

INTEGRATIVE PAPER

Kathy E. Salazar

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Professor Anderson Yoon

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INTRODUCTION

For this integrative paper, I will be using a program evaluation I completed during my research evaluation class, on the need to implement a support group for single mothers, victims of domestic violence at Voces Latinas where I'm currently interning. The need to create a support group at this agency, lies on the lack of emotional support and parenting skills training, mothers received after they decide to move away from a toxic relationship, where they are so codependent on their aggressor to provide shelter, financial stability and remained in an abusive relationship because of their children. Also abused mothers feel as failures to their families and society. By providing counseling to them I learned about their needs and mental health issues associated with the stress and anxiety that is caused by having to move out of the relationship, going into a shelter, not having family support, parenting skills, or employment due to their legal status and the responsibility that comes with being a single mother. The women I worked with, have shared their hopelessness and fears to lose their children due to ACS involvement or having conflict on how to raise their children alone, or not knowing if they one day will be deported. These mothers feel like there is not enough support for them to cope with their emotions and feelings and therefore they become depressed, anxious, and suicidal due to the lack of guidance and hope.

Key Concepts for Cognitive Behavioral Therapy:

By implementing a support group at Voces Latinas, these women will receive coping skills through cognitive behavioral therapy to help clients resolve the target problems of reducing anxiety and tension, and to improve daily functioning as mothers. As known, Cognitive Behavioral Therapy is a form of therapy that looks to identify and help change potentially self-destructive or unhealthy behaviors. Corey (2015), indicate that Cognitive Behavioral Therapy

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relies on principles and procedures of the scientific method and these principles of learning are applied to help people change these destructive and unhealthy behaviors. CBT focuses mainly on thought patterns as responsible for negative emotional and behavioral patterns. The key to Cognitive Behavioral Therapy being use in this support group will be for these women to learn better ways of coping with their stressors, thereby releasing their symptoms and becoming more effective in their lives. According to Corey, 2015, Pg.349, “the most unique aspect of CBT with groups is the specific goals of change. A CBT approach to group therapy focuses more concretely on specific target areas of change than any other modality.

Another approach that can be effective in this support group, is using a person-centered approach. This approach will help clients build trust and will help them move forward if conditions fostering growth are present. Rogers (1986b) made it clear that the person-centered approach rests on basic trust in humans beings’ tendency to realize their full potential. As mentioned in Chapter ten, in the person-center approach to groups, clients have capacities for self-understanding and constructive change. For a group to move forward, it must develop an accepting and trusting atmosphere by which members can show the aspects of themselves that they usually conceal and move into new behaviors (Corey, 2015). It is important for the therapist, to help members to move from lacking trust and being somewhat closed and fearful in interpersonal relationships to being more open and expressive with others. As therapists using this approach, we must be empathetic, congruent, and have unconditional positive regard if we want the group to move into actualization.

Role as a group counselor:

When using CBT techniques as a group leader in this women’s support group, I will encourage clients to learn how to modify behaviors and to change their automatic thoughts so

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they can practice new behaviors. According to Corey (2015), group leaders are expected to assume active, directive, and supportive role in the group and apply their knowledge of behavioral skills and principles to the resolution of the problem. As I work with victims of domestic violence, as a leader, I must be a good listener, I need to build a good therapeutic relationship, and most importantly I have to gain client's trust so they can open up and feel in a safe place where they can be free of judgement. Also allowing them to share their stories and validating their emotions will be important for them to feel heard. At the beginning of the group, I want to use motivational interviewing using open-ended questions to understand the client's own motivations, know what they expect to get out of the session and as their therapist I want to listen with empathy and empower clients to feel free to share their problems and be themselves. Members are usually challenged to struggle and express themselves, and out of this struggle, they have a basis for learning how to trust themselves (Corey, 2015)

Key developmental tasks and therapeutic goals:

(Corey ,2015), states that the identification of goals determines the direction of therapeutic movement. As a therapist, it is my job to guide the discussion of goals and to collaborate with the group members. For this support group as their leader, I would assist members address the problematic behaviors they want to change and the new skills they want to learn. For example, coping skills to reduce anxiety, coping with depression, learning communications skills, developing problem-solving strategies to cope with a variety of situations encountered in their daily lives or promoting healthy relationships with their children, and

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developing a sense of self-advocacy. I would engage members in creating short-term goals that can be achievable. Members will be encouraged to set goals that can empower them to build their self-esteem as well as to develop self-confidence and self-awareness. As part of empowering women to take control of their lives and to gain insight and self-awareness, the person-centered approach will help the facilitator and members to determine what kind of group it will be and create a climate that facilitates growth more than that of the expert who structures and decides for the group, (Corey, 2015). The goal of the person-centered approach in the support group, will be for each member to be a fully functioning person if the power of the member is given recognition.

Techniques and methods:

As a social worker intern providing individual counseling, I have used problem-solving technique and it has been successful in helping my clients modify their behaviors and negative thoughts. In this support group, I can also use problem-solving. I believe it will be an effective technique to use since group members can work together and support each other since all members are there for the same reason. According to Corey (2015), in group therapy, problem-solving skills are introduced didactically, and the group may participate in working through some problems they are experiencing. In a group session, a member may share their uncertainty about completing a goal for various reasons. As part of the discussion and after identifying the problem, members in the group can help her find alternative solutions that can guide her to make the right decision. When presented with several options or advised, the problem may not seem so big and instead the member can focus on making her own decision without feeling pressure. Person-centered techniques are more suitable to the group needs. Corey, 2015 states that whatever techniques one employs or avoids, whatever style one adapts or refrains from, the approach should be adaptive to the needs of the group and its members. As part of this approach, I will

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use self-care activities such as creating vision boards and writing self-reflective affirmations depending on different empowerment topics related to self-confidence, spirituality and self-worth. During counseling, I have asked my clients to write what they think is positive about them and how they describe their qualities. Clients have been receptive and have enjoyed their assignments. Using this technique will allow members to focus more on analyzing themselves in a positive and constructive way.

Stages in evolution of the group:

As part of my internship, I am currently working on setting up this support group, the group's focus will be on providing emotional support to domestic violence victims. The idea is to start with eight maximum ten members primarily Spanish speaking. As the leader, I started conducting a brief assessment on each client that is interested in joining this support group. The group is aimed for single mothers since most of DV victims complained about the lack of support they received from the community. The idea is to use Cognitive Behavioral Therapy approaches to encourage members to share their emotions and feelings about their problems to have a better understanding of what technique would work best. During the initial stages, building trust will be the main goal. As a group leader the idea is to increase motivation, build their self-esteem, empower members and allow them to have a safe place where they can share their stories, find support, and find confidence in each other. According to Corey (2015), as members experience increase ease in expressing their feelings, they allow themselves to achieve an increased understanding of themselves; and work out more effective ways of being with others.

Part II: My Group Experience

What I learned about myself:

I had the opportunity to take clinical social work practice with groups in person. I really enjoyed the opportunity I had to participate in this class and meeting some of my classmates in person. I preferred being in person than on zoom because it gave me the opportunity to work closely with my group and learned their personality and character. At the same time, having the opportunity to learn and practice together made the experience more effective. As part of group work, we were able to work as a team allowing us to be more effective in problem-solving, providing support and building alliance when it came to the effectiveness of group work. In my group, we provided positive independence since everyone was involved and were striving to achieve mutual goals. As the weeks went by, my classmates and I learned new skills, provided ideas, and became more familiarized with the importance of roles. I learned through role play practices that some classmates presented more leadership skills than others and they were able to create a safe space for others to feel comfortable and able to participate more in group activities done during class. As time progressed, I was able to see how intimacy went improving as the group became more acquainted and there was more trust among us to share our opinion and expertise. As we took turns in the role plays, everyone had a different modality, and it was nice to see everyone had a different approach as to the kind of group leader they wanted to be. For week one, we were able to learn how to develop coping skills for depression and alleviate symptoms associated with anxiety and depression. Both in person and zoom members provided different techniques that are critical when working with people that suffer from depression. In a way it reminded when I took my class in Cognitive Behavioral Therapy and learned mindfulness and breathing exercises and it made it easy to practice in the role play. The times that I had the

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opportunity to be the leader, I was very receptive to what each member had to say and at times I was afraid to do or say the wrong thing. I didn't want to overstep or make someone feel uncomfortable, but I understood that I was learning just like everyone else and that it was challenging since this was my first-time doing groups. As the weeks went by, one challenge I found was that the role plays, and practice were done almost at the end of class, and it made it difficult to evaluate the process and outcomes of the group. As mentioned in Corey's text, evaluation is a basic aspect of any group experience, and it should be an ongoing process as the group progresses. As a group leader, I learned that assessing the progress of every group dynamic is important for me to enhance my ability and to learn more as a clinician to teach clients the ability to trust, to display independence, to take initiative, to work towards personal competence, to build intimacy, to explore their identity, to work towards personal competence, to improve their self-esteem and to recognize their self-worth.

I also learned that every person in class brought in different characteristics that would make the group dynamic successful or at times challenging. Perhaps one thing that stands out in our group was the diversity among us, allowing us to learn from each other and enhance our goals as future social workers. But it is certain that even among us we think differently and when it came to assessing, we were very sensitive about certain topics especially because we are part of nonmaterial cultures. As a group leader, I have to be culturally competent if I'm going to work with diverse groups and during practice I have to agree with Zastrow as he highlights that you don't need to be part of a specific ethnic group to work effectively with diverse groups and as seen in class, social workers must possess empathy, competence, compassion and experience in order to be successful with clients whether it is for individual or group practice. In practice, each

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of my classmates possess a different skill which made our learning experience more efficient to work with marginalized populations.

We all possess different leadership skills and every week each of us had the opportunity to share that skill with the rest of the class, it helped us implement each skill as we practice in class. During our class where we practiced the Adlerian Theory, and we did group work; these characteristics were more identified as we went along it had an impact on how we practiced. I would say that we are Adlerian groups leaders if we look at every characteristic each of us possess. As we all worked through the first stage, we learned something new about each other, it brought us closer, and we were empathetic towards each other's emotions. During this stage active listening was the skill mainly used since one of the questions asked were sensitive to some participants and this led to stage two where we assessed the emotional need everyone had based on the activity evaluation. I must say that during the group activity where we asked each other about describing the first event that came to our mind that occurred before the age of 10; it was a trigger for some of the students, because some remembered something bad, sad, or very traumatic. Each student provided a skill to support those that were triggered by painful memories. The skills of caring, encouragement, active listening and demonstrating courage to be imperfect were perfect examples of leadership skills I want to possess when I facilitate a group.

During this learning process, I realized I must be more assertive and learn how to develop self-awareness during the group process. During an exercise done in group, one of the group members was having a hard day and he was chosen to be the group leader. After we had practiced and were ready to present, he reacted defensively and stated he couldn't do it and apologized to the group and refused to give an explanation as to why the attitude. Another member took the role, and we couldn't complete our task. However, the mood was disruptive,

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and some members became mad at him for letting the group down. After the class finished, we approached him and asked him what had happened. He apologized and explained to us the challenges he had had that day and didn't mean to react the way he did. Then I learn that these issues can arise at any given moment during a group session and that I must learn how to deal with conflict when conflicting situations arise. As group leaders, it is important to develop awareness about group dynamics, conflicting group members, members that lack motivation to speak and need a source of encouragement.

As a future group leader, I know I must enhance my abilities. At the beginning of class, my goals were to learn more about group dynamics since I don't have too much experience with groups and to develop a leadership style. Perhaps developing my own group style and learn how to use different techniques from different therapeutic approaches. For the support group, I want to facilitate at Voces Latinas, I want to incorporate what I have learned in class and group practices with my peers. I want to use empowerment techniques and use the CBT techniques skills learned in class when working with groups to help group members to performed task roles needed to accomplish specific goals set by the group.

During this learning experience, I have acquired insightful skills that will help me as a group leader and member by learning the techniques for each approach to develop a sense of leadership style. After learning about leadership styles, I discover that I lean towards a democratic leadership, these leaders seek maximum involvement and participation of every member in all decisions affecting the group and attempt to spread responsibility rather than concentrate it. Democratic leadership can lead to slow decision making and confusion, but it is frequently more effective because of the strong cooperation that emerges from group participation (Zastrow & Hessenauer, 2018). I was able to use this leadership style during our

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role play practices allowing each member to participate and be involved in decision making and for them to be part of the process developing a strong personal commitment when conflict needed to be resolved. As a democratic leader, using cognitive behavioral therapy and solution focused therapy was the perfect approach when I had the opportunity to lead.

What I learned about the group process:

As part of our group dynamic, a democratic style was used. Members had the opportunity to share their own opinion and were always asked for their feedback. When role play was assigned each one took a chance and roles were chosen by each of us depending on the assignment. Also, since our group was multi-cultural, it gave us the opportunity to learn from each other about our personalities and learning styles making the group process more interactive when it came to creating our own leadership style when each member was facilitating a group. The group members also took the initiative to demonstrate enthusiasm when acting as clients and were very creative when acting their roles. We were able to build trust and respect among one another, making it easier to resolve any conflict as part of our working stage.

The experience of small groups gave me a better understanding of how groups function and malfunction. I learned that open communication and active listening are keys when working with small groups. I also learned that in small groups, leaders must be mindful of using different therapeutic group approaches that would be effective depending on the type of members coming to the group. As a group leader, it is important for me to be culturally competent and to understand we all have different leadership skills. Some members are more talkative, and others are more passive, some like to analyze, and others like to observe. I have to keep in mind for future groups that we all come with different perspectives and different approaches that can motivate or demotivate the psychodynamic of the group.

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Group Stages:

As part of our learning experience as a small group we went through the initial stage, transition stage, working stage, and consolidation stage. At the beginning, each group member was acquainted with each other from previous classes we had together, but we didn't know each other very well therefore it took some time for us to build trust. As part of our practice, a member of our group who has experience working with groups took the initiative to be the leader for our first group assignment. This member started by opening a safe space for everyone to introduce themselves and talk a little bit about themselves, she then provided psychoeducation and discuss the purpose of our group. Members became more relaxed and were able to start sharing and expressing how they were feeling about the assignment. As the initial stage, it was noticeable that we were just in the beginning of our learning process. According to Zastrow & Hessenauer (2018), as new members join open-ended groups, they provide a different point of view, even though they are gradually socialized into group norms and practices by the old members. As I saw my group unfold, we fit the characteristics described in the readings.

During transition stage, we were all more comfortable to the point that we created more intimacy among our group members. During this stage, we were able to develop group cohesion, empathy, freedom from experiments. As the time progressed, the group developed cohesion as each member became more comfortable and freer to share their emotions and feelings. Each member felt in a safe zone where we all felt secure to be speak and be ourselves. (Zastrow & Hesenuer, 2018) states that cohesive groups are more willing to listen, accept suggestions and defend the group against external criticism.

Specific group process issues:

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As we started to integrate as part of the group, it was noticeable that some members knew each other more than the others. As mentioned before some members were talkative and others were passive which seems to be a problem because at the beginning some felt isolated, and others seem to have more leadership in the conversations. A particular member who seems very anxious during class and seems to always want to be the best, made comments that made us feel insecure. This created an initial anxiety among some members that were quite and were afraid to talk because they didn't want to feel misjudged. Because of this, members of the group disclose very little about themselves. According to Corey (2015), anxiety in the transition stage when dealing with reluctance occurs as a result of being judged and misunderstood, from the need for more structure, and from the lack of clarity of goals, norms, and expected behavior. As part of this group, we learned to understand this member's personality and we became more receptive to her behavior not allowing her personality to interfere with ours to avoid conflict among us. It was empowering to see a member of the group become assertive after we spoke about anxiety, and she was able to disclose her feelings about the group. This member took the initiative to be a group leader twice and she was able to improve her leadership skills.

The group was able to work together, respecting each other and allowing for each of us to take leadership roles. Each member was able to learn from each other and applying each theory into practice allowed us to become more efficient in our approach. As part of our learning practice, role plays got us closer, and we were able to work as a team. We took turns in playing the leadership role and we were able to learn more about the way we engage in group setting through our therapeutic role reversal of each one taking the role of the therapist in every role play we had.

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In our final stage, we had become so acquainted and close to each other, we had built trust and were able to work effectively. As a leadership role, (Zastrow, 2018) states that servant leadership not only facilitates the personal development of groups members and has the potential to influence the broader society in a positive way. As I reflect on everything I have learned, I must say that as leaders, we must take the servant leadership role because it creates an effective approach when leading groups.

REFERENCES

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