challenging personal and societal norms and beliefs.

Control and domination in relationships severely and negatively impacts couples’ intimacy, mental health, and communication (Mohammadi et al. (2013). Pre-test and post-test measures were taken utilizing the Couples Intimacy Questionnaire (CIQ), demonstrating the empowering effect NGT has on enhancing couple’s intimacy. Twenty couples participated in the study. Ten participated in the control group while the other ten participated in the experimental group. Comparing CIQ scores of the control and experimental groups, the study found a significant enhancement of couples’ intimacy, both emotional and communicative, for those participating in NGT. Mohammadi et al. (2013) concluded that NGT “empowers individuals against personal and social problems” (p. 1771), decreasing oppressive experiences and improving interpersonal and intrapersonal relationships.
Studies by Looyeh et al. (2012) and Robinson et al. (2015) found that individuals diagnosed with attention-deficit/hyperactivity disorder (ADHD) or experiencing symptoms of ADHD internalize messages of self-worth and aptitude. Children and adults with ADHD often experience comorbid mental health diagnoses, low self-esteem, and poor academic performance (Robinson et al., 2015). Narrative group therapy can be an effective platform to empower individuals with ADHD to challenge negative beliefs, reduce rates of comorbid diagnoses, increase self-esteem, and improve academic achievement.

Looyeh et al. (2012) completed a study to determine if NGT is an effective method to encourage girls diagnosed with ADHD to re-write their narrative from one in which they are to blame for their illness to one where they are in control of their behaviors and future. Fourteen girls, ages nine to eleven were included. Participants were divided into three groups. Two intervention groups included three and four girls each, and one control group of seven girls was utilized. Groups took place for 60 minutes, twice a week after school, and lasted for 12 sessions. Participants were not on medication throughout treatment, or for at least 30 days following the completion of the study. Teachers administered the CSI-4 behavioral ratings scale, once pre-test and twice post-test, at one week and thirty day intervals. To control for expectancy effects, teachers were unaware that treatment was taking place. Results found that “participants began to identify and remind each other of inappropriate behaviors and its consequences and offer solutions without prompting” (p. 409), suggesting that NGT was effective in empowering young girls with ADHD.

Post-test measures found a significant reduction in symptom scores at one week and thirty days for the intervention group while there was no significant change for the control group. In addition to behavior reduction, participants presented with improved self-understanding and self-esteem after the intervention.

Robinson et al. (2015) explored the long-term impact that ADHD has on women, including lower self-esteem, higher rates of divorce, and self-blame. To demonstrate the efficacy of NGT for women with ADHD, Robinson et al. (2015) conducted a study lasting 12 sessions. The semi-structured group included women ages 22 to 39 with self-reports of ADHD or a prior diagnosis of ADHD. Robinson et al. (2015) provided several case illustrations describing women who reported improved self-esteem after learning to “understand how cultural norms influence these stories, realize that stories can change, and help the group members construct strength-based stories” (p. 31).

Natural disasters can also leave individuals and communities left experiencing severe mental health symptoms, including PTSD, anxiety, depression, and sleep problems (Lane, Myers, Hill, & Lane, 2016). In response to a devastating earthquake impacting millions of people in Haiti, Lane et al. (2016) reviewed the impact of their NGT model that was used to decrease trauma symptoms. The model was a brief intervention, consisting of only six sessions and followed the novel Gold Stone. Participants would identify with a character in the story and learn to tell their story and how it relates to the character. Through the use of this model, individuals were able to tell their story, in
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chronological order, based on their life before, during, and after the trauma, and described what they wanted their future to look like (Lane et al., 2016). Results of the study, utilizing a pair-samples t-test and pre- and post-test questionnaires, indicated a significant reduction of trauma symptoms (Lane et al., 2016). Despite the significant impact that the earthquake had on so many people, NGT empowered participants to become the author of their own stories.

Discussion

Narrative therapy has been found to be effective in helping clients re-write their story and become the authority of their own life (Ricks et al., 2014). Group therapy is successful in creating a space for individuals to relate to others, develop social skills, and cultivate a sense of hope (Yalom & Leszcz, 2005). Although research is limited, the current review of the literature demonstrates the potential for combining these approaches. Of the sixteen articles reviewed, only five administered an empirically supported measure to determine efficacy of the NGT model. However, with all five r studies, NGT was found to significantly improve the lives of the clients as well as reduce symptomology (Looyeh et al., 2012; Looyeh et al., 2014; Mohammadi et al., 2013; Szabo et al., 2014, Lane et al., 2016). Half of the articles reviewed presented one or more case studies of participants who were involved in NGT. Through self-report and therapist observations, vignettes were offered in support of the usefulness of NGT (Baumgartner & Williams, 2014; Butera-Prinzi et al., 2014; Carrijo & Rasera, 2010; Clark, 2014; Ricks et al., 2014; Robinson et al., 2015; Yanos et al., 2011). The remaining three articles provided an overview of techniques that can be utilized within the NGT framework (Denborough et al., 2015; Duba et al., 2010, Mertz, 2014).

Whether facing difficult change or embracing new, healthy change, individuals experiencing loneliness and isolation can benefit from NGT (Baumgartner & Williams, 2014; Butera-Prinzi et al., 2014; Carrijo & Rasera, 2010; Mertz, 2014). Narrative group therapy is effective to externalize the problem when working with individuals to overcome stigma and substance abuse (Clark, 2014; Looyeh et al., 2014; Szabo et al., 2014; Yanos et al., 2011), among other disorders. Additionally, the literature supports the efficacy of NGT for empowering participants to overcome oppression and improve self-esteem (Duba et al., 2010; Looyeh et al., 2012; Mohammadi et al., 2013; Ricks et al., 2014; Robinson et al., 2015, Lane et al., 2016).

Participants identified throughout the research on NGT include a diverse group of individuals, spanning across the lifespan (from children to older adults), ethnicities, socioeconomic status, identified problems, and gender. The duration of groups was between one to one and a half hours. The length of groups varied. Half of the groups were either open or did not identify length, three lasted twelve sessions, one lasted six sessions, and one each consisted of eight, fourteen, and fifteen sessions. The majority of the research was based on individual participants in a group setting. However, one study was comprised of couples and another involved families in group therapy.
Limitations

While the current literature supports the efficacy of NGT, there are some limitations that need to be addressed. The research on NGT is limited as only 16 articles were found utilizing the methods discussed previously. Within the articles found, only five utilized outcome-based research. Anecdotal data and presentation of case studies are helpful in determining the need for NGT, but additional outcome-based research is needed to determine efficacy. Furthermore, larger sample sizes are needed for generalizability as the research discussed is limited by the small sample sizes used.

Although the research appears to be multiculturally inclusive across the studies, the majority of the articles discussed homogeneous groups within their studies. Also, no research was found to address cultural considerations for populations who may not be comfortable sharing their narrative among a group of strangers.

Implications for Counselors

Despite the aforementioned limitations, the benefits of NGT appear to be substantial for the counseling profession. The short-term nature of the groups identified allow for individuals to seek treatment without a long-term commitment (Lane et al., 2016). Group has been found to be at least as effective as individual counseling (Yalom & Lysaker, 2011) and the inclusive, empowering nature of narrative therapy (Baumgartner & Williams, 2014) make NGT an ideal option for working with a plethora of populations and disorders. The telling of one’s story, bearing witness to others’ stories, and developing a future narrative filled with hope are NT techniques that appear to be helpful by empowering individuals, instilling hope, and externalizing the problem.

Conclusion and Future Study

The contributions of this literature to the field are currently limited. With further empirical research, NGT appears to be a promising treatment modality for counselors working in a variety of settings. More research is needed to address individuals that may not be appropriate for NGT. Ricks et al. (2014) points out that “individuals who are struggling with severe self-esteem issues may not be willing to initially participate in narrative activities that put his or her story on display for others” (p. 108).

Benefits of NGT include its brief structure, multicultural sensitivity, and appropriateness across the lifespan and inclusivity of problems addressed. The ability to conduct a group within six to fifteen sessions with positive results provides for a promising approach to treatment. Although NGT may not be appropriate for all cultures, the emphasis it places on the client being the expert and author of their own story creates a safe space that is multiculturally sensitive and can be easily implemented (Baumgartner & Williams, 2014).

Considering the strengths and weaknesses, there is still a long way to go before NGT can be deemed an empirically supported treatment. More studies are needed that utilize pretest and posttest measures and account for extraneous variables. Measures used should be scrutinized for reliability and validity. Also, additional studies need to be conducted utilizing a closed group.
approach. Due to the timeline and constructing of one’s story, an open group may not be appropriate for NGT (Looyeh et al., 2012). Within the context of managed care, attention to length of treatment is also important. Fewer sessions make treatment more accessible to individuals faced with time and financial constraints.

Next steps for further research include replicating the current studies utilizing pre-test and post-test measures that offer high reliability and validity. Additional outcome based studies are also needed to expand upon the current literature. Increasing sample sizes and addressing the heterogeneity of groups will offer more generalizability of the results. Although the strengths of NGT are significant, these steps are necessary to address the weaknesses and determine efficacy of the approach.

References


Appendix A

The type of article, the summary of methodology, and the main theme identified were used to organize the articles reviewed in the current paper. Although multiple themes were found in each of the articles, only the most salient themes were identified in the table. Additional themes were discussed throughout the paper.

Table 1
Review of NGT Themes in the Literature

<table>
<thead>
<tr>
<th>Shortened Article Title</th>
<th>Type of Article</th>
<th>Summary of the Methodology</th>
<th>Theme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deconstructing the Mirror’s Reflection…</td>
<td>Review</td>
<td>Detailed a manual for group narrative therapy</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Treating social phobia in children through group narrative therapy</td>
<td>Study</td>
<td>The treatment group received fourteen 90-min sessions of narrative therapy twice a week</td>
<td>Externalization</td>
</tr>
<tr>
<td>Narrative Group Therapy for Alcohol Dependent Patients</td>
<td>Study</td>
<td>Pre- and Post-test using Hopelessness Scale (HS) and the Means-Ends Problem Solving Procedure (MEPS). Compared using t-test.</td>
<td>Externalization</td>
</tr>
<tr>
<td>Narrative Family Therapy and Group Work for Families…</td>
<td>Case study</td>
<td>Group work with a specific family over two years with intermittent interviews of each family member.</td>
<td>Reduced feeling of isolation</td>
</tr>
<tr>
<td>Becoming an insider: Narrative therapy groups…</td>
<td>Case study</td>
<td>Review of a group that had met over 120 times, averaging eight participants per week.</td>
<td>Reduced feeling of isolation</td>
</tr>
<tr>
<td>Narrative therapy integration…</td>
<td>Case study</td>
<td>Narrative Novel, letter letting go,</td>
<td>Externalization</td>
</tr>
<tr>
<td>My Story: The Use of Narrative Therapy…</td>
<td>Case study</td>
<td>Review of techniques</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Narrative Enhancement and Cognitive Therapy…</td>
<td>Case study</td>
<td>2 facilitators, 4-8 members, for 1 hour groups</td>
<td>Externalization</td>
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<tr>
<td>An Exploratory Study of the Effectiveness of Group Narrative Therapy…</td>
<td>Study</td>
<td>2 intervention groups via random assignment to NGT</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Study Title</td>
<td>Study Type</td>
<td>Description</td>
<td>Outcome</td>
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<td>----------------------------------------------------------------------------</td>
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<tr>
<td>Group Narrative Therapy for Women…</td>
<td>Study</td>
<td>12-session, semi-structured group intervention with clinical manual for women 22-39 with a formal diagnosis or self-diagnosis of ADHD</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Change in group psychotherapy…</td>
<td>Case Study</td>
<td>12 sessions, 1 1/2 hours, participation of 7</td>
<td>Reduced feeling of isolation</td>
</tr>
<tr>
<td>The Circle: A narrative group therapy approach.</td>
<td>Review</td>
<td>Group in residential center for teenagers.</td>
<td>Reduced feelings of isolation</td>
</tr>
<tr>
<td>PART FOUR: Narrative approaches to therapy, group work and community work.</td>
<td>Case Study</td>
<td>Case study</td>
<td>Externalization</td>
</tr>
<tr>
<td>Effect of Narrative Therapy on Enhancing of Couples Intimacy</td>
<td>Study</td>
<td>The method is semi experimental and control group pre-test and post-test was employed.</td>
<td>Empowerment</td>
</tr>
<tr>
<td>Utilizing narrative methodology in trauma treatment with Haitian earthquake survivors</td>
<td>Study</td>
<td>Paired samples t-test was performed.</td>
<td>Externalization</td>
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