# CURRICULUM WORKSHOP

Integrating Group Work into the Generalist Practice Curriculum

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GUIDELINES FOR GENERALIST/FOUNDATION CONTENT
Social Work Practice with Groups

CORE CONCEPTS & PRINCIPLES

Mutual aid orientation
1. Communities consist of mutually interdependent individuals and groups
2. Group is made up of multiple helping relationships
3. Members’ relationships with one another are primary source of growth and change
4. Advantages include:
   a. De-pathologizes, universalizes, and de-stigmatizes individuals’ struggles
   b. Empowers members
   c. Promotes social justice and social change
   d. Facilitates mutual acceptance and demand for work
   e. Recognizes diversity, difference, and individuality

Group as a social system
1. Includes norms, roles, and communication patterns
2. Individual behavior of members understood within the context of the group

Group types and purpose
1. Groups organized for different, sometimes overlapping, purposes reflecting member needs and agency and/or environmental context
2. May be preventative, remedial, supportive, organized for social change or a combination
3. Range includes educational and problem-solving to task and social action
4. Considerations regarding number and length of sessions, number of participants, open/closed membership, single/co-leadership reflect group purpose and type

Phases of group development
1. Individual and collective group behavior evolves over time as members develop comfort with one another
2. Worker’s tasks, skills, and responsibilities change over time in response to changes in group and individual behavior
3. Characteristics of collective and individual behavior in beginning, middle, and ending phase

Role of activity
1. May be necessary to facilitate the group’s development and accomplishment of members’ goals
2. May be means through which mutual aid and group purpose is accomplished, depending upon needs of members
3. Includes, but is not limited to, art, movement, games, drama, and music (i.e., techniques used as alternatives to or in conjunction with talking) and members engaging in collective action

Group worker’s role
1. Identify and foster members’ underlying commonality
2. Help members achieve their individual, group, and community goals through participation in group
3. Help group negotiate agency and community environment
4. Attend to and facilitate group process to promote and enhance the group’s work and mutual aid among members
5. Promote sociocultural safety between members and between members and the worker

Worker skill
- Preparation phase
  1. Contract with agency and/or community
  2. Use anticipatory empathy to identify common need of potential members and appropriate group purpose
3. Selection, screening, recruitment of members
4. Decide on number, frequency, and length of sessions
5. Locate space conducive to group’s purpose
6. Develop initial division of labor, if there are co-leaders
    • **Beginning phase**
      1. Clarifying purpose and role of group, members, and worker
      2. Clarifying expectations
      3. Dealing with issues of authority
      4. Establishing a culture for work
      5. Reaching for member feedback regarding group and individual goals
      6. Scanning/monitoring the group
      7. Pointing out connections between members
      8. Encouraging member-to-member communication
    • **Middle phase**
      1. Empathy, elaborating, clarification skills
      2. Sessional contracting and ending
      3. Connecting the individual to the group through reframing
      4. Monitoring group process and responding to members’ interactions with one another, the worker, and the environment, to enhance mutual aid
      5. Dealing with taboo subjects
      6. Demanding work
      7. Re-contracting with the group its purpose and norms, if needed
      8. Assisting the group to manage transitions (i.e., changes in membership)
      9. Addressing internal group obstacles to group’s purpose, growth, and change
      10. Use of self to promote mutual aid and collective action
    • **Ending and transitions phase**
      1. Assisting members to achieve closure in their relationships, including, as necessary, the individual ending with the group, members ending with each other, and the group ending with the worker
      2. Providing follow up and ongoing services to members as needed
      3. Assisting group to maintain a structure for future work, if needed

**TEACHING RESOURCES**

AASWG and joint AASWG/CSWE publications (see [www.aaswg.org](http://www.aaswg.org)):
1. AASWG. (1997). *Standards of social work practice with groups*
2. AASWG. (1997). *Bibliography on group work*

See appendices and material available at [www.aaswg.org](http://www.aaswg.org):
1. Sample course syllabi
2. Suggested readings and texts
3. Sample assignments
4. Learning activities
5. Teaching methods

**SUGGESTED FIELD ACTIVITIES**

Students should have the opportunity to:
1. Develop and, if possible, implement a proposal for a group work service that responds to client and/or community needs, including:
   a. Contract with agency
   b. Statement of group purpose and goals
   c. Recruitment of members
   d. Selection of space
   e. Decisions regarding session frequency, length, format, & number
Method of evaluating effectiveness

2. Facilitate or co-facilitate a group from preparation through ending phases
3. Record their group work practice
4. Process their group work practice in supervision
5. Process their group work practice with co-leader, if relevant
6. Monitor and evaluate the effectiveness of their group work practice

STUDENT COMPETENCIES

Upon completion of the generalist/foundation curriculum, students should understand the role of the social worker with groups and be able to:

1. Identify the legal, ethical, and value issues which are unique to working with groups
2. Trace the historical, institutional, philosophical and methodological roots of group work and its development as a distinct method of helping within the social work profession
3. Integrate and apply theory and research to their group work practice
4. Articulate the role of the group as a system of mutual aid for assisting individuals, groups, and communities in addressing personal and collective issues
5. Distinguish between and specify the appropriate use of different group types
6. Recognize how socio-cultural forces such as race, class, gender, and ethnicity, influence the group, its members, the worker, and her or his group work practice
7. Define and make appropriate use of activity to enhance mutual aid and the group’s work
8. Understand the concept of the group-as-a-whole and recognize the characteristics of group culture (i.e., norms and roles)
9. Identify phases of group development and characteristic group behavior
10. Assess group process, including role relationships and communication patterns, and its influence on member interactions and the group’s ability to engage in mutual aid
11. Adopt a simultaneous focus on the individual and the group-as-a-whole and the group and its environment
12. Specify practice skills in the preparation, beginning, middle, and ending phases of group
13. Evaluate the effectiveness of group work intervention
Schedule of Readings

NOTE: Journal articles are available electronically using Academic Search Full Text Elite through EBSCO Host. To access EBSCO Host off-campus, go to the A.O.K. Library’s Homepage, click on MdUSA, and follow the instructions. You will need your barcode from your UMBC I.D. card to do this off-campus.

I. Review: Core Skills of Social Work Practice
   Shulman, Chapters 2, 3, 4, & 5
   Sheafor, Horejsi, and Horejsi, Chapter 14

II. Macro-level Practice
   Shulman, Chapters 18, 19, & 20
   For discussion in small groups:
   - Locality/Community Development
   - Community Organizing for Organizational Change
   - Social Planning

III. Social Work Practice with Groups
   Shulman, Chapters 8 through 15
   For discussion in small groups:

IV. Social Work Practice with Families
   Janzen & Harris, Chapters 1-5, 10

TEXTS:

There are five papers required for this course. The requirements for each are attached. All papers will be graded on content and quality of writing. Students are advised to pay close attention to my academic policies and expectations. Papers that are poorly written will be returned ungraded. All assignments are to be turned in when due unless the student has discussed an extension with me and received my permission in advance.

Classroom attendance is critical to your learning in this class. Excessive absences will result in the final grade being lowered, using the following scale: 3 absences, 5 points deducted from final grade; 4-5 absences,
10 points deducted; 6-7 absences, 15 points deducted; 8-9 absences, 20 points deducted. If a student misses 10 or more classes, she or he will not pass the course with a C. If unexpected circumstances such as illness result in excessive absences, it is the student’s responsibility to talk with me about what options, if any, are available.

Due Dates for Papers

- Macro-level intervention: Tuesday February 25, 10 points
- Group Proposal: Tuesday April 1, 25 points
- Small group analysis: Thursday May 1, 20 points
- Family analysis: Tuesday May 13, 20 points
- Professional self-assessment: Friday May 17th by noon, 20 points
- Attendance at small group meetings: 5 points
CORE CONTENT ON GROUP WORK
SEPARATE APPROACH:
CLIENT SYSTEM AS UNIT OF STUDY

SPRING SEMESTER: SOCIAL WORK PRACTICE WITH GROUPS, FAMILIES, AND COMMUNITIES

UNIT II: SOCIAL WORK PRACTICE WITH GROUPS

Definition of Group  
first week
• Member growth and change, enhance social functioning
• Sustained interaction between individuals that is characterized by norms, roles

Mutual Aid Orientation  
first week
• Members give and receive assistance
• *Group* is primary source of assistance
• Multiple helping relationships

Role of the Group Worker  
first week
• Facilitate the process of mutual aid
• Helping members see their commonality and achieve the goals they have set for themselves
• Use of co-leaders
  • students as co-leaders
  • advantages/disadvantages

Advantages of Group  
first week, second week
• Empowering
• “What is it about being with others that is so helpful?”
• Particular emphasis on those that are unique to group work and reflect the mutual aid conceptualization
  • all-in-the-same-boat
  • mutual support and demand
  • dialectical process
  • developing universal perspective
  • altruism

Advantages (cont’d)
• instillation of hope
• experience of intimacy
• power in numbers
• interpersonal learning
Multicultural sensitivity  

- Sociocultural safety
- Group has potential to be empowering, particularly for disenfranchised clients, and to promote multicultural understanding
- Group also has potential to recreate and reinforce power inequities that exist outside its boundaries

Group Types  

- Overall purpose is to achieve mutual aid, but groups organized for different purposes
- Groups in which focus primarily is on members, themselves
  - psychoeducational
  - support
  - therapy
- Groups in which focus primarily is on target/problem external to group members
  - social action
  - task/work
- These are ideal types
- Most groups have elements of two or more

Implications of Group Type  

- Mutual aid manifested differently
- Group structure will differ
- Leader’s role differs

Role of activity  

- Means through which mutual aid accomplished
- May be essential for some types of clients
- When activity is the goal, then must question: Is this social work practice with groups?

Group formation/Preliminary phase  

- Agency context of practice
  - challenges associated with groups in residential settings
- Identifying common need and how group would address
- Using social work skills to anticipate, understand, manage agency resistance
- Selection/screening of members
  - Considerations related to individual member and to group as a whole
- Implications when no screening/ open membership
- Tuning in to worker’s and prospective members’ feelings about group

Practice Skills: Beginnings  

- Explanation of role and purpose, leader’s role
- Asking for feedback
• Group rules
• Use of empathy and clarification skills to help members see commonality, reach out to one another
• Dealing with taboo subjects, if necessary
• Problem-swapping

**Practice Skills: Middle Phase**  
**fifth & sixth weeks**  
• Empathy, elaborating, clarification skills  
• Sessional contracting and ending  
• Connecting individual to group  
• Monitoring process  
• Dealing with taboo subjects  
• Use of self  
• Demand for work

**Group as Client**  
**sixth & seventh weeks**  
• Whole is more than the sum of its parts  
• Stages of development  
• Norms  
• Roles  
• Implications for what worker does  
• Worker must assess whether members’ interactions with one another are fostering, hindering process of mutual aid

**Practice Skills: Endings**  
**seventh week**  
• Assisting members to end with one another and with leader  
• Pointing out feelings  
• Help members see the gains they have made  
• Help members honestly assess how they have worked together  
• Endings in open-ended groups
GROUP NORMS

All human groups have a culture consisting of shared values and norms. In social work groups, norms are standards of behavior that all members are expected to follow. They are not necessary explicitly stated (like rules) and are not imposed on the group by the facilitator or external authority.

Norms reflect group values; for example, the norm of making group decisions by consensus reflects somewhat different values than the norm of "majority rules."

Norms determine the way in which groups solve problems, make decisions, and do their work. They influence interactions between members and between the group and the facilitator.

Norms define the parameters for acceptable behavior within the group and provide a sense of predictability in-group life (a norm that members will not verbally attack or threaten each other provides a sense of safety).

Group norms tend to cluster around the following types of activity:

**Participation**

For example: norms determine whether or not quiet members are encouraged to talk, whether monopolizers are tolerated, whether there is a value placed on only one person talking at a time, and whether members are expected to let someone know if they can't attend.

**Decision-making**

For example: norms govern whether decisions are made by consensus, by voting, by whoever shouts the loudest, or by everyone going along with what task leader suggests.

**Mutual aid**

Group norms may encourage development of mutual aid and support, or they may discourage this development.

**Affective expression**

Norms may encourage or discourage members expressing feelings about the group; this kind of expression may even be taboo.

From: New England Colloquium on Strengthening Group Work Content in Foundation Practice
GROUP ROLES

Groups are complex systems, which require a division of labor to insure that vital group functions take place. This is accomplished through group roles, defined as shared expectations about the function and behavior of individuals in the group.

Role assignments are frequently determined in subtle ways, based on a combination of individual and group characteristics. Healthy group process is characterized by dynamic role assignments, group members may occupy different roles at different points in time. Maladaptive group process is characterized by role stereotyping; members become locked into static or fixed role assignments.

There are many different roles that can emerge in a group, all of which serve some purpose for the group as a whole. A number of frameworks have been proposed for classifying group roles. The following classification system integrates several of these and lists some of the more common group roles. Note that few of these roles are mutually exclusive.

**TASK ORIENTED ROLES**

- Task Leader
- Initiator
- Doer
- Information Seeker
- Information Giver
- Clarifer
- Consensus Seeker
- Summarizer
- Recorder

**CONTEXTUALIZED ROLES**

- (these are roles, which can serve to promote or obstruct group development, depending on their context)
- Scapegoat
- Shy One
- Isolate
- Clown
- Monopolizer
- Rival
- Recognition Seeker
- Obstructor

**MAINTENANCE ORIENTED ROLES**

- Socio-Emotional Leader
- Harmonizer
- Supporter
- Gate Keeper
- Encourager
- Compromiser
- Observer
- Historian

**Stage I. Pre-Affiliation**

*Phase of Work*
- Preliminary and beginning

*Character of Group System*
- Non-existent
- Source of stress
- Work of group unknown
- Rules of behavior individually rather than collectively defined

*Character of Individual Member Behavior*
- Unable to see connection with others
- Feelings of isolation
- Mistrust of worker and members
- Approach-avoidance
- Indirect communication

*Member and Collective Tasks*
- Developing an understanding of work of group and connection between their need and agency service
- Establish a division of labor
- Establish a structure for work

*Tasks/Skills of the Social Worker*
- Clarify role and purpose and arrive at working contract with members
- Provide initial structure
- Clarify link between client need and agency service
- Partialize client need
- Reach for feedback
- Tune in and respond directly to indirect messages
- Point out commonalities between members
Tasks and Skills of the Social Worker Across Stages of Group Development (cont’d)

Stage II. Power and Control

Phase of Work
- Initial work phase: Pre-intimacy

Character of Group System
- Primary concern with power and control
- Power struggles between members and between members and worker
- Danger of dropout high
- Few norms established yet
- Struggle/confusion over affective and instrumental tasks

Character of Individual Member Behavior
- Members slowly drawn into group
- Ambivalence high
- Criticism of worker and group high; confidence in worker low
- Perceived risk of involvement high
- Status differentials important

Member and Collective Tasks
- To develop into a mutual aid system
- To “resolve” relationship with worker enough to move on
- Develop a structure for work

Tasks/Skills of the Social Worker
- Help group develop into a mutual aid system
- Help members develop a structure for work
- Acknowledge challenge to her or his authority so work can go forward
- Maintain balance between affective and instrumental tasks
- Encourage discussion of taboo subjects and difficult feelings
- Point out obstacles to mutual aid
- Point out common ground
Tasks and Skills of the Social Worker Across Stages of Group Development (cont’d)

Stage III. Intimacy

Phase of Work
• Middle work phase

Character of Group System
• Group seen as more satisfying
• Increase in member to member intimacy
• Consensus important
• Cohesion increases
• Mutual revelation
• Shared goal orientation

Character of Individual Member Behavior
• Increase in personal involvement and investment
• Increase in listening and member support
• Members are protective of group, guard against intrusion
• Transference

Member and Collective Tasks
• Use sense of cohesiveness for further work
• Begin to satisfy individual need
• Invest in group and increase use of each other

Task/Skills of the Social Worker
• Help members balance self-revelations and need for privacy
• Increase demand for work
• Partialize problems
• Note recurring themes
• Point out connections between general and specific
• Encourage direct member to member communication
• Translate individual problem into group concern
Tasks and Skills of the Social Worker Across Stages of Group Development (cont’d)

Stage IV. Differentiation

Phase of Work
- End of work phase

Character of Group System
- Group as a whole most mature, productive, and most cohesive
- Difference tolerated
- Norms for work well-established

Character of Individual Member Behavior
- Interdependence highest
- Relationship strongest between members and between members and the worker
- Differentiation occurs
- Free expression among members
- Members accepted for who they are

Member and Collective Tasks
- Build on intimacy to allow differentiation and uniqueness of individuals
- Use group as end is in sight

Tasks/Skills of the Social Worker
- Same as in previous stage
- Use connection between specific to general so that gains can be applied to future situations
- In light of coming to end, clarify needs, gains, and remaining work
- Reinforce strengths and ways of working
Tasks and Skills of the Social Worker Across Stages of Group Development (cont’d)

**Stage V. Separation**

**Phase of Work**
- Transitions and endings

**Character of Group System**
- All processes affected by impending demise of group
- Regression and denial
- Loss and sadness

**Character of Individual Member Behavior**
- Begin to move apart
- Approach-avoidance pattern resurfaces
- Feelings of loss stimulate “old” feelings

**Member and Collective Tasks**
- Evaluate work
- Define remaining work
- Dissolve ties without dissolving what group has meant

**Tasks/Skills of the Social Worker**
- Evaluate work
- Define remaining tasks
- Help group complete work and let go
- Focus on affective and instrumental aspects of ending
- Use self authentically and appropriately to help members achieve closure
GROUP PROPOSAL

You are to prepare a detailed written plan for a group work intervention that is realistic and relevant for your setting and that has theoretical and empirical support. This proposal may describe a group that you actually developed or would like to develop, or it may reflect modifications to a group with which you are already involved. In justifying your proposal, you must cite and discuss three professional sources, one of which should describe original research (if such research is available). If your proposal builds on or reflects a group already in existence in your agency, discuss the current group and how and why your proposal differs. Your proposal also must address the following considerations:

1. **Purpose/focus of the group**
   What is it that your group will be about and do? Specifically discuss how the group is relevant to your setting and the client needs that will be met through the group.

2. **Contract with the agency**
   Discuss how you would involve colleagues and mobilize needed support. Identify potential obstacles and discuss strategies to deal with them. Are there specific issues (such as confidentiality) that must be negotiated and worked out ahead of time with members of the staff? Is this proposal likely to be carried out, why or why not?

3. **Group composition**
   Who are the prospective group members? How will members be recruited/selected? Identify criteria that would be utilized to distinguish appropriate from inappropriate candidates for the group.

4. **Group time frame**
   When, how long, and for how many sessions (if time-limited) will your group meet? Explain the rationale for these decisions.

5. **Group structure/type**
   What will be the format of the group? What are the expectations for participation that you think should exist in your group? Explain your rationale for these decisions.

6. **Group leadership**
   Would you lead this group alone or with someone else? Discuss what you believe your primary functions and tasks should be. If there will be a co-leader, discuss issues associated with this.

7. **Tuning in**
   What do you think members will be thinking and feeling as they contemplate coming to the first group? How would you plan to address these feelings and reactions? What would your feelings be as you prepared to lead the group?

8. **The first session**
   How do you plan to orient members to the purpose of the group? How do you plan to address members' anxieties (if any) about starting the group? How will group norms and your role be explained? How do you plan to begin to establish a sense of "we-ness"? As appropriate, you should supply the actual statements you might make regarding these issues.

9. **Potential obstacles**
   What are possible obstacles (other than those discussed in the second section) to either convening the group or assisting the group in achieving its goals. How might such obstacles be addressed?

10. **Evaluation**
    Briefly identify and discuss how you would implement an evaluation strategy that would help you determine the effectiveness of your group. This could include some form of a member satisfaction survey and/or an assessment of individual members’ progress during the group.
Dr. Carolyn Knight

Analysis of Group Session

For this assignment, you are to prepare an analysis of a group with which you are working. The first section of the paper should be a brief summary of the group. This should include information on purpose, composition, time frame, leadership, and structure. A very brief description (i.e., several sentences) of each member should be provided. The second section should be a summary of the group's work and progress to this point.

The third section should be a detailed analysis of one recent session of the group. Included here should be:

1. Group members present (including seating arrangements and arrows to indicate communication flow)

2. Member roles
   Identify significant roles played by members and the function that is served.

3. Communication patterns
   Identify important content and process communications in the group. What was the group working on this session?

4. Group norms
   Identify group norms that were in operation during the session. Are these consistent with or in contradiction to the stated norms of the group?

5. Level of group cohesion/mutual aid apparent in the session.
   Identify indicators of this.

6. Critique of your/co-leader's actions
   Identify significant actions that you/your co-leader took and comments that you/your co-leader made. What was your rationale? Were these appropriate/inappropriate? Did you pick up on and respond to significant communications? Did your and your co-leader's actions complement or contradict one another? Where do you go from here with this group?

The fourth section of your paper should be an assessment and discussion of how the session you have described differs from or is consistent with the overall way the group has worked so far.

In the fifth section, you should discuss how this group differs from or is consistent with similar groups described in the theoretical and empirical literature. You should cite and discuss three professional sources, one of which should describe original research (if available). You also should identify what changes, if any, you would make in this group in light of what you have learned from the literature.

In the sixth section, you should identify and describe an evaluation strategy that could be used to determine the effectiveness of your group. This could include some form of a member satisfaction survey and/or an assessment of individual members’ progress during the group.
ANALYSIS OF DISCUSSION GROUPS

This paper is based on small groups in which all students will participate. The purpose of these groups is three-fold. First, students will discuss specific topics and cases related to course material. A second purpose is to encourage students to give and receive constructive feedback from their peers. The final purpose is to give all students the opportunity to critically reflect on and analyze a group experience in which they have been participants. It is this purpose that is the basis of the paper assignment.

I will assign students to groups. Each group will be required to find a convenient place to meet. Class time will be given for meetings, but students also may have to find a time to meet outside of class. Students will meet approximately six times during the semester.

There will not be any assigned leaders. There are few requirements other than students must come to each of their group sessions prepared to participate in the discussion.

For the paper, each student should develop an assessment of the small group of which she or he was a member. Here, I am less concerned with your personal feelings about your group, although you may feel free to share them with me. What I am looking for is an objective analysis of the group, including:

- stages of the group’s development
- extent to which changes in membership affected the group’s development and its ability to do its work
- nature of the group’s work: the assignments only? personal and/or professional concerns of the members? both?
  - the extent to which the group was able to do its work
  - factors that facilitated and/or hindered the group in this process
- role behaviors, including yours
- norms
- significant dynamics and themes
- significant communication patterns

If there were problems in your group (for example, a student repeatedly misses group sessions), I am not looking for you to “name names” or “tell” on your peers, in this paper. What I am looking for is your analysis of how the problem manifested itself in the way the group members worked together, the group’s norms, etc. If there are problems that are really disruptive to the group and members’ learning, I hope group members will let me know during the time their group is meeting.

Your grade is based upon your analysis of your group’s functioning. It is not based on what the group discussed or your own contributions to the discussion. Therefore, I am not looking for a description of the content of your group sessions. What I am looking for is your assessment of your group’s process and your ability to understand and analyze it.

Maximum length is six pages.
Group Record

Meeting Date:  Meeting location:  Session #:

Members present:

Seating arrangements:

CONTENT: what was discussed

PROCESS: how was it discussed

stage of group’s development

role behaviors

communication patterns

group norms

underlying themes

WORKER’S REACTIONS:
As you think back to all that you have learned in the classroom and in your field placement so far, what would you consider to be the skills, knowledge, and theoretical frameworks that are most critical and important in your work as a generalist social worker? Another way to approach this is to consider the following: If you had to identify for the junior social work majors the most important things they need to consider/realize as they begin their field placement, what would these be?

I would suggest that you organize your discussion around the following general themes:

- **The organizational context of practice**
  - Working within and around the constraints placed on practice
  - Working with other professionals and other disciplines
  - Managing time and establishing priorities

- **Engaging the client**
  - Preparatory empathy
  - The client’s social reality/dealing with differences
  - Clear sense of role and purpose

- **Assessment and contracting**
  - They are both processes and products

- **Middle/work phase**
  - “When you help clients manage their feelings, you help them manage their problems and when you help them manage their problems you help them manage their feelings”
  - Demand for work
  - Recontracting
  - Empathy and the purposeful expression of feelings
  - Elaborating skills
  - Barriers to work within clients and/or their environment
  - Networking and the broker role

- **Ending phase**
  - Reality versus textbook
  - The worker’s feelings about ending

- **Use of self/the worker’s genuineness**

For my information, I would like one member of each group to summarize the discussion and email it to me or give it to me in the next class. It can be in outline form and is not going to be graded or evaluated in any way.
Small Group Discussion Questions for Articles

Cohen, Cohen & Phillips, and Marder & Linsk articles on macro-level practice

- Each of these articles describes a very different approach to macro-level intervention
  - Marcia Cohen discusses problems she encountered mobilizing and organizing clients to effect organizational change
  - Cohen and Phillips describe an approach that includes locality or community development, where there is an emphasis on improving the quality of life in a community
  - Marder and Linsk present a social planning approach to increasing the number of residential options for individuals living with AIDS that includes a needs assessment, identifying and mobilizing support (including financial), and developing, implementing, and evaluating an intervention
- Compare and contrast these three approaches in terms of their relevance for your practice setting
- With which, if any, of these approaches would you yourself feel most comfortable
- Is it realistic to think you can engage in macro-level practice AND be a direct service provider?
- What do you think about Cohen’s discussion of the problems she encountered trying to mobilize disenfranchised, oppressed clients?
- It could be argued that Cohen and Phillips’ discussion of Phipps Houses is somewhat unrealistic
- That is, their intervention could not be implemented on any sort of large scale.
- What do you think about this? Does their approach have relevance for public housing projects?

Greif, Shilling & El-Bassel, and Timmer articles on group work

(Geoff Greif is Associate Dean of the School of Social Work, UMB, and he is describing a group he facilitated in the Baltimore City Public Schools)

- What types of groups are being described (remember, you can’t always rely on the label provided by authors, since there is no one good system of categorizing groups)
- Compare and contrast the group work approaches
- How is mutual aid manifested (or supposed to be manifested, if you don’t think it is)
- Do the group type and group structure (including number of sessions, membership issues, use of agenda, etc.) seem appropriate for the clients who are served
- Do any (or all) of these groups have relevance for the clients served by your agency or clients you anticipate working with in the future
- Would you make any changes in the way you would run these groups if you were the group leader
- What do you think about Grief’s discussion of dealing with racial differences?
- Timmer acknowledges he learned from his mistakes: too wide of an age range, too little structure, infrequent meetings, etc.
  - If you were going to facilitate a group for this population, what would YOU do
- What do you think about Timmer’s distinction between the leader’s role of facilitating “support” and providing “therapy”
Your friend and colleague, the director of a small, private, non-profit agency, calls and asks if you would be interested in doing a staff intervention at the agency. The agency had been providing services to a female client who was recently murdered by her husband. Your friend tells you that a number of members of her staff have been deeply affected by this tragedy. You and she agree that a short-term group intervention would be most appropriate and helpful.

You are the social worker in an inner city middle school. A number of the students whom you see have been referred to you for behavior problems, typically aggressive, hostile behavior in the classroom. You decide that you would like to start a group for these children, since you realize how similar their problems are (family instability and violence, drugs, and poverty). You have the support of the principal, and she allows you to remove children from class to participate in the group.

You are the social worker in a private non-private agency providing services to adults who are developmentally disabled and their families. The county in which the agency is located is planning to cut its contribution to your agency’s budget. This will result in a reduction of services to your clients and eliminate entirely services to their families. A number of your clients’ families have expressed concern and anger over this situation. Your agency director encourages you to provide a group intervention.

You work in a non-profit agency that provides comprehensive services to people with AIDS. You decide you would like to facilitate a group for caregivers who have recently lost their loved one to the disease, since your agency has never provided any services to these individuals once their loved one has died.

You work on a short-term admissions unit of an inpatient psychiatric facility. You have been asked to take over the daily ward meeting, since the previous leader is leaving the agency. All residents on the unit must attend the one and one-half hour meeting. The group has never had a clear focus. However, you understand that in the past the group has focused on members’ discharge plans (the average length of stay is 5 days), resolving member conflicts that stem from living together, and addiction (on average, 75- 80% of the patients have substance abuse problems).

You work in the neonatal intensive care unit of an inner city hospital. The majority of the parents of the newborns are unwed teenage mothers. While the mothers are typically discharged within two days, their babies stay in the unit for an average of six weeks. The mothers (and fathers) are encouraged to spend as much time as possible with their newborns. You have observed that most of the moms and a few of the dads do visit frequently. In general, the parents seem afraid of and overwhelmed by their newborns, and you believe that a group intervention of some sort would be helpful to them.

**Discussion Questions**

For each scenario:
- What type of group work service would be appropriate to respond to potential members’ needs?
- How would you characterize the role of the worker?
- How would you structure the group in terms of session length, number of sessions, use of an agenda, number of members, etc.?
- As a result of tuning in, what do you anticipate members’ thoughts and feelings would be about beginning the group? What would you do to address these? What would your feelings be about starting the group?
Beginnings in Groups

You have been called in to provide a two-session (90 minutes per session) debriefing for professional staff of a small non-profit family service agency. The agency had been providing services to a female client who recently was murdered by her husband. The agency director felt that this intervention was necessary, since her staff have been deeply affected by this tragedy. The sessions are open to all members of the staff (16 individuals). Staff will be “strongly encouraged”, but not required to attend. You will conduct these sessions over the next two weeks. When you arrive at the agency, 10 individuals are in attendance: 7 social workers (including the two who had the most involvement with the case), 2 case managers (one of whom was directly involved with the case), and 1 administrative assistant.

You are the social worker in an inner city middle school. A number of the students whom you see have been referred to you for behavior problems, typically aggressive, hostile behavior in the classroom. You decide that you would like to start a group for these children, since you realize how similar their problems are (family instability and violence, drugs, and poverty). You get permission from the principal to offer a group during one class period, for fifty minutes, for ten weeks. You recruit 9 students, 5 girls and 4 boys, ages 12-15, all of whom are less than enthusiastic about the group (but they do get out of class). The racial composition of the group is: 4 African-American students, 2 white students, 2 Hispanic students, and 1 Native-American student.

You are the social worker in a private non-profit agency providing services to adults who are developmentally disabled and their families. The county in which the agency is located is planning to cut its contribution to your agency’s budget. This will result in a reduction of services to your clients and eliminate entirely services to their families. A number of your clients’ families have expressed concern and anger over this situation. With the permission of your agency director, you arrange a meeting of interested individuals with the goal of organizing them to protest the budget cut. Twenty-five people, representing 16 families, attend the meeting.

You work in a non-profit agency that provides comprehensive services to people with AIDS. You decide you would like to facilitate a group for caregivers who have recently lost their loved one to the disease, since your agency has never provided any supportive services to these individuals once their loved one has died. You call eight individuals whom you have had contact with and who you think would be interested in the group. All are, and you plan to run a 12 week (90 minutes per week) group. In the group you will have three mothers who lost adult children (two of whom were gay), one couple who lost an adult child (a drug addict), two adult siblings of drug addicts, and two gay men who lost their partners.

You work on a short-term admissions unit of an inpatient psychiatric facility. Each day you conduct a one hour group for all residents of your unit. The primary topic of conversation is members’ discharge plans, but a secondary focus is helping members resolve any disagreements which stem from their on-going interactions on the unit. Attendance is mandatory. There will be anywhere from 8 to 16 people in attendance in a given session, and typically members attend only once or twice before being discharged. There is always a mix of age, gender, and diagnosis, but the typical patient is a dually-diagnosed male in his twenties.
BEGINNINGS IN GROUPS

Dr. Carolyn Knight

Discussion Questions

The five scenarios are variations on the ones I already have given you. You should put yourselves in the role of the worker. The focus of your small group discussion should be how you would go about getting started with each of the groups.

You should address the following questions through brief role playing. It is up to each group how to do this, but I would recommend that each member of the group have the opportunity to play the role of group leader (or co-leader) for at least one of these questions.

*How would you explain your role?*
This is similar to the skill used in your individual work with clients.

*How would you explain the role and purpose of your group?*
This also is similar to the skill of explaining purpose in your individual work with clients. Note: In groups where there are involuntary members, just as in individual work, you need to acknowledge members’ resistance.

*How would you handle introductions?*
A standard technique is known as the “problem swap”. With this, each member is invited to introduce her or himself and tell why she or he is there, and share with others anything else they wish to about themselves. When I do this with adult survivors, I ask them to tell us about their abuse, problems they may be having, and what they would like to get out of the group. They are encouraged to reveal as much as they are comfortable saying. Many actually do reveal quite a lot. In the children’s group, members are encouraged to say who they lost, when the loss occurred, and what their loved one died from. They also are asked to tell what grade they are in, schools they attend, sports and musical groups they like, etc. With the problem swap, the worker has the chance to begin to point out commonalities and connect members to one another. Obviously, what members are asked to “swap” depends upon the purpose of the group.

*What “rules” do you think would be necessary and appropriate to help the group do its work and how would you explain these to members? Would you encourage members to identify some (or all) rules of their own or would you establish these ahead of time?*
The rules of the group should support its work. Typically rules deal with member contact outside of group, confidentiality, absences, leaving the group, and member interactions in the group (no interrupting, no one speaks for others, how anger can be expressed, etc.)
The Individual in the Group

Dr. Carolyn Knight

It is the sixth week of your support group for caregivers who lost their loved one to AIDS. During the last three sessions, you have noticed that Jack, whose sibling died from AIDS, has been demanding more and more of the group’s attention. He engages in lengthy descriptions and discussions of his feelings about and reactions to his brother’s death, and rarely lets others speak. When others are talking, he frequently interrupts and turns the focus back on himself. You have also noticed that other members appear to be getting uncomfortable and out of patience with Jack, although no one has said anything to him directly. Jack seems unaware of other members’ reactions. So far, you have tried subtle ways of managing this dynamic: reminding everyone that no one interrupts when someone is talking; helping other members to speak up in group; and limiting Jack’s disclosures. These interventions have not made any difference. In fact, you sense that the group’s resentment is getting stronger.

You have had your first meeting with interested family members of your developmentally disabled clients. There seems to be a core group of 15 who will be active participants. Others have said they will help out with any actions the group decides to undertake. At your suggestion, a chairperson, a vice chair, and a secretary were selected. Those in attendance agreed that they needed to meet several more times to work out a strategy to protest the budget cuts and to generate community support for their cause. You agree to attend these meetings as a consultant and facilitator. Three more meetings are scheduled over the next month. Other meetings may be required. The final budget hearing is in seven weeks.

You are concerned about the impact on the group of one individual, Sylvia, whose daughter is a client of your program. Sylvia was outspoken throughout the entire first meeting, suggesting one strategy after another and minimizing the ideas of others. She frequently stated that her “successful marketing career” made her an “expert” in dealing with “people in power”. You sensed that some individuals were intimidated by Sylvia, while others were exasperated and turned off. Sylvia volunteered to be chair. However, another individual, with much more time available, ultimately took on this responsibility. Sylvia made it clear that she feels an obligation to attend all meetings, since, unlike others in the group, she “has had experience with this kind of thing before”.

In your group meeting on the unit, you have 12 people in attendance. The group meets for 90 minutes. Most are in for an acute depressive episode and almost all have a dual diagnosis. At this meeting, patients range in age from 22 to 48, and there are eight men and four women. Two individuals are new to this group, having just come on the ward. The others have attended this group together for the last three sessions. Three other patients were just discharged. Discussion is focused on “getting out” and some members’ fears about staying clean (several other patients in the group minimize or deny a problem with substance abuse). Alex, 32, spends a good bit of time in this session ridiculing other members, particularly Adam, 48. Alex is very high-functioning and had a psychotic episode, during which he ran in front of a car, as a result of cocaine and alcohol intoxication. This is his first admission. Adam has had a number of prior admissions, all as a result of suicidal ideation; he is withdrawn and speaks hesitantly and slowly, with a slight lisp. Members’ response to Alex’s actions has been laughter and joking.

Discussion Questions:
What roles are Jack, Sylvia, Alex, and Adam playing in these groups?
Why do these roles exist in these groups?
If you were the worker, how would you handle these situations?