

**ENHANCING GROUP COUNSELLING IN YOUTH RESIDENTIAL
TREATMENT CENTRES AND GROUP HOMES:
PUTTING THE GROUP BACK IN GROUP HOME**

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Abstract

A variety of challenges face both staff and residents in group homes and residential treatment centres for youth and adolescents. Some of these challenges include: creating therapeutic value in group counselling services, managing stresses related to residential living, and creating and managing effective and relevant behavioural goals for youth and management of negative behaviours. These challenges may be addressed effectively by improving the quality of group counselling services. The manual created for this project is designed to improve group counselling services by providing staff with the information and skills to run a group counselling program focused toward helping residents explore personal values, goals, and behavioural changes. This program is based largely on motivational interviewing and solution focused techniques but also includes elements of self-monitoring, behavioural contracting, experiential learning, and conflict resolution.

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Need for the Project

Youth residential treatment centres and group homes are environments which create a unique set of challenges and difficulties for both staff and residents. Some of these difficulties and challenges include: creating therapeutic value in group counselling services, managing stresses related to residential living, creating and managing effective, and relevant behavioural goals for youth and management of negative behaviours.

I am employed as a Child Care Counsellor at a residential treatment centre for boys' ages 11 to 16 years. One issue I have noticed in my time working in the field is the limited number of well managed, organized, and appropriate group counselling programs available for the youth living in residential treatment centres and group homes. This information has come from my own experience, as well as from networking with others working at a variety of different group homes and residential treatment centres across northern Alberta. From my experience, counselling staff are often responsible for running "group night" in group homes and residential treatment centres for youth, however, many counselling staff lack the basic skills required for group counselling. This often leads to ineffective group sessions which do not provide the maximum benefit for the youth.

Another issue, which I have noticed in group homes and residential treatment centres, is that the running of groups tend not to include important elements of the counselling process such as exploration of goals and values and support for positive behaviour change. Most groups I have observed tend to be of a psychoeducational nature. While education is an important part of group counselling, more is needed for group to be a highly effective method of improving the lives of youth. Part of the reason for this is that most the counselling staff do not have an advanced degree in counselling in their

academic preparation or professional backgrounds. As well, due to staff shift rotations in residential treatment centres and group homes, consistency, and continuity of group leaders and facilitators, is extremely minimal.

Another difficulty, related to carrying out psychotherapeutic group work in residential treatment centres is that the youth, participating in the groups, also live together for extended periods of time. Issues such as confidentiality and teasing may be difficult to address with this population.

Counselling staff are often responsible for the creation and maintenance of behavioural goals for youth. It can be extremely difficult to create goals which the youth will be interested in and motivated to pursue. It can be even more difficult to create goals which represent the intrinsic values of youth. Youth themselves often have little or no idea about positive values or goals. One of the main aims of this group counselling program is to help youth identify their own values, and learn to create behaviour changes and goals which best promote those values, then achieve these goals and behaviour changes.

Youth in group homes and residential treatment centres frequently display highly negative behaviours which can make it difficult for counsellors to empathise with them and display unconditional positive regard. Many of these behaviours can be linked to factors such as a lack of a “normal”, positive family and home environment, Fetal Alcohol Spectrum Disorder (FASD), Attention Deficit Hyper-Activity Disorder (ADHD) or other environmental, health or genetic issues. Working in a residential treatment centre where youth display disrespectful, abusive, and violent behaviours can be extremely stressful. Over time, child and youth care counsellors can become demoralized, jaded and

suffer vicarious traumatization (Herman, 1997). By engaging in an enhanced group counselling process counsellors may be able to better empathise with the underlying causes of the youths negative behaviours. Also, improved connections between co-workers can improve the way that stress and vicarious traumatization are managed amongst staff. As well, by helping the youth work towards positive behaviours, values, and goals the instances of negative behaviour should decrease, thus creating a less stressful environment for everyone. A group home or residential treatment centre may never replace a natural home. However, when the environment is less stressful and negative all members of the centre (staff and youth) may experience more positive, rewarding, and caring relationships with one another, thus creating a more loving and nurturing environment.

Why Group

Group counselling can hold a variety of benefits for therapeutic work with youth in group homes and residential treatment centres. A high percentage of youth in residential treatment centres experience low self-esteem (Small, Kennedy, & Bender, 1991), developmental challenges (Holden, 2009), and issues with cultural identity (Steiker, 2008). As well, many have experienced verbal, physical or sexual abuse in their past (Small et al. 1991). Group work has been shown to be efficacious in helping children improve self-esteem (Bailey & Bradbury-Bailey, 2007; Corey & Corey, 2002; Horne, Stoddard & Bell, 2007; Paone, Packman, Maddux, & Rothman, 2008; Wright, 2006), improve awareness and acceptance of personal culture (Bailey & Bradbury-Bailey; Phillip, Hagan, Bodfield, Woodthorpe & Grimsley, 2007; Tlanusta-Garrett & Crutchfield, 1997) work through issues related to abuse and trauma (Berliner & Saunders, 1996;

Deluca, Boyes, Furer, Grayston & Hiebert-Murphy, 1992) and develop towards adulthood (Richmond 2000; Akos, Hamm, Mack, & Dunaway, 2007). Group can also provide positive benefits in helping youth create positive relationships thus creating an environment in which unconditional positive regard and peer influence acts to move youth towards more healthy and beneficial goals and behaviours.

Group counselling may also benefit counselling services in residential treatment settings in ways not directly linked to the clientele. Other potential benefits of group counselling include: efficiency of groups in terms of time and financial resources (Akos, Hamm, Mack, & Dunaway, 2007; Corey & Corey, 2002), positive impact of group work on relationships between youth (Sayder, 2008; Wright, 2006), improvement in working relationships between staff (Doel, 2006), and an improvement in staff's generic counselling skills (Corey & Corey 2002; Doel 2006; Sayder, 2008).

According to Doel (2006), teaching staff about group counselling and involving staff in the group counselling process can provide benefits to the agency which go beyond those directly realized by clientele. These benefits include: increased development of individual staff's professional practice, application of generalized knowledge related to team work, group counselling training and engagement in the group counselling process. All these benefits may lead staff teams to function more effectively. As well, group counselling training may enhance working relations between various sections of the agency together (Doel, 2006). By incorporating group counselling into an existing set of services, agencies also gain a new perspective from which to evaluate their services (Doel, 2006). For a group home or residential treatment center for youth, this could mean evaluating the success and effectiveness of existing approaches to group

counselling. The psychological and emotional health of residents could also be evaluated through their participation in group. In addition, the organization might want to assess how well staff teams are functioning.

Group counselling knowledge has the potential to improve the overall efficacy of counselling staff teams in several ways. First, involvement in group counselling requires the practice and use of basic counselling and communication skills which can be applied in both formal and informal interactions with youth outside of the group setting. Second, successes in group could potentially improve staff feelings of efficacy in their work with youth overall. Third, carrying out effective group counselling can provide increased opportunities for meaningful interaction between staff and youth (Bryant, 2000).

Developmental Benefits

Healthy relationships with non-family adults can be an important positive factor in the overall development of children and adolescents (Scales, Benson, & Mannes, 2006). Increasing exposure to adults who provide support, empowerment, and boundary setting has a positive impact on youth high risk behaviour and thriving (Scales et al., 2006). According to Scales et al. (2006), the more time adolescents spend interacting with supportive non-family adults, the greater likelihood adolescents report that these relationships impacted their: overall decision making, altruistic behaviour, financial decision making, cultural knowledge, as well as, religious beliefs and values.

Important characteristics of positive relationships between non-family adults and youth include: empathy, affirmation, respect, virtue, trust, and attention. (Brooks, 2006; Scales et al., 2006). Adults actively seeking the opinions of youth and engaging in meaningful conversations with them are also important positive characteristics of these

relationships (Goebel, 2002; Scales, et al., 2006). Group counselling provides opportunities for youth and non-family adults to engage in relationships which include all of the aforementioned characteristics. In order to facilitate positive relationships counsellors need to be empathetic, understanding, affirming, trusting, and respectful (Corey & Corey, 2002; Dies, 2000; Hall, 2006; Nichols & Goldstein, 2001; Richmond, 2000).

Adolescent development is often described as involving separation and individuation (Nichols & Goldstein 2001; Richmond, 2000). Adolescents experience a desire to move towards adulthood but are frightened of the responsibilities involved in becoming an adult (Richmond, 2000). Group counselling can provide youth with a safe place to explore, create, and achieve goals related to this process of attaining adulthood (Richmond, 2000; Akos, Hamm, Mack, & Dunaway, 2007).

As adolescents develop cognitively they begin to use metacognitive processes to understand social situations in a relative and abstract manner, and develop their ability to consider current and potential consequences of behaviours (Steinberg, 2005). Group becomes a social context in which adolescents can apply and enhance this cognitive development. In group, adolescents gain opportunities to: be a part of something larger than themselves, understand that their situation is not unique, experience and understand emotions, openly question familial and societal values, communicate with adults and peers, and learn by observing the group counsellor (Corey & Corey, 2002).

Caring Relationships

Youth in foster care often have not had consistent (if any) contact with parents or mentors to provide them with advice, encouragement, and emotional support throughout

their lives. Kasser, Ryan, Zax and Sameroff (1995) found that youth, whose mothers provided conditional positive regard (cold, unaccepting, controlling and critical), tended to focus on extrinsic values and goals such as financial success by the age of 18 years. In contrast, these authors found that individuals, whose mothers provided unconditional positive regard (warm, accepting, nurturing), tended to focus more on intrinsic values and goals such as relationships, community affiliation, and self-acceptance.

Experiencing a lack of caring or “conditional positive regard” from significant others i.e. being valued only when demonstrating characteristics or behaviours that meet with specific expectations or standards, can damage or delay identity formation, formation of values, and moral development of youth (Holden, 2009). Individuals who have not had the opportunity to develop a positive identity, including an exploration of personal values, are much more likely to focus on extrinsic values (money, immediate gratification) rather than intrinsic values (those related to an individual’s inherent psychological needs such as love, acceptance, nurturance, and achievement) (Kasser, Ryan, Zax, & Sameroff, 1995; Sheldon & Kasser, 1995). These individuals are also more likely to focus on values that are “self-oriented, short-sighted or inefficient” (Miller & Rollnick, 2002) rather than on values which promote behaviours that provide long term, effective and efficient benefits to self and others.

While unconditional positive regard is necessary in helping youth develop, setting appropriate boundaries and limits is also necessary in helping youth development (Jessor, 1991). Experiencing boundaries and feedback from the social environment helps youth learn to identify and practice behaviours that are socially acceptable and beneficial to themselves and others (Holden, 2009; Jessor, 1991). Over time, practice of socially

acceptable and beneficial behaviours becomes more habitual for youth (Gobel, 2002; Holden). This allows adolescents to function better in their social environment and to make healthier and more positive choices for themselves (Gobel, 2002; Holden, 2009; Jessor, 1991).

Counsellors, in residential treatment centres and group homes, may improve their ability to empathise with the youth through enhanced relationships built through the group counselling process. Counsellors should take the time to consider their own lives as teenagers (Dies, 2000) including challenges, difficulties, choices, behaviours and supports they experienced, and compare them to the experiences of the youth. Doing so can increase their empathy for the experiences of the youth. When counsellors are better able to empathise with youth, they are better able to maintain a caring and accepting attitude marked by unconditional positive regard (Holden, 2009). By increasing exposure to the amount of unconditional positive regard received by youth in the treatment setting, and through a rigorous process of discovering, evaluating, and achieving values and goals, it is believed that the youth will be able to increase their personal understanding of intrinsic values and motivations and achievement of intrinsically important goals.

Research supports the importance of the development and realization of intrinsic values and goals with youth. Sheldon and Kasser (1998) found that goal attainment was most strongly related to overall wellbeing when goals were based on intrinsic values. Kasser and Ryan (1993) found, in a socioeconomically diverse group of 18 year olds, that intrinsic values associated with fewer symptoms of conduct disorders and better overall functioning. These authors found that the reverse was true with extrinsic values.

Sheldon & Kasser (2001) state that an individual's ability to self-actualize, in a healthy and positive manner, is linked to successful attainment of specific goals. Developing “positive motivation” (intrinsic motivation which helps individuals solve a specific problem) can also be useful in helping individuals meet needs and achieve goals related to his/her identity development and self-actualization (Miller & Rollnick, 2002; Sheldon & Kasser, 2001). Positive motivation can also help individuals better integrate into their social surroundings (Kasser, et al., 1995). In turn social skills, as well as self-regulatory skills, are important factors in helping individuals successfully achieve personal goals (Sheldon & Kasser, 1998). When an individual is motivated by intrinsic values and goals, he/she has complete access to cognitive and creative resources to use in attaining those goals (Sheldon & Kasser, 1998).

Peer Influence

Peer influence plays a major role in adolescent development (Dies, 2000; Scales et al., 2006). The influence of peers can have a major effect on adolescents in group homes and residential treatment centres (Holden, 2009). Peer influence plays a greater role in adolescent high risk behaviour than the influence of adults (Scales et al., 2006). Group counselling provides opportunities for adolescents to experience positive peer interactions thus enabling them to learn to communicate and socialize in a healthy and mature manner (Akos et al., 2007; Corey & Corey, 2002). For example, adolescents aged 15 to 18 years can benefit from groups comprised of both genders as this can provide them with opportunities to learn how to interact with members of the opposite sex in a healthy manner (Corey & Corey, 2002). According to Erickson (as cited in Kulic, Horne, & Dagley, 2004, p. 139), “The group is a primary socializing influence through the early

developmental stages of life, and it provides the context within which children and adolescents will receive preventive interventions and will practice and utilize them in real life”.

According to Berg, Landreth & Fall (2006), identifying with a positive peer group can have positive effects on helping youth develop positive behavioural patterns early in life. These authors note that identifying with positive peers in a group counselling setting can help adolescents, who are experiencing difficulty connecting with adults, to change attitudes, goals, and self-defeating behaviours. The effectiveness of peer influence in groups has been noted for special adolescent populations including those experiencing school truancy, substance abuse, AWOLing behaviours, classroom management issues, and repeated disciplinary issues (Berg et. al., 2006).

In group, adolescents are provided with the opportunity to be exposed to the emotions and experiences of others similar to themselves. When adolescents are aware that others have gone through similar experiences, have made similar choices, and are experiencing similar emotions, they are likely to feel less shame, guilt and aloneness (Corey & Corey, 2002). When adolescents discuss their struggles with others who have experienced success with some of the same challenges they are facing, this can provide a greater sense of hope.

In group homes and residential treatment centres, both deviant and non-deviant youth tend to seek out peer affiliations with other youth who share salient characteristics such as similar levels of deviance (Coie, Terry, Zakriski, and Lochman, as cited in Handwerk, Field, & Friman, 2000). Aggressive behaviours in boys, experiencing behavioural management issues, tend to increase significantly more if those boys are

isolated from non-deviant peers (Boivin & Vitaro, as cited in Handwerk, Field, & Friman, 2000). As a result of rejection from positive peer groups, youth may “by default” become involved with deviant peers (Hirschi as cited in Handwerk, Field, & Friman, 2000).

Decreased association with antisocial peers has been shown to help decrease levels of aggression in boys (Boivin and Vitaro as cited in Handwerk, Field, & Friman, 2000).

Also, deviant peers may learn antisocial behaviours from one another (Dishion, McCord, & Poulin, 1999).

Through involvement with other youth in group counselling situations, youth in residential treatment centers can gain a greater understanding of shared positive salient characteristics including shared experiences, strengths, positive values, and goals. This increased understanding leads to peer affiliations which are based more on positive, rather than negative characteristics and may decrease the number of youth who are rejected from positive peer groups within the centre.

Creating more positive peer groups and reducing peer rejection may, in turn, provide a wide variety of benefits for the youth. Youth rely on peer groups to meet several needs. Peer groups provide youth with a sense of self-esteem and belonging as well as education about socially appropriate behaviours (Farmer et al. as cited in Akos et al., 2007; Handwerk et al., 2000; & Scales et al. 2006). Youth experiencing greater affiliation with positive peers have these needs met in a more healthy and constructive manner (Handwerk et al., 2000). Enhanced group counselling in residential treatment centres and group homes provides an excellent means of increasing the therapeutic and learning value of treatment for youth through providing opportunities for an increased

sense of self-esteem and belonging as well as an increase in positive social learning opportunities within their peer group.

The Project

The manual is formatted to provide ready access to detailed information about running a therapeutic group while, at the same time, providing quick and easy access to information on specific topic areas. The manual includes a list of group rules, and instructional pages on completing a variety of group activities e.g. problem based learning exercises. The manual also includes a variety of key articles with specific references highlighted.

The environment in group homes and residential treatment centres is essential to identity formation, formation of values, moral development and overall wellbeing of youth who live there (Holden, 2009). The purpose of the group living program is to create a safe, accepting environment where youth can work on understanding and achieving values, goals and subsequent behavioural changes. Through the process of self-discovery and self-actualization, youth can come to a greater understanding of “who they really are”. That is, they can form a self-identity which is more authentic and beneficial to helping them lead positive, fulfilling lives (Goebel, 2002; Holden, 2009).

Techniques

A large part of this program is based on the principles of Motivational Interviewing (MI) and Solution Focused Therapy (SFT). Both these therapeutic styles utilize a counselling relationship that includes unconditional positive regard and both styles are used to help youth with behavioural/lifestyle changes. As well MI and SFT

have are used in helping youth to set and achieve goals that have intrinsic value to them (Enea & Dafinoiu, 2009; Miller & Rollnick, 2002).

Some examples of behaviour changes which MI is useful in helping youth make and maintain include: dental care maintenance (Skaret et al., 2003), adherence to a diet plan and long term medical regimens (Knight et al., 2003), school attendance (Enea and Dafinoiu, 2009) and alcohol treatment (Baer, Kivlahan, Blume, McKnight, & Marlatt, as cited in Flaherty, 2008).

SFT has also been used to help youth make a variety of positive behavioural changes which help them realize intrinsic values and goals. Some examples counselling situations where SFT has been used include: group counselling for aggression (Sun-Kyung, 2009), and group counselling for youth experiencing academic and behavioural difficulties (Corcoran, 1998; Newsome, 2005).

MI and SFT have also been used together in a group counselling to help youth make behavioural changes. Enea and Dafinoiu (2009) examined whether the use of motivational stimulation strategies, applied in a group counselling format, could be used to reduce school truancy rates among a high truancy group of 16 to 17 year olds. Both intrinsic motivational strategies, such as Motivational Interviewing (MI) and Solution Focused Therapy (SFT), and extrinsic motivational strategies, such as behavioural contracts, successive approximation of behaviour and reinforcement strategies were used (Enea & Dafinoiu, 2009). These authors found a 61% decrease in school truancy for the group receiving motivational stimulation group therapy (19 students) and no drop in truancy for the control group (19 students).

Miller and Rollnick point out some potential benefits of using motivational interviewing in group formats. One benefit is that pressure from other group members may impact an individual member's position in relation to change, and draw the individual into a "mutual public" commitment to change (Miller & Rollnick, 2002, p. 382). Other benefits are that the group creates a support system to help individual members achieve change, and it provides individual members with an ongoing reminder that others experiencing the same issues are focused on change (Miller & Rollnick, 2002). As well, some group members may be positively influenced toward change when observing the contrast between the positive, empathetic and logical style of a MI group counsellor and the outspoken group members discussing irrational counter change arguments (Miller & Rollnick, 2002).

One MI motivational stimulation technique, included in the manual, is called developing discrepancy (Miller & Rollnick, 2002). This motivational technique has been used to help youth change behaviours related to alcohol, drug and tobacco use (Flaherty 2008), eating disorders (Flaherty, 2008), management of diabetes (Knight et al. 2003), and school attendance (Enea & Dafiniou, 2009). When a counsellor discusses behavioural changes with a youth, it is important to help the youth develop their own motivation for change, based on what they value, rather than attempting to indoctrinate them with ideas about why they should change their behaviour (Miller & Rollnick, 2002). This can be done by exploring the discrepancies (or developing discrepancy) between their current behaviours and their values, and perceived importance of change (Miller & Rollnick). Developing discrepancy can be used as a means of confronting negative thoughts or behaviours of group members (Corey & Corey, 2002).

Exploration of past successes through the use of SFT techniques helps individuals to gain greater awareness of the strengths, resources, and motivations that are useful in achieving current goals, and builds self-efficacy towards achieving goals (Warner, 2007). Asking questions such as “How did you do that” can help youth take ownership for positive behaviour change, and recognize internal strengths and resources that led to change (Warner, 2007). Asking questions such as “When else did you accomplish that” serves to help youth better realize the full extent of behavioural change that they have been able to accomplish thus providing them with increased self-esteem and a more complete understanding of the strengths, resources, and motivations they have used to make changes (Warner, 2007).

Because of MI’s emphasis on Motivation and Values, and SFT ‘s focus on strengths and resources, I believe that these counselling theories have much to offer a program focused on youth in residential treatment. One major issue with youth in residential treatment centres and group homes is that these youth often feel that they would much rather be somewhere other than their current residence. It can be emotionally painful for these youth to live life without regular access to a “healthy” family. These youth need parents who care for them and living in group homes or centres they receive little to none of that loving parenting. It is difficult for paid professionals to replace guardians. It is common for youth in this position to become depressed, angry, disillusioned, and to act out their frustrations through inappropriate behaviours. Because of these negative behaviours, youth then experience a variety of consequences. They receive social consequences from peers and staff reacting to their behaviours, (Holden, 2009) which can either act to increase or decrease the behaviours. The youth, in turn,

become more upset and increase their acting out behaviours which creates a cycle of unhappiness, negative behaviours, and consequences. The youth often become so heavily focused on their desire to leave their current situation that they lose sight of what it is that they really value. They have difficulty perceiving and/or caring about the opportunities available to them, and the goals they would like to obtain.

Working with youth in a residential treatment facility I have found that it beneficial to identify goals, discuss goal achievement, and explore resources and past successes to help youth break the cycle of unhappiness, negative behaviour and consequences. Helping clients create a menu of options is a technique used frequently in MI (Miller & Rollnick, 2002). When a youth begins to focus on options, this can reduce feelings of helplessness and feelings of dissatisfaction with his situation. When the focus is on values and goals, the result is motivation to behave in a manner that will result in the realization of those values and goals.

Consider the following scenario, a youth has lost his weekend home visit privileges for acting out violently towards a staff member on Friday. His parents were informed of the incident and decided that they did not want to have the youth home for the weekend as he has acted out violently at home in the past. They are concerned for the welfare of her younger sister. This youth may continue to engage in acting out behaviours at the group home because he is angry about not being allowed to go for a home.

In this scenario discussion of values, which is a central tenant of both MI and SFT (Miller & Rollnick: Warner, 2007) is used. We discuss underlying values around going for a home visit. We discover that the youth values spending time with his family and being able to leave the group home for a while. Subsequently the options are discussed.

The first option is continuing to behave poorly and not receiving any movement towards either of these values. If the youth decides to change her behaviours, he won't be able to attend his home visit, however, he may be able to go on an outing this weekend in the community, thus realizing his value of spending time away from the group home. Also, choosing to enter into a more positive behavioural cycle can increase his potential opportunities of attending future home visits, thus satisfying both his values, although in a different time frame than he had initially hoped.

In addition, the exploration of past success is a major component of both MI and SFT (Miller & Rollnick, 2002; Warner, 2007). We discuss similar situations in the past, where the youth has been able to successfully change his behaviours, thus building self-efficacy and exploring strengths and resources the youth has used to make similar changes in the past. This provides the youth with increased awareness of beneficial strategies for creating/maintaining positive behaviour changes in the present.

We help the youth envision his ideal self and preferred future through the use of SFT techniques, such as the Miracle Day technique (Warner, 2007), and help the youth identify elements of the ideal self and preferred future which currently exist. We then help the youth identify how he can enhance or amplify those currently existing elements. In this scenario, the Miracle Day may include having the youth envision himself behaving in a manner that is beneficial to the obtainment of his values related to spending time with family away from the group home. It is identified that the discussion of problems with group home staff is necessary to achieving these goals and that the youth is currently demonstrating this behaviour. Discussion is then held with the youth around

how the youth may pro-actively discuss problems with staff in order to better achieve important values.

Stages of Change

Marden-Velasquez and Crouch (2001) suggest that group counselling programs based on the stages of change model can be useful in residential treatment centres and in work with youth. When a counsellor understands where a youth is in the stage of change process, for a particular behaviour, he/she is able to adjust his/her use of challenging, information giving, and emotional support to meet the youth's needs at the current time (Marden-Velasquez and Crouch, 2001). Understanding a youth's stage of change for any particular behaviour can be highly beneficial to the counsellor in helping youth work towards goals that they are "ready for, willing and capable to achieve" (Enea & Dafinoiu, 2009, p.194).

Goal Setting and Behavioural Contracting

Setting and achieving long term goals are important in assisting youth to change specific behaviours and develop into adulthood (Goebel, 2002; Tlanusta-Garrett & Crutchfield, 1997). Behavioural contracts can be used as a way to gain co-operation and commitment of adolescents towards achieving their goals (Enea and Dafinoiu, 2009; Lassman, Jolivette, & Wehby, 1999). A Collaborative Behavioural Contract (CBC) is a form of behavioural contract in which several significant members participate (Lassman, Jolivette, & Wehby, 1999). In the case of group homes or residential treatment centers, the CBC would include the adolescent, as well as others important to his treatment. Important others could include the group counsellors, teachers, group home staff, family members and peers. Having significant individuals, from an adolescent's different life

areas, sign a single contract, increases the consistency of behavioural management strategies used with the youth across settings. Co-ordination of the CBC, in turn, can improve the ability of youth to make and maintain behavioural changes (Grant & Evans, 1994; Lassman, Jolivette, & Wehby, 1999).

Self-Monitoring

Self-monitoring processes are beneficial in helping youth recall and examine their patterns of choice and behaviour so that they can make future choices that are in their best interest (Goebel, 2002; Grant & Evans, 1994; Enea & Dafiniou, 2009). Journal writing can be an effective method of carrying out self-monitoring procedures in a group counselling program (Corey & Corey, 2002). Group members can keep track of their goal progress by keeping a daily journal (Corey & Corey, 2002). Journaling can also be used to help each group member explore his/her experience of group (Corey & Corey, 2002). This can be an especially valuable exercise at the beginning of a new group (Corey & Corey, 2002).

Group cohesion can be increased by having group members write out and share their reactions to group with other members (Corey & Corey, 2002). This can allow group members to see that other members share their fears, apprehensions, and goals for group. By sharing member's reactions to group, explicit conflicts and resistance stemming from a lack of communication and understanding can be reduced (Corey & Corey, 2002). Goal setting can also be enhanced through the use of a personal planner or organizer. Personal planners can be used to break down goals into sub goals which can improve an individual's ability to realize his/her goals in more effective and organized manner (Goebel, 2002).

Incorporating Art, Sports, and Wilderness in Group Therapy

A counsellor should not assume that running groups means sitting and talking about issues. Adolescents often respond best to groups which involve physical or artistic activities (Williams, 2000). Also, many adolescents will respond negatively to the idea of being engaged in therapy labelled as “counselling”. Adolescents may have had negative or ineffectual experiences with traditional counselling experiences and may be resistant to engaging in further “counselling” experiences.

Many life lessons and a great amount of therapeutic work can be accomplished with youth through the use of physical activities (Wright, 2006; Williams, 2000). Activities can include sports, art, and wilderness experiences. Active group processes provide opportunities for mentorship and teaching of youth (Wright, 2006; Williams, 2000). When youth face challenges as a group, they are put in a position which requires them to work on social skills (Williams, 2000).

Providing youth with an opportunity to succeed in a certain skills is a major component of the development of self-esteem and self-confidence. By identifying as a practitioner of the art or skill they have learned, the youth come to realize that they are a part of something larger than themselves, and their sense of personal identity can be enhanced (Wright, 2006). Youth engaged in physically demanding activities may be provided with opportunities to prove that they are “tough” in positive sports or work activities rather than through violence (Wright, 2006). Sports, art, and wilderness experiences also provide adolescents with opportunities to practice self-discipline (Wright, 2006; Williams, 2000).

A counsellor can use metaphors from sports, art and wilderness activities to teach lessons about real life. In many sports, for example, require the maintenance of a strong defence in order to be successful. Many youth, when first engaged in sports, focus mainly on offence and the glamour and excitement which come with offensive plays (Wright, 2006). A counsellor may draw a parallel between an adolescent's sport of choice and other life areas (Wright, 2006). Excellent learning opportunities for youth with anger management issues can exist in sports. A counsellor may draw parallels between the necessities of defence in sport to the necessity for youth to control their anger in social situations (Wright, 2006). Counsellors can examine times when youth have reacted to anger provoking situations with flashes of anger or violence, and compare those to times when youth have engaged in sports without concern for defence (Wright, 2006). Sporting activities also provide youth with opportunities to be more attuned to their physical body (Wright, 2006). By engaging in sports, youth can better understand their physical reactions to psychological issues such as stress and anger (Wright, 2006).

Problem Based Learning Exercise

Problem Based Learning (PBL) exercise is included in the group counselling manual as it provides a model for handling a variety of issues that may be faced by youth. Working through PBL exercises can help group participants learn critical thinking skills, problem solving skills, self-directed learning skills, and teamwork skills (Hall, 2006). This exercise requires group members to work together to analyze a problem issue, research the issue independently, and then discuss their research findings as a group (Hall, 2006).

PBL exercises may be useful in the early stages of group as they provide a structured group activity, that focuses primarily on an abstract problem external to the group members without requiring a great deal of emotional processing. These exercises can help group members become accustomed to the group while working through a problem scenario as a team. As well, members may be able to participate in this exercise without having to expose a great deal of difficult personal information.

Conflict Resolution

Issues of conflict are common among youth in residential treatment centers and group homes and often need to be addressed in order to maintain positive relationships between youth (Arsenault, 2000). Conflict resolution can be utilized as a tool for emotional therapy and learning (Dies, 2000). Ho'oponopono, a traditional Hawaiian system of conflict resolution, has been used successfully in group home settings with youth (Arsenault). "Literally meaning 'to set things right,' this method enables group members to effectively resolve conflict and repair relations with one another so that the therapeutic process can more effectively continue" (Arsenault, p.29). Teaching understanding and consideration for the other's values and goals is an important part of residential treatment for youth (Arsenault, 2000; Holden, 2009). The Putting the Group Back in Group Homes program focuses heavily on the youth's development and exploration of personal values and goals. Through the process of engaging in ho'oponopono, youth learn to negotiate their own needs, values, and goals within the context of a group of individuals who also have their own needs, values, and goals. Engaging in the process of ho'oponopono help's youth to better achieve their own values and goals while, at the same time, teaching them to respect the values and goals of others.

Method

The literature review for this project began in February 2009. For this project, The University of Lethbridge Electronic Library has been the primary source for reference materials. The primary database used in this literature review is the Ebsco Host Child Development & Adolescent Studies although the Ovid SP Psych Info, Ovid SP Psych Articles Database, Springer Link, Blackwell Synergy, Wiley Interscience and B-Net were also used. Search terms have included “group work”, “group counselling”, “group homes”, “adolescents”, “youth”, “trauma”, “self-esteem”, “anger management”, “motivational interviewing”, “solution focused therapy” and “behavioural contracting”. Several books pertaining to group counselling for youth (Corey & Corey, 2002), group counselling and stages of change (Marden-Velasquez, & Crouch, 2001), motivational interviewing (Miller & Rollnick, 2002), solution focused therapy (Warner, 2007), behavioural psychology (Grant & Evans, 1994), basic counselling skills (Dillon & Murphy, 1998), counselling youth in residential treatment centres and group homes (Holden, 2009) and counselling youth related to goal and value attainment (Goebel, 2002) were also used as resources.

Conclusion

This group counselling manual was not intended simply as a resource to be accessed for “things to do on group night”. Effective group counselling requires the development of a cohesive, trusting and caring group. This is something that needs to develop with time and continuity. As well, behavioural change and self-exploration requires time and continuity.

Additional examples of group activities geared towards specific issues such as self-esteem, depression or sexuality might be included in this manual, so that the overall program endorsed in this manual has greater value in helping counsellors help youth with a wider variety of issues. However, the manual was not intended as a comprehensive reference on all possible topics.

This group counselling manual was intended as a resource for staff in residential treatment centres and group homes to help youth living there to build self-efficacy, clarify values and goals, and identify and adapt behaviours which are more beneficial to achieving those values and goals. By doing so, youth become empowered to focus on the positive elements of their experience and take control of their lives, as much as possible. This manual also provides a method of increasing consistency in parenting and behavioural modification between various areas of the youth's lives (school, treatment facility, home setting). However, this program does not fully address contextual issues which may be occurring in various settings which may be contributing to negative and self-defeating behaviours. For example, a youth may be able to achieve a great deal of positive behaviour change within the treatment setting. However, it may be almost impossible for that youth to maintain those positive behaviour changes if he/she returns to a toxic home setting where dysfunction, abuse or addiction are present. For instances where youth have a family to return to, it is recommended whenever possible that a family support worker and/or family counsellor be involved in a youth's treatment to monitor the youth's home life and, when indicated, help improve conditions at home so as to optimize the potential for successful reintegration. In other instances, it is

recommended that work be done to help the youth integrate into whatever setting he/she will likely enter after leaving the treatment setting.

The social climate of the group home or residential treatment centre has a major impact on the youth's ability to obtain positive, value based behaviours (Holden, 2009). In order to maximise the effectiveness of the program outlined in this manual, the social climate within the centre should be one that promotes youth's self-efficacy and efforts to obtain goals and maintain behavioural changes. For example, if a youth is singled out as being "hopeless" by staff and/or peers then he/she will have a great deal of difficulty achieving positive behaviour change as he/she will constantly be receiving both overt and covert messages that he/she is not capable of change. Furthermore, opportunities to enact positive behaviours may be limited as it may be assumed by staff that said youth will make negative behavioural choices. In order for this program to work most effectively, the centre must adopt a consistent climate and atmosphere where each youth is believed to be capable of change regardless of the extreme nature of his/her attitudes and behaviours.

Group homes and residential treatment centres are often characterised by inconsistencies which can negatively impact the therapeutic value of treatment (Holden, 2009). These inconsistencies are often brought about as a result of issues related to staff scheduling, communication issues, and differences in opinions and values related to child care. A central tenant of this program is the provision of consistent behavioural management for youth to optimize their adoption and maintenance of behaviours which are beneficial to achieving positive values and goals.

One of the main inconsistencies targeted by this program is found in administration of quality group counselling sessions. In order for this program to be successful, it would need to be carried out in an organized and consistent manner to provide continuity from group session to group session, so that longer term behaviour change and goal attainment may be realized. Ideally, the program laid out in this manual would be carried out by staff who have received training specific to its delivery, and who have been allotted sufficient time in their work schedule to carry out tasks related to the operation of this program. This includes such activities as planning group sessions, recording outcomes of group sessions, reviewing behavioural contracts and completing clinical interviews. If these tasks are not carried out consistently and skilfully, or if the organization places little or no value on their completion, the quality of the program will undoubtedly suffer. Ideally, at least one of the group counsellors would attend the group counselling sessions consistently from session to session. Without a consistent group counsellor, it may be very difficult (except for a very high functioning group) to monitor behaviour changes, maintain continuity in group conversation and keep track of important logistical information (such as group participation by members) from session to session.

The program manual provides detailed descriptions of basic counselling skills and various techniques for use in this group program. However, carrying out these techniques skilfully and adapting them to a wide range of individuals and situations requires practice, and some counselling staff may benefit more from verbal instruction from a skilled teacher than from reading the manual. It is suggested that a training session or sessions be provided for counselling staff to practice the skills provided in this manual

and discuss the application of these skills for the specific youth with whom they work. This would include discussing actual instances in which the skills may be, or have been, used and the outcomes of those instances.

This program need not be carried out exactly as laid out within the manual. The program was intended to provide a flexible set of skills and guidelines to be adapted to the unique personality and climate of the individual group home or residential treatment centre. If the program is “forced” upon unwilling staff and youth by administration, it is unlikely that it will produce results that are genuinely beneficial either to the individuals or the organization. A forced introduction of the program may produce confusion, resistance and non-genuine attempts create the appearance that the program is being followed.

Youth in residential treatment centers and group homes experience a wide variety of needs, issues and challenges. It is necessary to continually evaluate the youth’s perspectives of the program and consider their suggestions for program improvement. Also, given that a wide variety of ideas and values related to child rearing and child care exist, it is necessary to allow counselling staff to express dissatisfactions or disagreements they may have with the structure or administration of the program. Successful integration would allow for open and on-going discussion and adaptation of the program within the context of counselling staff’s personal values, beliefs, and experiences. Integrating the program within the context of the values, beliefs, and experiences of both staff and youth can allow for a more genuine and effective program administration with a greater sensitivity for the social climate in which it is carried out.

MI and SFT have been used successfully to help youth with a variety of different behaviour change processes, however, the use of these methods of counselling with youth is relatively new. Previous research on the use of MI and SFT with youth has typically centred on short term interventions for specific behaviour changes. However, youth in group homes and residential treatment centres sometimes remain in placements for extended periods of time up to several years. For these youth, remaining involved in the group program outlined in the manual may be considered a longer term intervention.

The primary purpose of this group program is to provide a flexible format for helping youth manage a variety of different behavioural changes they may face and which may occur over an extended period of time. This program may also be used to provide multiple individual interventions, delivered in a continuous and fluid format, but which last only as long as the behavioural change process required for each specific issue.

Further research is suggested to determine the overall effectiveness of the program for use in youth group homes and residential treatment centres. This research should include both a statistical and qualitative examination of changes in youth behaviours and goal attainment. As well, a qualitative examination should be carried out regarding outcomes from the use of specific skills and interventions included in the manual, and attitudes and opinions held by both youth and staff regarding the program.

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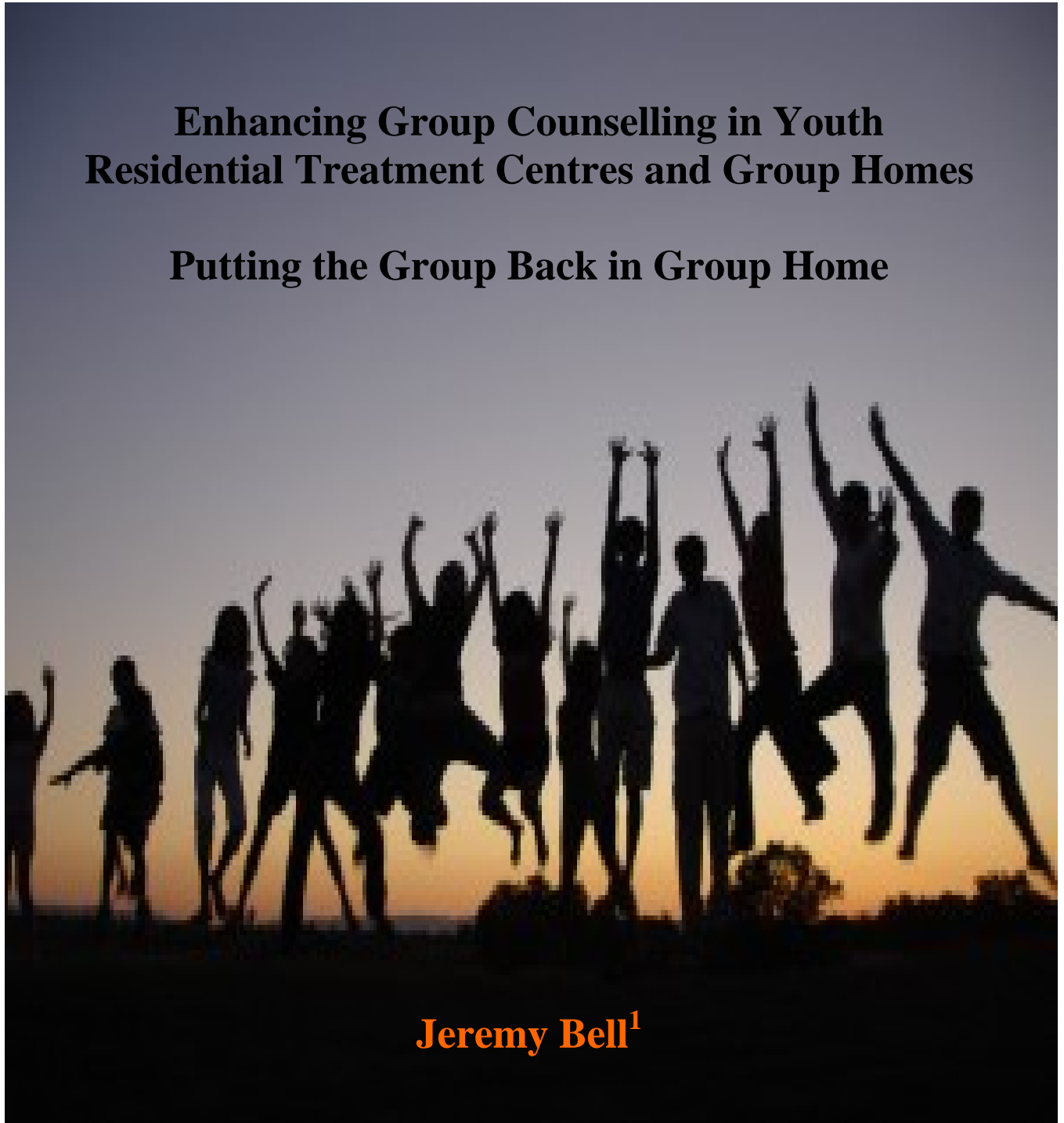
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Appendix

Enhancing Group Counselling in Youth Residential Treatment Centres and Group Homes

Putting the Group Back in Group Home



Jeremy Bell¹

¹Cover Picture Retrieved May 30, 2010 from
<http://www.google.ca/imgres?imgurl=http://www.stpeterssanpedro.org/wp-content/uploads/2009/01>

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Foreword

Group therapy can be a highly effective method of providing counselling and educational services to adolescents. One of the greatest benefits is the positive advice which adolescents can receive from their peers (Corey & Corey, 2002; Dies, 2000). In group, adolescents are provided with the opportunity to be exposed to the emotions and experiences of others similar to themselves. When adolescents are aware that others have gone through similar experiences, have made similar choices, and are experiencing similar emotions they are likely to feel less shame, guilt, and aloneness. When adolescents can witness others experiencing success with similar challenges, a sense of hope is instilled. Realizing these benefits is not without its challenges. The challenges of group therapy with adolescents include maintaining the attention of the group, maintaining consistent rules and structure, keeping the group focused in a positive direction, and handling arguments and negative behaviours.

There are many different approaches to running groups with adolescents. No single approach will work best for all adolescents at all times. As well, individual group counsellors may have a particular personal style of running groups which seems to work best for them. Running groups with adolescents requires patience, determination, a belief in oneself, openness to personal change and growth, and a genuine belief in the ability of adolescents to make positive changes in their lives (Dies, 2000).

This manual provides a framework for running groups focused on helping youth explore personal values, and achieve personal goals based on those values. This group counselling manual also provides quick access to information and generic skills which can be used to run any type of group. A word of caution may be in order here. This manual is not intended as a comprehensive guide for running groups for all issues which affect youth in group homes and residential treatment centres. Rather, the generic skills and information used in this manual may be combined with other resources to effectively run groups on most topics.

Types of Groups

Closed Groups: These groups run for a specific time duration and do not add new members throughout the course of the group sessions.

Open Groups: In these groups, new members may be added throughout the progression of the group. Open groups sometimes run continuously for years, members joining and leaving the group periodically, without any specific beginning or ending points.

Counselling Groups: These groups typically work on conscious personal issues that may lend themselves to short term problem solving (Corey & Corey, 2002). In a residential treatment centre, this may include addressing issues of bullying or completion of daily routines.

Psychoeducational Groups: These groups are used mainly for teaching purposes. Typically they do not include a great deal of emotional processing or processing of personal issues (Corey & Corey, 2002). In a residential treatment centre or group home, this may include a group educating youth about sexual health and sexually transmitted disease prevention.

Psychotherapeutic Groups: These groups are focused around helping members work on deep seated emotional and psychological issues (Corey & Corey, 2002). These groups may involve in-depth work around life experiences and traumas. In a residential treatment centre or group home setting, this may include past experiences of abuse, neglect or witnessing of violence.

Task Facilitation Groups: These groups are focused around a goal for common change (Corey & Corey, 2002). For example, counsellors may help youth create a task facilitation group (or committee) to work on improving some aspect of their lives at the group home or residential treatment centre.

The Counselling Relationship

The relationship between youth and counsellor is a powerful tool for influencing youth (Brooks, 2006; Goebel, 2002; Scales et al., 2006). Of course, it is important to remember that influence goes both ways in this relationship. The counsellors are also changed by the relationship with the youth. In group counselling, relationship dynamics are complex as each relationship is affected by other individual relationships, sub group relationships and the overall dynamic of the whole group.

Counsellor Roles: The group counsellor's roles are flexible and the group counsellors may need to take on different roles at different times during group (Richmond, 2000). According to Meeks (as cited in Richmond), group counsellor roles can include a "coach" providing positive advice and constructive criticism; a "traffic cop" directing the movement of the conversation; an "interpreter" interpreting and clarifying communication between individuals in the group; a "lion tamer" keeping control; a

“gardener” helping individual members and the whole group to grow; a “chess master” to map out future directions for the group; and a “director” keeping the group functioning as a single unit.

Using Judgement: Group counsellors working with adolescents are required to have a sense of judgement about the health, benefits, and dangers of adolescent ideas and behaviours (Richmond, 2000). This should be carried out without making judgements about the value of the adolescent as a person. When an adolescent displays or discusses negative behaviours, it is not helpful to simply listen without intervening (Richmond, 2000). Intervention for negative behaviours in group can take the form of enforcement of group rules (Richmond). Intervention for negative behaviours in and outside the group may take the form of making suggestions or expressing concern, (Corey & Corey, 2002) challenging negative behaviours, (Nichols & Goldstein, 2001) use of *behavioural contracts p. 82* and enforcement of stipulations, (Enea & Dafiniou, 2009) helping youth explore a variety of behavioural choices and alternatives (Miller & Rollnick, 2002; Richmond, 2000) information giving, (Prochaska & Norcross, 2001) or discussing ambivalence about behaviours and behavioural change (Miller & Rollnick, 2002).

Using Emotion: Group counsellors can model healthy expression of emotion for group members by appropriately expressing their own emotions during group (Richmond, 2000). Doing so can also help group members be aware of how they affect other’s feelings (Richmond, 2000). With this knowledge, group members are better able to empathise with other’s feelings (Richmond, 2000) which can improve their overall social functioning (Corey & Corey, 2002). At the same time, it is important for the counsellors not to become overly emotionally reactive toward group members (Azima, as cited in Nichols-Goldstein, 2001).

There is no one-size-fits-all model when it comes to the counsellors’ emotional expression. However, when determining the appropriateness of emotional expression, it is important to consider who’s needs are being met through the emotional expression. Generally speaking, emotional expression should be used by the counsellors to meet needs of the group members rather than satisfying their own emotional needs. For example, if the counsellor is demonstrating healthy emotional expression, or expressing emotional empathy for a client, then it is likely an appropriate use of emotion. Inappropriate uses of emotion may include the expression of emotions based on traumatic experiences or expression of anger due to a need to penalize a group member. While the counsellors may learn a great deal from the experience of group counselling, and may engage in experiences designed to improve emotional health, the group is not intended for the group counsellors’ emotional work.

Knowing Counselling Limits and Maintaining Appropriate Boundaries: It may be tempting to want to help youth work through all of their emotional difficulties in order to help them discover the “root” of those difficulties. It is a common misconception that counselling always requires deep emotional catharsis in order to be effective (Corey & Corey, 2002). Exploring emotions can have positive effects in helping youth identify their values, and to develop and maintain motivation to make changes. Sharing of deep

emotional issues and traumatic experiences is not something that should be expected of group members involved in this program. There are several reasons for this. First, child care counselling staff are not necessarily qualified to do therapeutic counselling with issues such as trauma. Inappropriate management of traumatic emotions by unqualified counselling staff can have highly detrimental effects for any client (Herman, 1997). Second, in a residential treatment centre, confidentiality, bullying, and teasing are major issues. Information about group member's emotions or past experiences may easily be used by others in the centre as a means of bullying, teasing, demeaning or blackmailing.

Understanding Adolescent's Experience: To relate to youth in a meaningful manner, it is necessary to make an effort to understand their experience. This does not mean that the counsellors need to completely understand everything about the youth. Rather, a consistent effort to respect, listen to and understand youth demonstrates caring and provides the basis for the counselling relationship (Goebel, 2002).

How to Understand: Consider your own experiences as a teenager (Dies, 2000). Take some time to reflect on what challenges, difficulties, and supports you experienced as a teenager. Also, reflect on the ways in which you may have responded to those challenges and difficulties. Keep in mind that the youth, with whom you work, may be experiencing many of the same or even greater difficulties. They may not receive the same kind of support you may have experienced when coping with these difficulties. This is often true for children in foster care who may not have consistent (if any) contact with parents or mentors to provide them with advice, encouragement and emotional support.

Partial Regression: It is important for group counsellors' to avoid becoming too rigid or authoritarian (Nichols & Goldstein, 2001). However, it is also necessary for counsellors to avoid becoming simply members of the group (Nichols & Goldstein, 2001). In order to carry out group counselling most effectively with adolescents, it is often necessary to exhibit attitudes and behaviours which can help bridge gaps between the adolescent world and the adult world. One such technique is known as "partial regression". Partial regression describes the process by which counsellors draw upon their ability to use creativity and humour to examine rules (including exceptions), to think outside the box; and use language, terminology and symbols to which youth can relate (Nichols & Goldstein, 2001). Partially regressed counsellors are also able to remain aware of their role as group facilitator, sometimes challenging negative thoughts and behaviours of members (Nichols & Goldstein, 2001). Counsellors who are able to relate to adolescents while, at the same time, maintaining a position of authority and promoting positive values, can serve as powerful role models (Nichols & Goldstein, 2001). Adolescents can learn from such role models that it is possible to be "cool" while at the same time maintaining positive values (Nichols & Goldstein, 2001).

Group Rules and Expectations

It is important to provide group members with clear and detailed information about what is expected of them during group (Dies, 2000). This explanation of rules should be carried out in the context of the overall group process.

For Example:

Counsellor: *One of the most powerful aspects of this group is the relationship that is formed between each of us. This relationship is an opportunity for each of us to learn about and come to accept ourselves, other group members, and the world around us. With this opportunity to understand that others share similar behaviours, thoughts, emotions and experiences, each of us can begin to see that we are not the only person, the worst person, or the most suffering person experiencing these things. Seeing others who have experienced the same struggles and achieved success can help us realize that we too can be successful; and we can learn ways to be successful by examining the ways others achieved their success. For this learning and growth to be possible, we need this group to be a place where each of us can feel able to share about ourselves and our lives openly and honestly. For group to be this type of place, we need to respect each other and participate. We can show each other respect by following certain rules which are created to help all of us feel like group is a place where we are safe, welcome and respected. We all have a role to play and each of our voices matters. Welcome to the group.*

Expectations may vary depending on the group counsellors and type or group, however, expectations generally include adherence to group rules, demonstration of respect for others, and demonstration of consistent effort to participate in the group. As well, it is important to inform adolescents that they should expect the same respect and effort from other group members and the group leader(s) (Dies, 2000).

Confidentiality: Confidentiality is vital to any form of counselling whether group, individual, couples or family. Individual group members must feel safe to disclose appropriate and important personal information. Having group members know that what they have discussed will be respected, and held in confidence, is essential to building trust within the group. This is essential to building the type of intimacy necessary for therapeutic work within the group. Confidentiality can be a particularly challenging issue in group work. The group counsellors and all the group members must respect confidentiality (Corey & Corey, 2002).

For counsellors working in a residential treatment centre or group home, this may indeed be challenging. First, youth may have difficulty understanding the importance of confidentiality. Second, the dynamics of living together in a community provides virtually limitless opportunities for confidential information to be shared with others (parents, siblings, and other group home residents). Group counsellors, working in a residential treatment center or group home, will have to be particularly cautious to avoid inadvertently sharing confidential information from group. Any breach may have extremely negative outcomes for group members.

At the beginning of group, it may be useful to have group members sign a contract agreeing to maintain group confidentiality (Corey & Corey, 2002). This contract can include the consequences that will be applied if a group member intentionally breaks

confidentiality (Corey & Corey, 2002). A more positive method of helping group members maintain confidentiality is by modeling appropriate behaviours and attitudes around confidentiality (Corey & Corey, 2002). If group members see that the group counsellors consider the confidentiality of information to be a serious matter, then they are more likely to view it in the same light (Corey & Corey, 2002).

Gossiping and Discussing People Outside the Group: One common rule in group counselling is that there should be no unproductive discussion of others who are not in the group. Discussion of others outside the group may be allowed if it is beneficial to the group discussion. Unproductive discussion of others outside the group can include gossiping, focusing on perceived negatives about others, or discussing others in a manner irrelevant to the group discussion.

There are several reasons for the “no unproductive discussion of others who are not in the group” rule. First, such discussion of others may take away from the therapeutic work being accomplished by group members. Complaining about others can be used as a defence mechanism to avoid discussion and processing of painful emotions by group members. Second, group members may begin to create unhealthy alliances against other residents of the treatment centre or group home. One example of unproductive discussion of others can occur when adolescents make complaints about parents or agency staff. In these situations, it is necessary to avoid taking sides (Corey & Corey, 2002). Counsellors should remain as neutral as possible (Corey & Corey, 2002). When listening to these complaints, it may be necessary to continually re-direct adolescents to focus on their own emotions and reactions to events, rather than discussing what they felt was wrong with the other person (Corey & Corey, 2002).

For Example:

***Counsellor:** I know that this situation with your father has really upset you but your father is not here right now. The person we are concerning ourselves with right now is you. I would like to know more about how you are feeling in the present moment (Corey & Corey, 2002).*

No Interrupting Others: While it is important for group members to be able to provide each other with feedback, group members should be able to express themselves without concern that they will be cut off or interrupted unduly by other members. Depending on the working stage of the group, and the nature of its participants, group counsellors will have to decide on appropriate measures for ensuring that discussion occurs in a respectful and orderly fashion. For groups in the beginning stage, or groups composed of less cooperative youth, counsellors may institute a rule that group members can only speak when holding a particular item such as a talking stick (Tlanusta-Garrett & Crutchfield, 1997). Tlanusta-Garret and Crutchfield suggest allowing the youth to select the talking stick as a group while on a walk or nature hike. These authors suggest that the stick could be adorned with tokens of value to the group (feathers, valuable pins, badges etc). In this way, members may be more inclined to respect the symbolic importance of the stick and the ritual involved in its use (Tlanusta-Garrett & Crutchfield, 1997). As groups move into

the progress into the *working stage p. 71* group members may be able to hold more of a free flow conversation taking turns initiative to speak and requiring less active facilitation by the group leader.

No “War Stories”: War stories are those which glorify negative behaviours in which group members have engaged. An example of a war story may include how much drugs and alcohol a youth consumed in a particular evening. This often involves one-upmanship where other group members may feel obligated to embellish their stories in order to maintain a sense of pride. War stories can quickly take the group off track, and promote negative values especially in youth who are impressionable and wish to maintain social status amongst their peers.

All Feelings Are Welcome: It is important to let group members know that they are free to express whatever emotions they may be experiencing during group. It is also important, however, to stress to group members that there is a difference between expression of emotions and acting out. For example, group members may be informed that there is nothing wrong with sharing feelings of anger during group by talking about them, but it is not acceptable to act on these emotions by becoming verbally or physically aggressive toward other group members.

Group Time is Shared as Evenly as Possible: Group counsellors should try to allow each group member access to an equal amount of air time during group sessions. This may not always be possible as an individual group member may have a particularly important issue to share in group which may take up a great deal of time for that group session. Group members need to know that, even though group time may not be shared evenly in each group session, an attempt will be made to allow group members to share at each group and that group counsellors will attempt to have group time shared evenly over the course of several groups. For example, if one group member did not have a great deal of group time in last week’s group, then counsellors may start off the group this week by having that member share. By framing group time as something valuable and to be shared, counsellors can encourage members to make use of their group time and to feel privileged to have a group of individuals willing to listen to their stories.

Level of Sharing: It is difficult to set hard and fast rules regarding how much sharing is required by each group member. For some members, sharing may be much more difficult than for others. However, a guideline may be set in place that each group member should make an effort to participate in each group session.

Rules Around Giving/Receiving Feedback: Group members should provide feedback to others using care and concern. It should be meant for the well being of the individual receiving the feedback. Feedback that is demeaning, sarcastic, or commanding is not acceptable. One way of avoiding conflict is to have group members practice using I statements when giving feedback to other members.

“I Statements”: An I statement is one which begins with the word I. I statements require an individual to take ownership for their own thoughts, feelings, and opinions. I statements are a useful communication tool in that they allow individuals to:

- identify and communicate thoughts and emotions about a topic,
- identify behaviours which are causing conflict and acknowledge that these behaviours do not occur 100 per cent of the time,
- help avoid labelling others or personalizing in the process of describing behaviours which are causing conflict, and
- help resolve the current conflict and prevent future conflicts (Rethinking I statements).

For Example:

You Statement: *You’re such a Jerk, you always do that, and I hate you for it.*

I Statement: *I feel/think _____ when people do that and I believe there are better ways we could handle this type of situation (Rethinking I statements).*

Listening and Attention

Maintaining attention levels can be a major challenge in running groups with youth in group homes and residential treatment centres. These youth often experience a variety of health or other issues which can impact their ability to maintain attention levels for long periods of time. Examples include attention deficit hyperactivity disorder (ADHD) and fetal alcohol spectrum disorder (FASD). These issues create difficulties for group counsellors attempting to carry out structured, talk-based group activities with longer durations.

Some general suggestions for maintaining attention levels include:

1. The greater the social impairment of group members, the more structure and direction is necessary from the group counsellors in order to carry out group counselling (Corey & Corey, 2002).
2. Group counselling should be carried out in an area with few distractions. Group counselling should not be carried out in an area where persons not involved in the group are working, where toys or items of interest (without direct relevance to the group) are kept, or where there are windows which hold a view of interesting activities.
3. The time of day that group is carried out is important as levels of wakefulness, arousal, and physical hunger may impact group members’ attention levels. Early morning and early afternoon hours should be avoided as these times are generally the least effective for learning and attention (Klien, 2004).

4. Group counsellors should be cognizant of their tone of voice, rate of speech, and body language, as these factors may impact the level of attention which group members are able to maintain. Each group counsellor may develop his/her own style of communicating which promotes attending. For example, one group counsellor may speak with a variety of intonation and hand gestures. While communication style can affect attention, it is also important to maintain a communication style that is natural and genuine...and not distracting in and of itself.

5. Group activities, such as role-playing, allow group members to engage in physical movement, playful interactions and behavioural rehearsal (Corey & Corey, 2002). Providing opportunities for these types of engagement can be useful in maintaining the attention level of group members (Corey & Corey, 2002).

6. As a general rule, the younger the age of the youth, the more group should include physically active components (Berg, Landreth, & Fall, 2006). For children 10 years and under group, play therapy is preferable to formal talk therapy oriented groups due to issues with attention span and a lack of younger children's ability to verbalize emotions (Berg, et al., 2006). Formal talk oriented therapy, may be more appropriate for youth age 11 and up as they possess greater abstract reasoning abilities, and may be able to generalize information from group counselling to other life experiences (Berg et al., 2006). Groups comprised of younger members should also meet for shorter time periods; for example, group lengths of about 30 to 45 minutes are appropriate for primary grade children (Berg et al., 2006).

7. According to Berg et al. (2006), the greater understanding youth have about their purpose and function in group, the less structure is required. When group members are aware of their roles and functions, fewer formal rules are needed to guide group member behaviour.

8. Fun is an important ingredient of successful group with adolescents and children (Nichols-Goldstein, 2001). Making the group an enjoyable experience can also have a positive effect on the attention level of group members.

Fetal Alcohol Spectrum Disorder: Youth with FASD experience a range of intellectual deficits which can affect their ability to function in group. These include poor oral and written language comprehension, difficulties generalizing from situation to situation, difficulties understanding sequence of events, difficulties with abstract thinking and difficulties remembering concepts from one day to the next (Duquette, Stodel, Fullarton, & Hagglund, 2006). Youth with FASD also experience a range of other deficits which can make group work difficult. These include impulsivity, distractibility, difficulty understanding and labelling emotions, poor understanding of social cues, difficulty making causal connections and susceptibility to manipulation by others (Duquette et al., 2006).

Duquette et al. provide suggestions for creating a positive learning environment for youth with FASD. These include:

1. Speak slowly.
2. Explain complicated ideas piece by piece.
3. Get to know the youth's intellectual strengths and deficits, and maintain an awareness of when the youth is upset or agitated. This may be a sign that the youth is confused or does not understand something.
4. Answer questions and, when necessary, be willing to repeat instructions using simple language.
5. Employ hands-on activities with solid objects.
6. Use demonstrations to clarify instructions.
7. As much as possible, make activities fun and interesting. Using humour can be beneficial in this regard.
8. List the sequence of activities and post this list for youth to see.
9. Teach the youth to use a *weekly goal planning sheet p. 82* and make lists.
10. Choose group members in such a manner that youth with FASD are able to participate fully. For example, it may not be wise to put one low functioning youth with FASD in a group of higher functioning youth as the individual with FASD may not be able to fully comprehend or participate in the discussion.
11. Help youth with FASD develop responsibility for their actions by holding them accountable. Helping youth with FASD develop accountability can be a daunting task as it can often be difficult to determine which aspects of their behaviour are related to intellectual deficits and which are negative learned behaviours.
12. Use positive reinforcement and praise often to help shape behaviour.
13. Maintain awareness of issues (such as literacy issues) that may impact the ability of youth with FASD to complete homework assignments. Modify assignments if necessary.

Attention Deficit Hyperactivity Disorder: ADHD is not necessarily due to a deficit in attention but rather is due to a tendency of individuals with this disorder to attend to inappropriate information (Zentall, 2005). Individuals with ADHD are inclined to pay attention to intense stimuli such as bright lights and loud sounds, as well as changes in their environment (Zentall, 2005). Attending to these intense stimuli, however, comes at the expense of failing to attend to important, but less intense, stimuli such as textbooks and the teacher's instruction (Zentall, 2005).

Zentall (2005) provides suggestions for working with youth experiencing ADHD in learning situations. These include:

1. Remove stimulus not relevant to the topic at hand. This includes removing distracting sounds, pictures, toys, etc. This also includes removing extraneous information from instructions given to youth with ADHD. Instructions should be direct and to the point. Do not allow, or engage in, off topic conversation.
2. Emphasise important points in the discussion through the use of altered tone of voice, rate of speech or use of pauses (Milich & Lorch, as cited in Zentall, 2005).
3. Question youth with ADHD about social events that have just taken place (Zentall, 2005, Cassady, & Javorsky, 2001). Discussing social events in the here and now can be an excellent way to help youth with ADHD gain social competence as it draws their attention away from extraneous external stimuli and helps them focus on their social reality.
4. Engage youth with ADHD in self-monitoring procedures to help control their own behaviours. This can be accomplished through having them discuss social situations and their values. Techniques such as *role play p. 60* and *journal writing p. 89* can also be useful in this regard. Youth with ADHD often have difficulty understanding internal states, such as behavioural standards and values that are necessary for appropriate social behaviour, as they tend to focus more on their physical reality. Youth should compare their behaviours to their own potential, past successes, values or behavioural ideals rather than comparing their behaviour to behaviour of others. Helping youth with ADHD increase their ability to self-monitor can improve pro-social behaviour and can help them learn to take responsibility for their actions.
5. Use attractive colours when writing out instructions or group rules. Visually attractive pictures may be added, but only if they are used to illustrate the written concepts.
6. Maintain moderate levels of stimulation. Too much or too little excitement may cause youth with ADHD to become distracted or preoccupied with extraneous information.
7. Teach youth with ADHD problem solving strategies which involve breaking larger problems into smaller components such as *problem based learning exercises p. 96*.
8. Discover areas which are interesting to youth with ADHD and emphasise these areas in discussion. At the same time, however, it is necessary control the amount of time that youth with ADHD speaking.
9. Increase opportunities for physical movement during group, particularly movement that is initiated by the youth with ADHD. For example, a counsellor may have a youth with ADHD distribute handouts to other group members or turn pages while the counsellor is writing out instructions on large sheets of paper.

10. Employ alternate activities on occasion such as bringing in an informational video or holding group in an outdoor setting.

Overlap may exist between strategies that are effective for youth with ADHD and youth with FASD. Creativity and flexibility should be used to create group activities which can provide the greatest benefit for youth experiencing these disorders.

Session Length/Frequency and Group Size

Session Length and Frequency: Length for groups with youth and persons with developmental disabilities generally vary from 45 minutes to 90 minutes in duration depending on the age/developmental level of group members, size of the group, *type of group p. 41*, and practical considerations of the setting (Corey & Corey, 2002). When running groups focused on goal setting and behaviour change, it may be beneficial to hold multiple group sessions in a week (Marden-Velasquez & Crouch 2001). Holding groups often can help group members maintain a focus on values, goals, and emotions related to their behaviour changes. Holding multiple, shorter, group sessions in a week may also be preferred to holding a single, longer, group session when the group includes members with attention difficulties (Corey & Corey, 2002). It is up to group counsellors to determine the optimal length/frequency of sessions.

Group Size: According to Corey and Corey (2002), adolescent groups should generally include six to eight group members. These authors also suggest that groups with elementary age children should include about three to four members. In a group home or residential treatment centre, there may be practical considerations for holding groups comprised of members from the same house or unit. Also, holding groups composed with consideration for age and housing can have benefits for issues such as conflict resolution, achievement and discussing daily behavioural change goals. Some houses or units, however, may include a variety of members so that the living unit is either too large or too small to effectively carry out group work. In the case of overly large houses or units, youth may be divided into separate groups altogether or the “house group” may split up into sub groups when completing certain activities. For example, in a house comprised of 12 residents, all twelve of the residents may meet as one group for the check in round. The group may then split into two, six member sub groups to analyse the week’s *behavioural contracts p.82*, re-focus, and set new *goals p. 80* for the upcoming week. The two sub groups may then re-convene for the check in round.

At other times, such as during *conflict resolution groups p. 105*, it may be desirable to have all twelve residents meet as a single group for the entire group meeting. In the case of very small houses or units, it may be desirable to combine the residents from two houses or units into a single long term group. It is not recommended that the composition of groups change from week to week due to issues of convenience. Constant changes in the group composition may impede the group from reaching latter stages of development due to a constant need to re-establish group norms, trust and general cohesiveness. It may, also, be difficult for group members to gain a sense of ownership for a group that is constantly in flux.

Basic Counselling Skills

Active Listening: In order to truly hear what youth are saying, it is necessary to not only listen to the verbal content but also the manner in which youth are expressing themselves non-verbally (Dillon & Murphy, 1998). This includes observing the youth's tone of voice and body language (Dillon & Murphy, 1998). In order to effectively carry out active listening, the counsellor needs to place their full attention on the youth and empathise with what the youth is feeling (Dillon & Murphy, 1998). When a counsellor is too focused on what they will say next (or daydreaming, or thinking about issues in their own life), they are not able to be fully attentive to the members of the group (Corey & Corey, 2002).

Developing Discrepancy: When a counsellor discusses behavioural changes with a youth, it is important to help the youth develop their own motivation for change, based on what they value, rather than attempting to indoctrinate them with one's own ideas about the need for behaviour change (Miller & Rollnick, 2002). This can be done by exploring the discrepancies between their current behaviours and values, and perceived importance of change (Miller & Rollnick, 2002). Developing discrepancy can be used as a means of confronting negative thoughts or behaviours of group members (Corey & Corey, 2002).

For Example:

***Counsellor:** On the one hand, you've mentioned several times that your family is very important to you. On the other hand, you've mentioned that your drinking and drug use has caused several problems in your relationships with your family members such as "_____". How does your substance use fit with your value of family?*

or

***Counsellor:** You've stated that your use of alcohol and drugs does not cause any problems with your family members, however, you've mentioned that you and your mom fight most often when you have been using substances, and that the topic you argue about most frequently is your substance use. I'm just wondering how you make sense of this situation.*

Closed Questions: Closed questions are those which are likely to elicit a short response, often "yes" or "no" (Dillon & Murphy, 1998). Closed questions are useful when a counsellor is attempting to elicit specific information from an adolescent. Closed questions can also be useful when a youth is reluctant to respond to questions, or when he/she is prone to providing lengthy answers which include a great deal of extraneous information. This type of question is generally considered to be less useful for a counsellor attempting to help youth explore their emotions or explore their experiences in greater depth (Dillon & Murphy, 1998). Closed questions often include an inference

about the answer the counsellor is expecting and may lead youth to feel that they should respond in a certain way (Dillon & Murphy, 1998). Youth may also become annoyed that the counsellor is making assumptions about the way they should think or feel (Dillon & Murphy, 1998). When too many closed questions are asked, youth can become conditioned to respond in short answers without really processing the information being discussed (Dillon & Murphy, 1998). These questions often begin with, “is, do, did, will, are, or have” (Dillon & Murphy, 1998).

For Example:

Counsellor: *Do you feel angry about what happened with your father?*

Youth: *Yes.*

In this question, the counsellor was inferring (intentionally or unintentionally) that the youth would feel angry about what had occurred with his/her father. The youth is likely to answer either yes or no to this question.

Open Questions: Open questions leave more room for an elaborated response. Open ended questions are best used when attempting to explore a youth’s emotions or experience in greater depth. When using open ended questions, the counsellor is making a statement that they do not know what the youth’s answer will be. The answer is then left open to the youth (Dillon & Murphy, 1998). These questions often begin with, “Who, what, where, when, why, or how” (Dillon & Murphy, 1998).

For Example:

Counsellor: *How do you feel about what happened with your father?*

Youth: *I felt angry that my father had done that to me and ashamed to be related to him.*

By using an open ended question, we not only ascertain that the youth is experiencing anger, we also find out that the youth experienced feelings of shame.

Reflecting: This skill involves reflecting back what the youth has just said. Using reflections lets individuals know that the counsellor is listening (Dillon & Murphy, 1998). A counsellor can use reflecting skills to emphasize a particular aspect of what the youth has said (Dillon & Murphy, 1998). Choosing to focus the youth’s emotions encourages the youth to further explore how they feel about a particular issue (Dillon & Murphy, 1998). Emphasizing the positive aspects of a youth’s behaviour can encourage him/her to focus on their own strengths and the times in which they have done things well (Warner, 2007).

For Example:

Youth: *I'm fed up with school. I rarely get my homework done, and when I'm at school, I don't feel like being there.*

Counsellor (Emphasising Affect): *I'm hearing that you're really frustrated with your school situation.*

or

Counsellor (Emphasising Positive Behaviour): *So, I'm hearing that despite your difficulties with school, you are still managing to attend classes and you do complete your homework at times.*

It can be beneficial to follow a reflection of positive behaviour with a question such as: "How are you managing to do that?" (Warner, 2007). Asking this question encourages the youth to own this positive behaviour and consider the strategies and resources they used to achieve it (Warner, 2007). The counsellor can then encourage the youth to explore how they could use those same strategies and resources to bring about similar behaviours in the future (Warner, 2001).

Summarizing: Summarizing involves reflecting back major themes gleaned from an individual's story or from a group conversation. This is useful to keep discussion focused and to facilitate transitions from one topic to another (Dillon & Murphy, 1998). Summarizing may include reflecting the theme of the conversation among several individuals.

For Example:

Youth 1: *I'm fed up with school. I rarely get my homework done, and when I'm at school, I don't feel like being there.*

Youth 2: *I hate school too. I don't find the work that bad, but I can't handle going to math class. It's just so boring.*

Youth 3: *I don't mind school overall, but I don't like math class.*

Counsellor: *So some of the group isn't enjoying school these days. I'm hearing that there are others who don't feel this way about school overall, and who seem to not be enjoying math class.*

Summarizing can be particularly useful at the end of a group session (Corey & Corey, 2002). A counsellor may summarize what has occurred during the group or may have each youth summarize what the group experience has been like for them, what they have learned, and what they may wish to work on in the future (Corey & Corey, 2002). The counsellor can also summarize their experiences of the session and impressions of what has occurred in terms of progress made by individual members and the group as a whole.

This can be done as a “check out” exercise which takes place at the end of each session. The counsellor can then summarize overall themes from the group and make connections between and among member’s check out responses. Themes highlighted by the counsellor may include group members’ shared experiences, beliefs or emotions that emerged during the session.

Silence: While silence can be uncomfortable, it can also be an effective way to help an individual express his/her story (Dillon & Murphy, 1998). Asking too many questions may keep counselling on the surface as adolescents do not have the opportunity to elaborate on their own (Dillon & Murphy, 1998).

Skills Used in Group Counselling

Directing: Group counsellors should take an active role in the group by leading conversation, transitioning, and enforcing the rules of the group (Corey & Corey, 2002). The extent of the direction counsellors provide will vary from group to group (Corey & Corey, 2002). In most groups, counsellors will tend to be more directive in the early stages of group; and allow the group more opportunities to run itself in the later stages of working or termination (Corey & Corey, 2002). This is an ideal progression which does not always occur (Corey & Corey, 2002).

Lack of trust within the group is generally the main cause of lack of progression in groups (Corey & Corey, 2002). Sub grouping (group members forming small group alliances within the group), or incompatibility between group members may also keep the group from progressing to the point where little intervention is required by the counsellors (Corey & Corey, 2002). Sometimes even later stage groups may need a great deal of direction. Figure 1 illustrates intervention strategies commonly used at various stages of group progression.

Linking: Highlighting similarities in the youth’s life experiences and emotional affect can be an effective method for increasing group cohesion. When youth are provided with an opportunity to see that others share similar thoughts, feelings and experiences, they are likely to feel less isolated. Knowledge that others have made the same mistakes can serve to help raise self-esteem as the youth realizes that they are not the “only one” or the “worst one”. As well, seeing others who have gone through similar experiences and have emerged successfully can provide youth with hope that they too can be successful in their struggles. An example of a time that linking may be useful is at the beginning of a group counselling session after the youth have completed the initial check in. Counsellors may summarize themes that have arisen during the check in and similarities among the participant’s statements (Corey & Corey, 2002). Links can also be made between the current group discussion and discussion from previous groups (Marden-Velasquez & Crouch, 2001).

For Example:

Counsellor: *Josh, you had talked about experiences earlier today that are very similar to what Matt is talking about now. Do you have any feedback for Matt about what he has just told us?*

or

Counsellor: *Josh, can you identify with what Matt is talking about?*

Interpreting: Interpreting involves making inferences about one's own behaviours or the behaviours of others. It is sometimes useful for counsellors to make inferences about a youth's behaviour in group, or to encourage a youth to make inferences about their own behaviour (Corey & Corey, 2002). It is important for counsellors to word any interpretations as a hypothesis rather than stating it as a fact (Corey & Corey, 2002).

For Example:

Counsellor: *You seem to use short responses when it is your turn to speak; however, you have managed to provide quite a bit of feedback for others in the group. I have noticed that you seem to want to rescue others at times. I'm wondering what you think this behaviour has to tell us (Corey & Corey, 2002).*

Modeling: Certain core values should always be modeled by counsellors. These include enthusiasm, openness to experience, empathy, truthfulness, and respectfulness. (Corey & Corey, 2002). Counsellors can also model positive behaviours by the way in which they give and receive feedback. Counsellors who are non-defensive, willing to listen, and use positive communication skills will provide a powerful model for the group (Dies, 2000).

Self-Disclosing: Group counsellors must use caution when self-disclosing. Too much self-disclosure can turn the focus of the group toward the counsellors. Self-disclosure should not be used by counsellors as a means of becoming part of the group or working through their own psychological issues (Corey & Corey, 2002). Counsellors can model self-disclosure by expressing emotions they experience during the group process but the purpose of self-disclosure should always be to enhance the therapeutic value of the group for the group members (Dies, 2000). Self-disclosure used in an appropriate manner can demonstrate that counsellors are "human" and can help youth relate to the counsellors (Dies, 2000). When counsellors model self-disclosure, it can help reduce anxiety about self-disclosing and can provide an example of how to properly self-disclose (Dies, 2000).

For Example:

Counsellor: *I always feel somewhat anxious at the beginning of a new group. I get butterflies in my stomach and my mind often seems to race. I have found from experience, however, that the amount of benefit the group members and I receive is worth experiencing my initial fears. I am always amazed how group members are able to do such amazing work, support each other and make real changes in their lives. So, I just*

take a few deep breaths and trust in everyone's ability to make this the best group possible (Dies, 2000).

According to Dies (2000) the counsellor has accomplished a number of goals in this example of self-disclosure. These include:

- Normalizing anxieties the youth may have about the group process.
- Modeling self-disclosure of current emotion and experience.
- A behavioural strategy has been introduced to help youth deal with feelings of anxiety.
- The counsellor has expressed an optimistic attitude toward the group process.

According to (Dies, 2000) the counsellor can then ask if any other group members can relate to their experience of anxiety. These authors also note that it can be beneficial for counsellors to maintain awareness of members who respond with appropriate self-disclosure, as these members may provide the group with positive peer role modeling in the future.

Discovering and Reviewing Successes: Discussing successes can be a powerful means of helping the youth become aware of internal strengths which they may not be aware of (Warner, 2007). This can also help youth become aware of problem solving strategies, external supports and can help them build self-efficacy in handling current problems (Warner, 2007). Successful behavioural change can include the presence of a positive behaviour or the absence of a negative behaviour. When a youth mentions a time that they have successfully made a behavioural change, it is important to ask “when else” have they made that change (Miller & Rollnick, 2002, Warner, 2007). This question can be asked several times to help the youth identify several different occasions in which they have been able to make a change. Youth may not be able to immediately recall all the instances of change, so if the youth responds that there are no other such instances, it is often useful to use silence in order to allow them time to think (Warner, 2007). After giving a youth time to think, if they still do not recall any instances of behaviour change, the counsellor can ask them to describe any times where they have made part of the change, or made small steps towards the change (Warner, 2007).

For Example:

Counsellor: *Can you think of a time you were able to avoid using methamphetamine, even for a day?*

Youth: *No, I always need to smoke meth, every day.*

Counsellor: *(silently waits)*

At this point, there are several options. A counsellor may continue to use silence if it appears that the youth is giving an inaccurate appraisal of their methamphetamine

smoking habits. For example, in a residential treatment centre where youth are not allowed to use substances, the counsellor may have a high degree of certainty that the youth has not used methamphetamine today. The counsellor may also wish to ask the youth about a behaviour change occurring over an even shorter time period or on a smaller scale.

For Example:

Counsellor: *You don't appear to be high today, how did you manage that?*

or

Counsellor: *So, tell me about a time you have managed to avoid smoking meth for a few hours.*

or

Counsellor: *Tell me about a day when you chose to smoke less meth than you regularly do.*

It can also be useful to open the question up to other group members as to times they have had successes with similar behavioural changes. Posing this question to the group, as a whole, can have several benefits. Individuals who are having difficulty recalling instances of change are given time to think while other group members provide their stories of change. Also, other group member's change stories may trigger memories of similar changes.

Inability to recall is not the only reason why youth may not respond with accounts of exceptions to problem behaviours or instances of positive behaviour change. Remember that adolescence is a time of identity formation and that youth may gain a sense of self-identification from their engagement in problem behaviours. Youth may also view engagement in alternative behaviours as "un-cool" (Enea & Dafinoiu, 2009). For example, a youth may identify themselves as a "meth head". This individual may be resistant to admitting exceptions to the behaviour as doing so may bring into question their created identity. The youth may also be resistant to discussing behavioural changes in front of peers because doing so may alter the image that they wish to project to others. Having other members discuss their instances of behavioural change may help an individual understand that participation in problem behaviour is not necessary in order to be cool, or have a strong sense of personal identity.

Once the counsellor believes that a group member or set of members have adequately considered and identified instances of change, more in-depth exploration of these instances can begin. It is important to identify "what was different".

For Example:

Youth: *Well, I guess I haven't smoked any meth today.*

Counsellor: *So, what is different today than days when you are smoking meth?*

Youth: *Well, I'm in here and I can't get any.*

Counsellor: *What else?*

Youth: *I can't get any here, and I don't want to go "AWOL" to go get some.*

Counsellor: *So I'm hearing that being in a place where meth is not readily available can be an effective strategy to helping you avoid smoking meth.*

Youth: *Sure, I guess so.*

Counsellor: *I'm wonder what kept you from AWOLing today and going to get some meth?*

Youth: *Well, if I AWOL then I'll lose some of the privileges I've earned here. I like having a later bedtime and not having the staff always watching me every second to see if I'm going to AWOL. Also it's cold out and I'm been having a good day today.*

Counsellor: *Any other reasons you made the choice to stay?*

Youth: *Well, honestly, I kind of hate being out on the streets sometimes. It's fun to AWOL, but last time I hung out with my meth friends my friend's dealer had a knife, he jacked us and beat me up pretty bad. Also, it makes me wonder how good my friends are because they didn't help me. I need real friends you know.*

Counsellor: *So, I'm hearing that there are a number of things you value that have kept you from AWOLing and getting meth today including personal comfort and warmth, maintaining your earned privileges, having more freedom at the group home and maintaining your personal safety. I'm also hearing that you value having real friendships and that you're not sure if your meth using friends are real friends. I'm hearing that being in a place where meth is not readily available is helping you realize some of the things you value. I'm wondering how you could use this information to help you achieve what is important to you in the future.*

Youth: *Well, I guess I need to think more about what I really want you know. I don't like a lot of things about AWOLing and using meth and I do have some decent friends here. I guess in the future, I could think these things through when I'm tempted to AWOL.*

It is also useful to explore times when youth have made behavioural changes without coercion from others as these instances provide examples of times where they were

internally motivated to make changes for themselves (Miller & Rollnick, 2002). Instances of change that the youth seems to be proud of, or pleased about, are particularly important to explore (Miller & Rollnick, 2002). It is often important to recognize both internal factors (personal strengths, values, goals) and external factors (pressure from others, availability options) contributing to a youth's behaviour change choices (Corey & Corey, 2002). It is important to explore the youth's internal motivations for making the change(s) as internal motivations tend to be generally more beneficial for maintaining long term change (Miller & Rollnick, 2002) and doing so can help them learn more about the person they would like to be.

A group counsellor may, at any point, open this discussion to the group to determine if other group members have insights regarding, or can relate to, the experiences, emotions, and motivations being expressed. Doing so may help group members examine their own experiences, and normalize each other's experiences.

Role Playing: Role play can be an excellent group counselling tool to use with adolescents to keep group member interest high and keep the group session focused in the present (Corey & Corey, 2002). Role playing can be a useful tool in providing social learning and emotionally positive experiences for group members. Role playing requires group members to act spontaneously, work in teams, engage in creative problem solving and learn to identify with each other's emotions and experiences (Corey & Corey, 2002). As well role playing activities can help group members improve their communication, practice positive behaviours and observe other's reactions to those behaviours (Corey & Corey, 2002).

For a group that is new to role play activities, it may be awkward to have group members role play with each other. This is especially true if the group is comprised of highly self-conscious adolescents. For the first few times that role play activities are used it is often a good idea to have one of the group counsellors role play one on one with a single group member (Corey & Corey, 2002). Once the group becomes more familiar with the role playing process, more complex role plays may be used that involve multiple group members and role plays may be carried out that do not involve a group counsellor as a participant.

According to (Corey & Corey, 2002) group members should be informed, when they first join the group, that role playing will be used during the group process. These authors note that this should be so that when the time for role playing arrives, it does not come as a surprise. It is important not to be forceful when engaging group members in role playing activities. Self-conscious group members may be provided with an opportunity to observe other's role playing prior to role playing themselves. These members may be asked to share their feelings and observations about the role play in order to begin their involvement in the role play process (Corey & Corey, 2002). New members may participate in role plays based on other group member's experiences, prior to engaging in role plays based on their own experiences. Group members may be gently reminded that role playing is an important part of the group process and that it is important for individual group members participate in role playing for the benefit of the whole group.

For Example:

Counsellor: *I'm aware that role playing may seem a bit silly, but no one ever said that it had to be totally serious. Let's have some fun and see what we can learn about ourselves and each other (Corey & Corey, 2002).*

At different points during the role play, the group counsellors may stop the action in order to examine what participants or other group members are thinking, feeling or observing in the moment (Corey & Corey, 2002). The counsellors can explain that role play is like a movie and, at certain points, they may need to hit the pause button in order to examine what's going on. When the role play is complete, group members should discuss how they will handle the role played situation or similar situations in the future (Corey & Corey, 2002). The counsellors may also have group members discuss how they have handled similar situations in the past and what the outcomes were. When first introducing role plays to the group, it may be useful to have group members focus primarily on successfully handled situations. Focusing on successes can help raise group member self-efficacy for handling similar situations and about role playing, and can promote discussion which provides members with positive options.

Group counsellors may also have members discuss their values and the manner in which they apply to the situation. Group members may also discuss what they perceive other's values to be in the situation and the connections between other's values and behaviours. Group members may discuss possible solutions to the situation that would provide for the greatest, or fairest, fulfillment of the values for everyone involved in the situation. Focusing on values can help group members gain insight into the reasoning behind other's actions. When adolescents explore the values behind other's actions, they may be able to recognize that other's actions are not intended as personal slights. They can begin to understand that others are not unlike themselves e.g., they choose their actions in order to fulfill their own needs, values, and goals. Having individuals play the part of significant others in their lives can be another means of helping group members gain understanding and empathy.

For Example:

Counsellor: *I know you had mentioned after completing this role play that you feel like your mom is very strict because she "hates you", however, what other motives and values do you think might be guiding your mother's actions.*

or

Counsellor: *As you were role playing your mother, what was motivating your behaviour? What were you thinking/feeling, what values were you trying to realize and what were your goals?*

The individuals directly involved in acting out the role play are not the only ones involved in the role play process. The entire group should be involved in the role play process in one way or another. Group members who are not role playing can provide observations about the role play, identify similar experiences they have had, provide empathy and emotional support, act as video recorders identifying important information about what has been said/done in the role play, and can *develop discrepancies p.52* in role playing members dialogue and behaviours (Corey & Corey, 2002).

Sample Role Play: Josh has mentioned difficulties he has with his peers encouraging him to steal when they are out at the mall together. He states that he has a hard time handling these situations as he does not want to get in trouble but, at the same time, he does not want to look like a “chicken”. The group counsellors encourage Josh to role play this type of scenario in group to practice how he might handle future situations. Josh agrees.

Step 1 Describing an example. A group counsellor encourages Josh to set the scene by providing the group with a detailed description of what is occurring (Corey & Corey, 2002). This includes the location, number of peers he is with, the various roles which each of his peers play, how Josh typically reacts to the situation, and any other information he deems relevant. A group counsellor may also suggest that Josh provide a sample of the dialogue which typically occurs in this situation (Corey & Corey, 2002). For example, Josh may state that the situation involves three peers. One of his peers strongly pressures him to steal a CD from a music store. This peer states that he is a “chicken” and a “wimp” if he decides not to steal the CD. His second peer pressures him as well, but seems to be mostly taking the lead from the first peer. The third peer mentions that not stealing would not make Josh a wimp but stops talking when rebuked from the first peer. Josh also describes that he usually starts to protest but gives in quickly and steals the CD when his peers begin to call him names. He states that he feels that he has to steal the CD or his pride will be damaged.

Step 2. Determining participants. A group counsellor asks the group for volunteers to join in the role play. Participation in the role play should be framed as a valuable opportunity.

For Example:

Counsellor: Who would like to have the chance to join Josh in this role play?

Step 3. Determining participant roles. Josh has identified that his goal in completing this role play is to learn how to better handle peer pressure. Hence, the main purpose for this role play is to help Josh to engage in experiential learning which helps him to better handle peer pressure. This can be achieved in different ways (Corey & Corey, 2002).

Option A. Josh could play the role of himself in order to practice handling the situation from his own perspective. A group counsellor and/or other group members could play the other roles. A group counsellor may stop the role play at various points so the rest of the group could then provide suggestions for Josh to try out (Corey & Corey, 2002). A group

counsellor and/or group members can also discuss with Josh how they perceived him and what they feel/think while interacting with him (Corey & Corey, 2002). Having peers describe how they perceive Josh can be beneficial as he may be more responsive to their feedback rather than feedback from an adult (Corey & Corey, 2002). A group counsellor can then re-start the role play, or continue the role play from that point, so that Josh could try out the suggestions (Corey & Corey, 2002).

or

Second, Josh could take on the role of one of his peers and the group counsellor and/or other group members could take turns playing the role of Josh (Corey & Corey, 2002). The group counsellors and/or other group members will describe as well as model the suggested behaviours. By doing so, Josh will experience how his peers might perceive him handling the situation in different ways (Corey & Corey, 2002). The role play may be stopped at any point and group members may discuss what they are thinking/feeling about the situation (Corey & Corey, 2002). Josh may discuss how he perceives himself as reflected by the other group members playing his role.

4. Role play discussion. After the role play is completed, a discussion may be held regarding any final observations the group counsellors or group members may have. Group counsellors may wish to make an overall summary about the role play and learning that can be gleaned from the experience (Corey & Corey, 2002). The group member whose situation was role played should be thanked for sharing his/her experience and should thank others for participating. Similar situations other group members have experienced may be discussed. Group members may wish to role play these situations.

Providing Suggestions to Group Members: Group counsellors may provide youth with suggestions for homework exercises. Group counsellors may also provide group members with information pertinent to their situation or challenge members take a look at their situation from a different point of view (Corey & Corey, 2002). Group members may also give suggestions to each other. *I statements p. 46* can be useful for delivering suggestions in a way that is non-directive and respectful of the youth's choices. Because adolescents are often more responsive to feedback received from peers, it is advisable, at times, for group counsellors to elicit feedback from other group members rather than directly providing suggestions to group members. In these instances, counsellors should elicit feedback from members who they believe will provide positive/constructive advice. Some group members may not be responsive to feedback provided by fellow group members and may look to group counsellors to provide authoritative opinions. When this occurs, group counsellors may wish to directly respond to the member.

For Example:

Counsellor: *I've noticed that you seem to be having difficulty organizing your daily routine. Have you considered using a personal organizer? I've noticed for myself that using one has really been beneficial.*

or

Counsellor: In the past, I have worked with many people who were quitting smoking. They have told me that they found having something to occupy their hands really helped them deal with the desire to hold a cigarette. Do you think this is something that could work for you?

Group Counselling Stages

Beginning Stage: When starting a new group, the counsellors should work toward creating an environment in which members will be able to do positive therapeutic work. A variety of different strategies exist for creating this type of environment (Dies, 2000).

Strategies Include:

1. Helping members begin to relate to one another by encouraging positive social interactions between members, facilitating discussion, and modeling social skills and appropriate group behaviours (Dies, 2000).
2. Helping members gain a sense of predictability and structure in group by highlighting group structure and norms and ensuring that they are practiced (Dies, 2000).

It is often a good idea to have members write out a list of goals that they would like to achieve throughout their time in group (Dies, 2000). Have members write out these goals at the beginning of the group or have individual members write out their goals when they join the group. These goals may change over time and can be examined and re-evaluated with members during group.

Behavioural contracts may be used to help keep track of changes in the youth's behaviours as well as provide them with another source of motivation for behaviour change (Enea & Dafinoiu, 2009). The group counsellors should also have some general goals for group as a whole. Corey and Corey (2002) provide some examples of goals which may be adopted by individual group members or which the group counsellors may identify as generally important the whole group. These include helping group members to:

- Learn how to trust themselves and others.
- Increase awareness of the impact that culture has in their lives.
- Achieve greater self-awareness.
- Explore and challenge maladaptive thoughts, decisions and behaviours.
- Gain a greater awareness and empathy for the needs, feelings and difficulties of others.
- Clarify and learn how to modify values.
- Explore independence and interdependence.
- Develop solutions to specific personal challenges.

- Become more open and honest with specific individuals.
- Learn how to ask appropriately for what one wants or needs.
- Learn how to become less judgemental of others.

In a group home or residential treatment centre, there may be several parties interested in changes made by youth during their group counselling experience. Parents are often interested in having their children change certain behaviours which they see as unacceptable or unmanageable. Treatment centre management or child welfare officials may be interested in gaining information on changes in the behaviour of youth for statistical purposes or to make decisions about individuals placement or permanency plan.

As identified earlier in this manual, at the beginning of group, the counsellors may go through a pre-arranged list of *rules p. 43*. This list may include a poster with words and phrases written on it such as “confidentiality”, “all feelings are welcome”, “no interrupting”. The counsellors can ask members to help define these rules, discuss possible exceptions to the rules, and add other rules which they and the counsellors feel are appropriate.

Introduction to Group: It is important to provide adolescents with an introduction to group counselling prior to them attending the first session (Dies, 2000). At this time, the potential group members should be informed of the purpose of group, *group rules and expectations p. 43* for both group members and group counsellors, *confidentiality p. 44*, roles and typical group activities (Dies, 2000). This information should be discussed individually with group members so that each member may have the opportunity to discuss issues or questions that they may not feel comfortable discussing in front of other group members. The counsellors may also create a handout with this information for group members; however, this information should always be discussed verbally as issues of literacy may be a concern.

First Group Session Format:

1. Begin to develop collaborative relationships among group members and between counsellors and group members.
2. Begin to create a climate in group conducive to change.
3. Identify and explain the purpose and objectives of the group.

First Session Structure:

1. Begin with a brief check in round. The purpose of the check in round is to provide each group member with a non-threatening structured opportunity to speak and provide a brief introduction of him or herself. Check in rounds should be carried out in a manner that is light and open to humour. At the same time, however, check in rounds should be brief.

Questions for the first group check in can include “What is one thing you like about yourself. What is the best thing that happened this week?”

2. Group members are asked to discuss their expectations about the group. This may include discussion of previous counselling experiences, group experiences, expectations around group processes, and correction of misconceptions about group. Group counsellors should take note of both positive and negative group/individual counselling experiences group members. Acknowledging the past negative experiences of group members allows them to vent frustrations which motivate them to avoid participation in group. Doing so also allows for discussion around how the current group situation can be different by avoiding mistakes/shortcomings of other groups. Eliciting positive past counselling experiences can help generate positive ideas for the current group and can help build the motivation and excitement of group members to participate in the current group.

3. Creative exercises or analogies may be used to illustrate how group works. Group counselling can be compared to other group experiences to which group members may relate such as sports teams and musical groups. One exercise that can be a useful tool for teaching group members about the process of group is to have the group engage in a brief musical interlude (Tlanusta-Garrett & Crutchfield, 1997).

Music and Learning About Group: Making music as a group can be beneficial at the beginning of group to provide group members with an active demonstration of how group works (Tlanusta-Garrett & Crutchfield, 1997). For example, the group counsellors may bring a variety of simple musical instruments to the first group session (Tlanusta-Garrett & Crutchfield, 1997). This may include triangles, drums and shakers. Each group member receives an instrument. The music will not begin until all group members are silent, and paying attention. The group members are instructed that the counsellors will begin the rhythm and when they nod at each group member, that member will join in with their instrument (Tlanusta-Garrett & Crutchfield, 1997). Once the musical interlude is complete, the counsellors can draw parallels between the music making experience and the experience of group.

Making music requires all the players to be maintaining basically the same rhythm. The more closely members can stick to the underlying rhythm; the better the music will sound. On the other hand, each person shares a slightly different interpretation of that rhythm which makes the music interesting. The same is true of group where each member provides examples of experiences and perspectives but all members must adhere to the basic rules of group if the group is to have value. Creating music with others may be awkward at first, and may not flow the way individual members may imagine. However, as musicians/group members gain more experience with each other, they can gain a better sense of the contribution which each makes. Members can learn to understand one another's motives and can begin to predict how each other will react. With time and practice, musicians/group members learn more about each other as well as themselves and can become part of something larger of which they can be proud.

3. The purpose of the group and group rules are then discussed with group members. See *group rules and expectations p 43*. This process may take most of the first group. Discussing the purpose of group and group rules is an interactive process which involves negotiating group rules and norms with the members. By allowing members to have input into the group rules/norms, group counsellors are providing members with an opportunity to take ownership for the group early on. As well, negotiating group rules and norms can help create a group which is better suited to serve the specific needs of its members. While some group rules/norms may be negotiated, others will be non-negotiable and will be determined by the group counsellors. It is up to the group counsellors to decide which rules are negotiable and which are not.

4. *Summarize p. 54* what has occurred during the first session. Common experiences group members have had with previous groups, common expectations about group, and common ideas group members have about how the group could be best run are good points to highlight in this first session summary.

Second Group Session Format

Second Session Goals:

1. Identifying the level of importance group members attribute to change for target behaviours and the level of self-efficacy they have regarding the possibility for change.
2. Begin to help clients increase their awareness of ambivalence they may feel regarding behavioural patterns using techniques such as *developing discrepancy p. 52*.

Second Session Structure:

1. Begin with a brief check in round.
2. Work on helping group members identify values and desired behavioural changes. This process should already have begun during the *clinical interview p.72*. Identification of desired behavioural changes is, however, an ongoing process throughout the duration of a group's lifespan. One exercise which can help group members identify desired behavioural changes is the Values/Goals Card Sort Exercise.

Values/Goals Card Sort: Miller and Rollnick (2002) provide an activity to help group members identify their values and begin to examine how their behaviour may relate to their values. This exercise can be useful at the outset of a group focused on helping members work on changing a specific behaviour. It may also be used at most any point in group where the focus of the group is targeted on behaviour common to group members.

When using this exercise with groups comprised of younger adolescents, the group should first discuss the meaning of the word "values" and the group counsellors should provide examples of common values. The group members are asked to identify the ten things they value most in life (Miller & Rollnick, 2002). The number of items group

members are asked to identify may vary depending on the age and developmental level of the group members. The group members are then asked to write those values down on separate pieces of paper. Once this is complete, the members are then asked to consider their target behaviour, and the way in which this behaviour fits with the values they have written down. The group members are then asked to sort their value cards into three piles. The first pile represents values that “my behaviour helps me fulfill” (Miller & Rollnick, 2002). The second pile represents values “not related to this behaviour” (Miller & Rollnick, 2002). The third pile represents values “this behaviour keeps me from fulfilling” (Miller & Rollnick, 2002). Group members should then discuss what they have learned about themselves and their values from this exercise. This activity may also be completed by having group members examine how their behaviour helps, doesn’t help, or is not related to their personal goals. The group counsellors may have group members discuss what alternative behaviours may be available and the pros and cons related to each of these alternatives. This exercise provides a good opportunity to assess the youth for *change and readiness p. 72* related to specific behaviours.

3. **Summarize p. 54** what has occurred during the session. Values, behaviours, and behavioural outcomes, common to group members, are important topics to highlight in this summary.

Third Session Group Format

Third Session Goals:

1. Introduce members to *goal setting p. 80, using imagination and visualisation p. 91* and use of *weekly goal planning sheets p. 80*.

Third Session Structure:

1. Begin with a brief check in round.
2. Discuss the importance of *goal setting p. 80* in attainment of personal values.
3. Discuss personal goals that group members have set for themselves in the past and have achieved. Discuss the mechanism that group members have employed to achieve these goals. The *past, present and future p. 90* exercise may be used to help group members explore how their goals and identity are inter-related and have evolved over time.
4. Discuss how *imagination and visualisation p. 91* may be used in creating and attaining goals and realizing values.
5. **Summarize p. 54** what has occurred during the session. Past goals achieved by members, particularly those of which they are proud, and future goals of members should be highlighted in this summary.

Group Session Format for Subsequent Groups: The structure for most of the group sessions is as follows.

Session Goals:

1. Help members explore values and build and maintain motivation for change.
2. Help members set, fine tune and achieve goals.

Session Format:

1. Begin with a brief check in round.
2. Analyse the occurrences of the group member's behaviour being targeted for change. This includes identifying and analysing each group member's success and lack of success in complying with the behavioural contract.
3. Strategies are then used to help group members re-focus on their goals, raise levels of self-efficacy and practice skills. These strategies can include role play and group discussion of behaviours with use of counselling skills (*developing discrepancy p. 52, reflecting p. 53, discovering and reviewing successes p. 57, imagination and visualization p. 91 and the miracle question p. 92*). The group can discuss what was occurring when group members were successful and what was occurring when they were not. Also, the group can discuss values that motivated members when making positive choices and values that motivated negative choices. The group can then discuss how this information can be useful in helping each member improve performance in the future.
4. Each group member will then discuss goals for the following week and a new *behavioural contract p. 82* may be negotiated. Group counsellors should have allot time after group to discuss any issues related to individual group member's behavioural contracts that could not be discussed in group due to time constraints. It is a good idea to discuss member's behavioural contracts in a different order each week to ensure the most even distribution of group time in discussing each member's contract. Some members may have a preference for discussing their behavioural contract either near the beginning or near the end. Changing the order of behavioural contract discussion may be framed as a challenging opportunity. Going first can require members to be brave by "breaking the ice" while going last can challenge members to remain patient and focus on what others are talking about.
5. *Summarize p. 54* what has occurred during the session. Values, behaviours, goals and behavioural outcomes, common to group members, are important topics to highlight in this summary.

Working Stage: Adolescents will often test their boundaries in group counselling. This testing occurs as an attempt to discern whether the group counsellors care about them and the group enough to exert the effort necessary to maintain limits (Dies, 2000).

Negotiating with adolescents around group rules (while also maintaining consistency in rule administration) can provide necessary levels of structure while, at the same time, avoiding having them feel as though they are being controlled (Dies, 2000). As well, participating in construction and management of group rules can help adolescents develop a sense of ownership for the group.

The counsellors should work towards having members take ownership for their own group counselling experience. If members feel like it is “their group”, they are more likely to participate and benefit from the experience. Consider experiences you may have had when you were involved in a group project, group counselling, or group education where you did not feel like you had any influence over the group or its outcomes. Compare this to an experience you have had in which you felt a sense of control and ownership in relation to the group. What differences did you notice in terms of your willingness to contribute to the group, levels of enthusiasm about the group, benefits you received from being part of the group, and your overall perception of the group?

Transitions/Ending the Group/Leaving the Group: Counsellors should inform members ahead of time before any major changes in the group occur, such as a departing member or ending of the group as a whole (Corey & Corey, 2002). Members should then be given the opportunity to express any emotions they have about this upcoming change (Corey & Corey, 2002).

For Example:

Counsellor: Next group will be the last group that Jenny is with us as she is moving to a new placement. Let's take some time to reflect on how we feel about this development and give Jenny feedback about what having her in our group has meant to us.,

According to Dies (2000), when members leave the group, counsellors can have them reflect on what they have learned throughout the group process and how they may apply this learning after completion of the group (Dies, 2000). This reflection can also include a review of how members goals have changed throughout the group process and what their goals will look like now that they have completed the group process. At this point, group members may be given some sort of special token to remind them of what they have achieved throughout the group experience. It is important for counsellors not to make any unrealistic promises of contact with group members, after completion of the group. (Corey & Corey, 2002). A group “party” may be held for members who are leaving or at times when the group itself is coming to a completion (Corey & Corey, 2002).

Figure 4: Group Facilitation During Various Stages of Group²		
Stage:	Group Members	Counsellors
Beginning	<p>May feel apprehensive about sharing in group.</p> <p>May have cultural considerations which discourage group participation.</p> <p>May feel impatient and eager to provide/receive suggestions and problem solve.</p> <p>May use initial sharing as a means of testing the safety of the group.</p>	<p>Help members feel more comfortable by facilitating conversation and modelling.</p> <p>Discuss methods of participating in group compatible with member's cultural norms.</p> <p>Encourage individuals to fully explore their issue before providing or eliciting suggestions.</p> <p>Ensure that each group member's experiences and emotions are validated. Acknowledge courage members demonstrate in sharing.</p>
Transition	<p>May feel anxiety about internal factors such as moving to deeper levels of self-exploration.</p> <p>May feel anxiety about external factors such as perceived judgement by other group members, or fear or rejection.</p>	<p>Respect member's reasons for wanting to protect themselves from emotional pain involved in self-exploration. Allow time for members to open up.</p> <p>Help to promote trust within the group by continually encouraging members to verbalize thoughts/feelings (including anxieties about the group) in an appropriate manner.</p>
Working	<p>May exhibit different levels of group participation.</p> <p>May express dissatisfaction at the rate of progression of the group.</p> <p>May express reluctance to share.</p>	<p>Respect group member developmental differences and differences in stage of change.</p> <p>Ask group members to describe how they would have the group progress including suggestions on how this progression could be achieved.</p> <p>Encourage members to discuss specific fears and beliefs connected to their reluctance.</p>
Ending/Leaving Group	<p>May experience feelings of fear, disappointment or loss at the group ending.</p> <p>May give general feedback about what the group has meant for them.</p>	<p>Encourage group members to share these feelings and relate to one another.</p> <p>Encourage members to provide each other with specific feedback including examples.</p>

² Adapted from Corey & Corey 2002

Evaluating Group Counselling

Group evaluation is an ongoing process. Counsellors should evaluate group progression after each session (Corey & Corey, 2000). If there are multiple group counsellors, they will work together to evaluate the session.

Evaluation can include an examination of “member specific measures”, such as each of the attitudes and behaviours of individuals, and/or “group specific measures”, such as interpersonal relationships between group members or the overall mood, or tone, of the group (Corey & Corey, 2002). This can include both the pro-therapeutic forces and non-therapeutic forces in group (Corey & Corey, 2002). The counsellors can examine which skills have been working and which have not.

Counsellors can also elicit feedback from individual group members, or the group as a whole, through verbal or written feedback. Counsellors may administer a questionnaire to group members before the first group session and then administer the same questionnaire to group members during the final group session, in order to gauge changes made by group members during the group (Hall, 2006). The nature of questions asked is determined by the nature and purpose of the group. For example, with a counselling group intended to help youth improve their ability to handle anger provoking situations through the use of cognitive behavioural strategies, questions may be asked regarding group members application of cognitive behavioural strategies and overall improvement in handling anger. In a psychoeducational group, intended to help members learn about sexual health, group members may be questioned regarding their knowledge of issues related to sexual health. In a task facilitation group, members may be questioned regarding their satisfaction with the changes elicited by the task force or committee.

Change and Readiness

Clinical Interview: Evaluating a youth’s readiness for change regarding a particular behaviour can be done through the use of a clinical interview (Marden-Velasquez & Crouch, 2001). During a clinical interview, the counsellor will ask the youth about his/her view of the target behaviour, as well as any difficulties he/she may be experiencing associated with this behaviour (Marden-Velasquez & Crouch, 2001). Youth may be unsure about their own feelings or beliefs regarding their behaviour and may make contradictory statements about these feelings or beliefs. Hence the counsellor should avoid making hasty assumptions about a youth’s readiness for change based on individual statements (Marden-Velasquez & Crouch, 2001). Instead, the counsellor should listen intently and open-mindedly throughout the interview and leave stage of change assessment until the end (Marden-Velasquez & Crouch, 2001).

During the clinical interview, the youth should be asked to consider his/her ideal behavioural state and/or the behavioural state which the youth wishes to achieve by the end of the group (Enea & Dafinoiu, 2009; Marden-Velasquez & Crouch, 2001). This is important information as it provides the counsellor with an understanding of the youth’s view of what constitutes healthy/functional behaviour within the context of his/her life.

For example, a youth may not be interested in quitting drinking completely, but may see their ideal level of alcohol use as drinking 3-5 drinks once per week. This youth may believe that his/her current level of alcohol use is interfering with his/her school work, but that drinking once a week (3-5 drinks) would not interfere with his/her ability to complete school work. Understanding the youth's ideal behavioural state and/or what he/she hopes to achieve throughout the group can also help lessen discrepancies between the goals of the counsellor and the goals of the youth. With this knowledge, the counsellor is better able to help the youth work towards goals that he/she is "ready for, willing and capable to achieve" (Enea & Dafinoiu, 2009, p.194).

Stages of Change: Counsellors may examine individual group member's readiness for change regarding a specific behaviour, such as drug abuse. Prochaska and Norcross (2001) identify various stages of change and provide specific criterion for identifying which stage of change an individual may be in. These stages are: precontemplation, contemplation, preparation, action, maintenance and termination.

1. *Precontemplation:* Individuals in precontemplation lack internal motivation to change a target negative behavior. They are unaware or under aware of links between this behavior and difficulties they are experiencing (Prochaska & Norcross, 2001). They may enter treatment due to external motivation such as legal reasons or family pressure (Prochaska & Norcross, 2001). Precontemplaters are defined as individuals who do not intend to change the behavior within the next 6 months (Prochaska & Norcross, 2001). A youth in precontemplation may become defensive when asked about their behaviours. For example, a youth may state that "My drinking is not causing me any problems. It's just a good way to have fun with friends. The only reason I am telling you about this is that counselling for alcohol is one of my court conditions." (Marden-Velasquez & Crouch, 2001).

2. *Contemplation:* Individuals in contemplation are aware of the existence of a problem. They are considering making changes but have made no definite plans (Prochaska & Norcross, 2001). Contemplative individuals can be defined as individuals considering changing the target negative behavior within the next 6 months (Prochaska & Norcross, 2001). A youth in the contemplation stage may be weighing the pros and cons of making changes to his/her behaviour (Marden-Velasquez & Crouch, 2001). Youth at this stage may be considering what his/her life may be like if they changed their behaviour and may be interested in gaining more information about this behaviour (Marden-Velasquez & Crouch, 2001).

3. *Preparation:* Individuals in preparation are defined as those who intend to take action within the next month and who have made an attempt to take action in the past year (Prochaska & Norcross, 2001). Often, these individuals have made some small behavior changes but do not meet the criteria for the action stage (Prochaska & Norcross, 2001). A youth in the preparation stage may have already made small changes to his/her behaviour and may have already engaged in some alternative behaviour (Marden-Velasquez & Crouch, 2001).

4. *Action*: Individuals in the action stage are defined as those who have successfully altered their target behavior for 1 day to 6 months (Prochaska & Norcross, 2001). Individuals in action have committed a considerable amount of resources, time and energy to change (Prochaska & Norcross, 2001). Changes in this stage are most obvious to others and may meet with a great deal of external recognition or resistance from significant people in the individual's life (Prochaska & Norcross, 2001). A youth in the action stage has made concrete steps towards changing his/her behaviour. This may include avoiding people, places, and situations connected with the target behaviour or replacing the target behaviour with incompatible behaviours (Marden-Velasquez & Crouch, 2001). For example, the youth may have begun to establish a routine of going to the gym to work out, instead of drinking with non-athletic substance abusing friends.

5. *Maintenance*: Individuals in the maintenance stage are focused on maintaining behavioral changes obtained through the previous four stages (Prochaska & Norcross, 2001). Individuals who have avoided the target negative behavior and maintained a new incompatible behavior for at least 6 months are considered to be in maintenance (Prochaska & Norcross, 2001). The challenge in this stage is maintaining the behavioural changes (Marden-Velasquez & Crouch, 2001). For example, the youth may have quit drinking and maintained a work out schedule for several months but may be experiencing difficulties maintaining motivation to work out and avoid alcohol abusing friends.

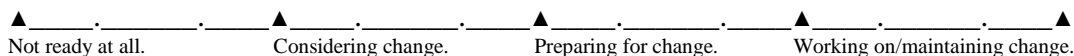
6. *Termination*: Individuals in the termination stage are considered to have completed the change process (Prochaska & Norcross, 2001). They no longer need to put resources, time or energy towards relapse prevention and have 100% self efficacy regarding avoidance of the target negative behaviour (Prochaska & Norcross, 2001). For example, a youth may not have used illegal drugs in several years and may not consider illegal drug use to be a part of his/her life any more at all.

Readiness Ruler: The readiness ruler should be used during the clinical interview to help gain a more accurate understanding of where the youth sees himself/herself in terms of readiness for change. The readiness ruler may also be used to assess group members for their stage of readiness for change at various points throughout the group. With this understanding the counsellor is better able to work with the youth in a manner that is conducive to helping him/her achieve his/her goals (Marden-Velasquez & Crouch, 2001).

The "readiness ruler" is a relatively simple method of determining readiness for change (Marden-Velasquez & Crouch 2001). The readiness ruler is simply a single line exhibiting a continuum of readiness for change. A counsellor shows the individual a ruler and asks "What point on this ruler best reflects how ready you believe you are to change _____ behaviour." (Marden-Velasquez & Crouch, 2001). It is important that the counsellor is specific about which behaviour is being talked about (Marden-Velasquez & Crouch, 2001). For example, it may be more useful to discuss changing the use of a specific drug, rather than drug use in general, as a youth may experience different levels of readiness to change the use of different drugs (Marden-Velasquez & Crouch, 2001). It is also important to determine what change, means to the individual being assessed (Marden-Velasquez & Crouch, 2001). For some, the desired change may be a complete

abstinence from the target behaviour; while, for others, change may mean a reduction in the frequency of a behaviour or negative consequences associated with said behaviour (Marden-Velasquez & Crouch, 2001).

Sample Readiness Ruler:³



Counselling Adolescents in Various Stages of Change: The most effective stance counsellors can use with youth depends on which stage of change they are in for the presenting behaviour (Prochaska & Norcross, 2001). For clients in precontemplation, the therapists' stance includes information giving, provision of alternatives to target behaviour, and nurturance and respect for the youth's perspective (Prochaska & Norcross, 2001). With clients in contemplation, the therapist elicits the youth's feelings about the target behaviour and possible solutions and helps assess feelings about himself/herself in relation to said behaviour (Prochaska & Norcross, 2001). With preparation stage clients, the therapist helps work through planning and making a solid commitment to change (Prochaska & Norcross, 2001). With action and maintenance clients, the therapist helps maintain positive motivation to change, as well as providing useful information and emotional support (Prochaska & Norcross, 2001).

Groups may be comprised of members who are in the same/similar stages of change, or members at a variety of different stages. If a group is being created to focus on a particular behaviour, such as smoking or drug use, it may be created based on members' stage of change (Marden-Velasquez & Crouch, 2001). Basing group on stage of change can be an excellent means of creating groups which provide the most effective intervention for the specific behaviour (Marden-Velasquez & Crouch, 2001). Thus it is easier for group counsellors to choose group interventions which are relevant and effective for most/all group member's stage of change (Marden-Velasquez & Crouch, 2001).

In a group home, or residential treatment centre, however, a number of issues need to be considered when assigning youth to groups. First, it can be beneficial to create groups based on the house/residence of group members. Doing so can provide opportunities for group members to discuss issues which are occurring on a day-to-day basis with individuals with whom they live. In this case, it is likely that group members will be in different stages of change for various different behaviours. Running groups with adolescents in a variety of stages of change, for a variety of behavioural issues, can be a difficult task. Certainly, maintaining awareness of each adolescent's stage of change can (for specific behaviours) help the group counsellors make decisions about how to run the group and ensure that they are in tune with each adolescent's current goals (Prochaska & Norcross, 2001).

³ Adapted from Marden-Velasquez and Crouch 2001

Helping Adolescents Define and Realize Healthy Values, Goals and Identity

Adolescent development is often described as involving separation from adults and exploration of individual identity (Holden, 2009; Richmond, 2000). Adolescents desire to move towards adulthood, but they are often frightened of the responsibilities involved in doing so (Holden; Richmond). Group counselling can provide youth with a safe place to explore, create, and achieve goals related to this process of attaining adulthood and a healthy personal identity (Akos, Hamm, Mack, & Dunaway, 2007; Richmond, 2000).

Helping Empower Youth and Adolescents: Becoming empowered is a necessary step towards achieving adulthood. Adolescent empowerment involves helping adolescents gain greater understanding and control, of their behaviours, goals and values which is one of the main purposes of this program. Empowerment also involves providing opportunities for the youth to function more successfully in their social world.

Another important aspect of empowering adolescent includes helping them understand and reverse the effects of labelling (Hansen, Meissler, & Ovens, 2000) and helping them increase their sense of self-efficacy and self-esteem. Adolescent behaviour is often attributed to personality without regard to situational factors. This tendency is known as the “fundamental attribution error”.

Adolescents may be viewed in a negative light by their caregivers because of their negative behaviours (Hansen et al., 2000). This is especially true of adolescents in group homes and residential treatment centres. The adolescent becomes labelled by significant others in his/her life as a “bad kid”. The label then becomes a self-fulfilling prophecy (Hansen et al., 2000) and causes adolescents to experience both low self-efficacy and low-self esteem. If an adolescent is repeatedly told he/she is a bad kid, treated like a bad kid and others expect them to exhibit negative behaviours they then will likely begin to believe that they are a bad person. This adolescent will likely behave in negative ways and will believe that they are only capable of behaving in negative ways. The negative behaviour will then reinforce his/her own view of self as being inherently bad and capable of negative behaviours alone. This cycle of negative expectations and negative behaviours is termed self-efficacy (Bandura & Edwin, 2003) and the beliefs one has about their inherent goodness is termed self-esteem.

At times, an adolescent’s self-esteem may impact, or be impacted, by self-efficacy. At other times, self-efficacy and self-esteem may not be directly related. Low self-efficacy may cause adolescents to avoid specific goals or tasks that are essential to achieve happiness. Lack of accomplishment may, in turn, cause the youth to experience lowered self-esteem (Bernar & Peterson, 1995). Sometimes, individuals may be highly successful in a specific area but still experience low levels of self-esteem (Bernar & Peterson, 1995). For example, an adolescent may excel at school but still feel not worthwhile as a person. This individual may work very hard scholastically in order to prove to himself and others that he is inherently worthwhile. Conversely, this adolescent may cease to put effort towards scholastic achievement as lack of self-esteem has blocked his ability to experience pleasure in accomplishments.

In order to help adolescents overcome cycles of low self-efficacy/esteem, negative behaviours and labelling, it is absolutely essential to help them understand that they are valued and capable of achieving positive goals (Miller & Rollnick, 2002, Bandura & Edwin, 2003). This process can be facilitated through demonstrating consistent caring, helping adolescents achieve personal goals and helping adolescents increase self-awareness.

Staff in group homes and residential treatment centres sometimes make the mistake of assuming that empowering adolescents means always emphasising adolescent choice regarding behaviours. In this view, adolescent choice is sometimes emphasised at the expense of the rights of others. For example, it is incorrect to assume that allowing an adolescent to emotionally, verbally or physically abuse a peer, staff member or other adult, without intervention, is empowering them to make choices about their behaviour. Adolescents in residential treatment centres and group homes need to know that adults are in control in order to feel safe and secure (Holden, 2009). These same adolescents need to be protected by the adults who are responsible for them (Holden, 2009).

Adolescents need to experience boundaries in order to learn how to control their own behaviours (Jessor, 1991). This sometimes requires the enforcement of consequences sufficient to deter negative behaviours. Feedback from the social environment helps adolescents learn to identify and practice behaviours that are socially acceptable and beneficial to themselves and others (Holden, 2009; Jessor, 1991). Over time, practice of socially acceptable and beneficial behaviours becomes more habitual for adolescents (Gobel, 2006; Holden, 2009). This allows adolescents to function better in their social environment and to make healthier and more positive choices for themselves (Gobel, 2006; Holden, 2009; Jessor, 1991). If adolescents are allowed to behave in whatever manner they choose, without experiencing boundaries and social feedback, they are not provided with motivation and guidance necessary to helping them become self-empowered.

Negative Behaviours and Values: It is common for negative behaviours to be attributed to a “lack of values” (Miller & Rollnick, 2002). Adolescents carrying out the negative behaviours may be viewed as immoral or uncaring and this can lead to feelings of shame and worthlessness (Miller & Rollnick, 2002). Negative behaviours do not necessarily signal a lack of values, however, as there are several ways in which negative behaviours can be related to values (Miller & Rollnick, 2002). First, negative behaviours may be overly “self-oriented”; these behaviours have positive effects for the individual carrying out the behaviours but negative effects for others (Miller & Rollnick, 2002). Second, negative behaviours may be “short sighted”; these behaviours help promote immediate values in the short term, but greater negative effects in achieving values in the long term (Miller & Rollnick, 2002). Third, negative behaviours may be “inefficient”; these behaviours aid the individual in achieving some values but prevent them from achieving more important values (Miller & Rollnick, 2002).

Changing Perspectives on Behaviours and Values: When working with adolescents who have experienced a great deal of shame and labelling, it can be highly beneficial to identify values as self-oriented, short sighted or inefficient, rather than being due to a lack of values. In other words, adolescent negative behaviours are viewed as misguided attempts to fulfill personal values rather than immoral acts of uncaring and selfishness (Miller & Rollnick, 2002). Framing behaviours in this way can reduce adolescent resistance to discussing values and behaviour change as the moral connotations associated with their negative behaviours has been reduced (Miller & Rollnick, 2002). The adolescent may then be less adamant about defending his/her behaviours as these behaviours are not connected to his/her sense of self-worth. Also, when negative behaviours are framed in this way, it may be easier for an adolescent to realize that he/she does not necessarily need to completely change values in order to engage in positive behaviour change. It may be that they simply need to choose behaviours that are more productive in promoting the most important values (Miller & Rollnick, 2002).

When an adolescent has a clearer sense of how values relate to current behaviours, they are in a better position to make healthy behavioural choices that promote higher order values (Goebel, 2002, Miller & Rollnick, 2002). Focusing on values can help increase the sense of importance of change and can help define effective directions for change (Miller & Rollnick, 2002). When an adolescent denies, or is unaware of, connections between values and current behaviours, they are less likely to behave in a manner consistent with their values (Goebel, 2002; Miller & Rollnick, 2002). An adolescent is also less likely to behave in a manner consistent with their values when denying personal responsibility for their behaviour (Goebel, 2002; Miller & Rollnick, 2002).

In order to help youth learn more about their values, and the way in which their behaviours interact with their values, it can be beneficial for counsellors to encourage youth to be their own “investigator” (Hermans, as cited in Miller & Rollnick, 2002). This involves having youth examine their daily behavioural patterns with an awareness of how their values are, or are not, promoted by each of their behavioural choices (Goebel, 2002; Miller & Rollnick, 2002). This could be accomplished in a group setting by having each group member keep a daily behavioural journal which includes a description of how these behaviours fit with personal values (Goebel, 2002).

For example, a youth may have been taught by their parents that it is wrong to value and seek out pleasurable and socially rewarding experiences, and that the interests of family come first. As a result the youth may engage in AWOLing behaviours and drug use because these behaviours fulfill values of personal pleasure and social acceptance (among friends). However, engagement in AWOLing and drug use may also negatively impact some of this youth’s values. For example, AWOLing and drug use may have a negative impact on this youth’s experience of social acceptance by damaging relationships with family and/or positive, non-drug using friends. Also, peers with whom this youth uses drugs may provide social acceptance only when drugs are available. Drug use may also negatively impact this youth’s value of personal pleasure, in the long run, as this individual may begin to derive less personal pleasure from positive activities such as sports. Withdrawal from drug use may be unpleasant further hindering obtainment of

personal pleasure. AWOLing and drug use may also lead to loss of privileges such as special activities or outings which are connected to their value of personal pleasure. This youth may experience feelings of decreased self-esteem as a result of messages from parents or caregivers that their behaviours and values are wrong and that they are a bad person.

A discussion of negative behaviours with an adolescent, in the context of their values, can help decrease resistance since the adolescent is responsible for identifying value conflicts and the consequences associated behaviour choices (Miller & Rollnick, 2002). By exploring the youth's values in a non-judgemental manner, the youth may begin to realize that it is not necessarily wrong to value personal pleasure and social acceptance (Miller & Rollnick). At the same time the youth can become aware of the ways in which their behaviours may be short-sighted, inefficient or overly self-oriented (Miller & Rollnick).

For Example:

Youth: *When I'm on my home visits, my parents think that I should just be at home all the time doing chores and helping them out around the house. I like going out and having some fun. I usually sneak out and go smoke pot with my friends.*

Counsellor: *You've mentioned that enjoying yourself and fitting in with your friends are two things you value. How does sneaking out and drug use fit with those values?*

Youth: *Well, it's fun because I like getting stoned and it's cool to hang out with those guys, but when I don't have money to get weed those guys usually don't want to hang out.*

Counsellor: *How else do those behaviours affect your values?*

Youth: *When I AWOL from home, I sometimes lose my home visits for the next weekend and I don't get to go on outings during the week. Also, my parents get mad at me and I don't get to spend time with them doing stuff like we used to.*

Counsellor: *I'm hearing that your AWOLing and drug use behaviour help you achieve your values in some ways but block you from achieving your values in other ways.*

Once connections between a youth's behaviour and values have begun, opening the discussion up to the group can be beneficial. Here are some examples of questions that can be asked to help explore values as a group.

For Example:

Counsellor:

Who else in the group can identify with the situation that he is talking about here and the values that he has expressed?

What are the similarities between the values each of you has expressed?

What are the similarities in the behaviours you have used to try to fulfill those values?

What are the positives and negatives about these behaviours?

In what ways could each of you change these behaviours so that you can better achieve the values that are most important to you?

What behaviours have worked for you in the past?

In what ways were these past behaviours beneficial in helping each of you realize your values?

Values and Identity: Values can be defined as “behavioural ideals” e.g., assessments about the correctness or goodness of actions based on one’s general beliefs about right and wrong (Miller & Rollnick, 2002). For example, if an individual believes that it is important to love others, they may believe that behaviours such as mocking others, physically hurting others or stealing from others are wrong behaviours.

Values can also be defined as “preferences for experiences” (Miller & Rollnick, 2002). Values defined in this way may include feeling happy, successful, content, secure or healthy. Individuals make assessments about the value of behaviours based on how these behaviours help or hinder achievement of these experiences (Miller & Rollnick, 2002). For example, an adolescent may state that working hard during basketball practice helps him/her to be a better player. In this instance, it may actually be the enjoyable experience of playing well, or the increased sense of self-esteem/self-confidence that comes from accomplishments in basketball, that are the true motivating values.

Exploring behavioural ideals can help adolescents identify and define the “ideal self” that he/she wishes to be (Miller & Rollnick 2002). For example, if the adolescent believes stealing is wrong because treating others with respect is something he/she values, then it can be inferred that, on some level, he/she is a “respectful person”. One method of presenting this idea to adolescents is to ask them to think of someone they admire. The adolescents can then be asked to think of the characteristic they admire most about this individual. The adolescents can then be informed that whatever characteristic they admire about this person is something they themselves possess. This characteristic may not be as highly developed in them as compared to the person they admire; however, they must possess it to some degree. This is true as it is not possible for an individual to appreciate characteristics of others without possessing the same characteristic to some degree. Take humour as an example. Drawing parallels with other life experience can illustrate this point. For example, it would be impossible to appreciate someone else’s sense of humour if one does not have some sort of sense of humour. One would have no way of determining what was actually funny; hence it would not be possible to tell if another person’s jokes were humorous. Physical strength is another example. If one had no physical strength and had never lifted anything, then it would be impossible to determine whether an object lifted by someone else was heavy or not. The counsellors can explore past instances where group members have demonstrated the characteristics that they identified as valuable in others. Of particular importance are instances of which they are proud (Miller & Rollnick 2002).

Focusing on the ideal-self can reduce resistance in working with adolescents around behavioural change. This is because the focus is now on helping them achieve their ideal positive behaviours, rather than focusing on negative behaviours which need to be changed (Miller & Rollnick, 2002). Adolescents can be informed that they do not need to completely change themselves in order to adopt behaviours that fit better with their values and ideal self (Miller & Rollnick, 2002). Focusing on an adolescent's ideal-self, in relation to their current state, can help an adolescent gain awareness of current behaviours which conflict with their behavioural ideal (Miller & Rollnick, 2002).

Exploring preferences for experiences can also be beneficial in helping adolescents explore personal identity. For example, when an adolescent is aware that he enjoys basketball, and the experience of basketball, he may label himself as a basketball player. When examining the experiential values underlying this adolescent's enjoyment of basketball, we realize that what is enjoyable is the physical challenge of the game, the competitiveness of the sport and recognition from others regarding his basketball talent. By examining these underlying values, the adolescent has just learned a great deal about himself. He has learned that he enjoys basketball and that he values physical challenges, competition and receiving recognition for his efforts.

Goal Setting: Once an adolescent has begun to establish which values they believe are most important, they can then begin to set goals to help realize those values. One important aspect of goal setting is to break larger, more general or more abstract goals into smaller, more specific and more concrete goals (Goebel, 2002). When goals are broken down this way, one's perception of a goal may change so that the goal no longer seems to be a distant ominous task but, instead, is viewed as something that can be worked on in the present and may be achieved step-by-step. For example, if an adolescent has a goal that they wish to be more successful at school, as this goal could be broken down into his/her goal into smaller sub goals.

For Example:

Goal: Become more successful at school.

Sub goals:

1. *Improve grade in Mathematics.*
2. *Pay more attention in classes.*
3. *Be suspended from school less often.*

Sub goals can then be broken down into smaller steps necessary for achieving each sub goal.

1. *Improve mark in mathematics.*

Tasks:

- (a) Study chapter 5 in the math text.
- (b) Ask the math teacher to explain long division.

2. *Pay more attention in classes.*

Tasks:

- (a) Ask to be moved to a seat away from distracting peers.
- (b) Try to keep interested in what is going on in class.

3. *Be suspended from school less often.*

Tasks:

- (a) Work on improving communication during frustrating situations with teachers and peers by being more assertive.
- (b) Set clear boundaries with peers who use marijuana and alcohol at lunchtime.

It often a good idea for adolescents to get in the habit of setting specific goals based on important life areas such as education, finances, physical health, profession, recreation, social relationships and spirituality (Goebel, 2002). Goal setting can also be accomplished by filling out a personal planner or organizer. Different tasks necessary for goals may be broken down by date/time (Goebel, 2002). There is no one goal setting method that is most effective for all adolescents at all times. Exploring successful methods adolescents have used in the past for goal setting and achievement can be beneficial. Adolescents may fill out a goal planning sheet (which include goals related to specific life areas) based on a weekly or monthly time interval.

For Example:

Figure 1: Sample Weekly Goal Planning Sheet			
	Education Goal	Physical Goal	Social Goal
Week of March 10 th to 16 th	Improve School Marks	Get in Shape	Make More/Better Friends
Monday	Study for Math Test on Friday (3-4pm)	Work Out	
Tuesday		Eat A Healthy Meal Swimming	
Wednesday	Talk to Teacher About Improving English Mark Study for Math Test	Eat A Healthy Meal	Hang Out With New Kid (After School)

	on Friday (3-4 pm)		
Thursday	Study for Math Test on Friday (3-4 pm)	Eat A Healthy Meal Play Basketball	
Friday		Eat A Healthy Meal	Join 4H Club
Saturday		Eat A Healthy Meal Work Out	
Sunday		Eat A Healthy Meal	

Behavioural Contracts: Behavioural contracts can be used to help gain the cooperation and commitment of adolescents towards achieving their goals (Enea and Dafinoiu, 2009; Lassman, Jolivet, & Wehby, 1999). A Collaborative Behavioural Contract (CBC) is a form of behavioural contract requiring the participation of several significant members (Lassman, Jolivet, & Wehby, 1999). In the case of group homes or residential treatment centres, the CBC would include the adolescent, as well as others important to his or her treatment. Important others could include the group counsellors, teachers, group home staff, family members and peers. One of the advantages of using a CBC is that significant individuals can be included from several different daily environments. Having these individuals all sign the same contract can increase the consistency of behavioural management strategies that are used for the youth in each different setting which can, in turn, improve the ability of youth to make and maintain behavioural changes (Grant & Evans, 1994; Lassman, Jolivet, & Wehby, 1999).

It is important to create a realistic contract which is beneficial to youth, yet also reflects the values, expectations and standards of the treatment centre. Ideally, the adolescent should feel as though the behavioural contract reflects his/her personal goals and is something over which he/she can take ownership (Lassman, Jolivet, & Wehby, 1999). It may be difficult to have an adolescent buy into his/her behavioural contract, while at the same time creating a behavioural contract that promotes healthy/positive behaviour. This may require compromise on the part of both the adolescent and others involved in the contract. For example, group home staff may desire that the youth work on changing certain aspects of his/her behaviour. At the same time, group home staff may need to admit to shortcomings in their situational management and to commit to working with the youth to improve aspects of their behaviour. Commitments on all sides need to be specific and there must be an overall understanding of how the commitments made will satisfy the values and goals of each person involved.

One way of gaining the greatest endorsement from the youth in his/her own contract is to have him/her have some involvement in the creation of the entire contract (Lassman, Jolivet, & Wehby, 1999). Some aspects of the contract may be negotiable with the youth while others may not. For example, the youth may state that he/she prefers to exit the situation and sort out his/her thoughts when faced with anger provoking situations. This same youth may experience chronic AWOLing issues such that treatment centre staff do not feel comfortable allowing this youth to simply leave the house and wander

where he/she pleases. A compromise in this situation may be that the youth take self-initiated time outs in a designated area outside, where he/she can be viewed by staff through a window.

Lassman, Jolivette, & Wehby (1999) describe how to conduct a meeting to outline the CBC. First, the role that each individual will play in the behavioural contract is determined including specific goals for each member's participation (Lassman, Jolivette, & Wehby, 1999). Then, any necessary training or information gathering is discussed (Lassman, Jolivette, & Wehby, 1999). Finally, the process for review and documentation of goal attainment is established (Lassman, Jolivette, & Wehby, 1999).

Goals should be established one or two at a time for each individual involved in the behavioural contract (Lassman, Jolivette, & Wehby, 1999). Initially, goals may be very simple. Over time, goals may increase in complexity (Lassman, Jolivette, & Wehby, 1999). For example, an initial goal may be to complete more of school homework. A target may be set for the minimum percentage of homework that needs to be completed in a week (Lassman, Jolivette, & Wehby, 1999). As the adolescent progresses in ability to complete the goal (attaining the goal more often), the goal may change so that target percentage of work completed is increased or the quality of work is increased as a factor in goal attainment.

Positive social reinforcement may be used to motivate adolescents to adhere to their behavioural contracts (Lassman, Jolivette, & Wehby, 1999). Also, a healthy working group may provide positive social pressure to help individual members remain motivated to work on their behavioural contracts. Below is provided a sample of a collaborative behavioural contract for an individual dealing with anger management issues.

Figure 2: Sample Collaborative Behavioural Contract⁴	
Contract Participant	Responsibilities
Youth _____ (signature) _____ (date)	<ol style="list-style-type: none"> 1. Handle at least 50% of anger provoking situations in a positive manner. This can include use of deep breathing exercises, self-time outs, assertive language or thought blocking techniques. 2. Do not exceed two instances of verbal aggression towards peers and staff in the morning before 3:00pm (staff shift change) and/or two instances between 3:00pm and bedtime. This includes calling names, swearing and threatening. 3. Do not engage in any instances of

⁴ Adapted from Lassman, Jolivette, & Wehby 1999

	<p>physically aggressive behaviour during the week. Use of physical threats may be considered physical aggression depending on the severity of the incident.</p> <p>4. When feeling frustrated or angry several positive options exist. (a) Taking a self-time out and using established anger management techniques. (b) Using established communication techniques to handle the situation. (c) Seeking a staff member or positive individual with whom to discuss the situation.</p> <p>Note: If a staff-initiated time out (to be completed in the resident's room) has been administered, the time out must be completed prior to engaging in previous options.</p> <p>5. Record anger-provoking social situations (both handled positively and non-positively) in the weekly journal and be prepared to discuss these situations during group.</p>
<p>Child Care Supervisor (on behalf of childcare staff) _____ (signature) _____ (date)</p>	<p>Child Care Supervisor will:</p> <p>1. Educate child care staff regarding this CBC and will ensure that child care staff adhere to its guidelines.</p> <p>Child Care Staff will:</p> <p>1. Record instances of verbal or physical aggression and report these to the group counsellors each week on Thursday prior to the group counselling session.</p> <p>2. Record instances in which anger or frustration provoking situations have been handled in a positive manner, and report these to the group counsellors each week on Thursday prior to the group counselling session.</p>

	<p>3. Provide the youth with space and opportunity to work through feelings of anger when emotionally escalated.</p> <p>4. Provide opportunities to discuss emotions as well as circumstances leading to emotional escalation.</p> <p>5. Provide positive reinforcement and verbal feedback for instances in which anger-provoking situations have been handled in a positive manner. Verbal praise that is realistic, specific and genuine should be used to encourage positive behaviours and help youth better understand the nature of his/her positive choices (including a reminder that the instance is being recorded as per CBC). Instances of positively handled anger-provoking situations may also impact the youth's status in terms of daily privileges (staff discretion).</p> <p>6. Provide consistent feedback and consequences for instances of verbal or physical aggression.</p> <p><i>Verbal Aggression:</i> For the first incidence of verbal aggression within a 30 minute period, a verbal warning will be issued to the youth (including a reminder that the instance is being recorded as per CBC). For subsequent instances within a 30 minute period, a staff-initiated time out or loss of daily privileges may be used along with a CBC recording. When possible, warnings and consequences should be paired with a discussion of the situation and alternative choices with the youth.</p> <p><i>Physical Aggression and Threats:</i> For instances of physical aggression or instances where the youth's verbal aggression is extreme (threats of physical violence) or causing significant distress to others, strategies will be used to protect</p>
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	<p>others from the youth's behaviours. These can include a staff initiated time out, placement on a restricted program or physical intervention (in the case of physical violence or serious threats of physical violence).</p>
<p>School Teacher _____ (signature) _____ (date)</p>	<ol style="list-style-type: none"> 1. Record instances of verbal or physical aggression at school and report these to the group counsellors each week on Thursday prior to the group counselling session. 2. Record instances in which anger or frustration-provoking situations have been handled in a positive manner at school and report these to the group counsellors each week on Thursday prior to the group counselling session. 3. Provide the youth with space and opportunity to work through feelings of anger when emotionally escalated. 4. Provide opportunities to discuss emotions as well as circumstances leading to emotional escalation. 5. Provide positive reinforcement and verbal feedback for instances in which anger-provoking situations have been handled in a positive manner. Verbal praise that is realistic, specific and genuine should be used to encourage positive behaviours and help youth better understand the nature of his/her positive choices (including a reminder that the instance is being recorded as per CBC). Instances of positively handled anger-provoking situations may also impact the youth's status in terms of daily privileges (staff discretion). 6. Provide consistent consequences for instances of verbal or physical aggression. <p><i>Verbal Aggression:</i> For the first incidence</p>

	<p>of verbal aggression within a 30 minute period, a verbal warning will be issued to the youth (including a reminder that the instance is being recorded as per CBC). For subsequent instances within a 30 minute period, a staff-initiated time out or loss of daily privileges may be used along with a CBC recording. When possible, warnings and consequences should be paired with a discussion of the situation and alternative choices with the youth.</p> <p><i>Physical Aggression and Threats:</i> For instances of physical aggression or instances where the youth’s verbal aggression is extreme (threats of physical violence) or causing significant distress to others, strategies will be used to protect others from the youth’s behaviours. These can include a staff-initiated time out or placement on a restricted program. If physical intervention is necessary (in the case of physical violence or serious threats of physical violence), Child Care Counselling staff will be called to handle the situation.</p>
<p>Group Counsellors _____ (signature) _____ (date)</p>	<ol style="list-style-type: none"> 1. Record instances of verbal or physical aggression occurring in group. 2. Review the CBC weekly during group counselling sessions with the youth. Make adjustments to the CBC (in consultation with the youth) related to the youth’s behavioural responsibilities. Determine (based on reports from Child Care Counselling Staff, School Teacher and the Youth) whether the youth has met the criteria for successful adherence to his/her behavioural contract each week. 3. Use group counselling activities such as role plays and examination of weekly journals to help youth learn and practice skills for positively handling anger provoking situations.

	<p>4. Maintain consistent contact with the child care counselling supervisor, child care counselling staff, school teachers and the youth to discuss behavioural progress and ensure that the CBC is carried out as consistently as possible between all those involved.</p>
<p>At the end of each week, if the youth successfully adheres to his behavioural contract, he will receive the opportunity to participate in weekend outing activities. He has identified that he is interested in starting break dancing classes and would be willing to make behavioural changes in order to earn his enrolment. If the youth maintains complete abstinence from violent behaviour for two weeks, in a row, he will be enrolled in break dancing. After three months, the youth's behavioural progress will be discussed with the social worker and will be taken into consideration when decisions are being made regarding possible placement changes.</p>	

Group Rewards: In group homes and residential treatment centres, rewards may be offered on a group level for achievement of certain behavioural standards, or for group adherence to behavioural contracts. For example, if the youth in a house or on a unit, in a residential treatment setting, are able to complete their daily routines within a certain time period, the entire unit may be eligible to earn a special privilege. If the challenge required for the group reward appears to be too easy or too difficult then the difficulty may be adjusted so that they are able to experience success, and at the same time demonstrate improvement in their behaviours in order to obtain the reward (Grant & Evans, 1994). Starting off with a more easily obtained reward and gradually increasing difficulty can help the group members gradually build self-efficacy and motivation to face increasingly difficult challenges.

Journal Writing: Group members can track their goal attainment by keeping a daily journal (Corey & Corey, 2002). Journals may include thoughts, feelings, and experiences deemed relevant and a description of how identified personal goals were or were not achieved along with examples and illustrations.

Figure 3: Sample Journal Page
<p>Date:</p> <p>Overall, I feel _____ today.</p> <p>My goals for today are:</p>

Important situations:

- How did I feel and what was I thinking during this situation?
- What values were important in this situation?
- How did I handle this situation?
- What were the outcomes and what have I learned from this situation?
- How were my values realized or not realized from this situation?
- How do the outcomes of the situation and my learning affect my future goals?

Each group member will bring a journal to group and will discuss how goals have or have not been achieved since last group session. They will also discuss significant situations demonstrating goal attainment or lack thereof and the group can provide congratulations on successes as well as constructive feedback about how to better handle future situations.

Journaling can also be used to help each group member explore the experience of group (Corey & Corey, 2002). This can be an especially valuable exercise at the beginning of a new group (Corey & Corey, 2002). Group cohesion can be increased by having group members write out and share their reactions to group with other members (Corey & Corey, 2002). Doing so can allow group members to see that other members share their fears, apprehensions and goals for group. By sharing member's reactions to group, conflicts and resistance stemming from a lack of communication and understanding can be reduced (Corey & Corey, 2002). Some questions for exploring an individual member's experience of group include⁵:

- How do I see myself and other group members fitting into this group?
- How do I feel about being a part of this group?
- What apprehensions or fears do I have about being a part of this group?
- How would I like to use group time and what issues would I like to work on?
- What learning would I most like to take from this group?

Journals may also be used to help group members express or process emotions about significant people or events. One way that this can be accomplished is by having group members write a letter expressing their feelings about an event, experience or aspect of a relationship which is important to them. Typically, these letters are not sent to the individual. However, members may wish to read these letters in group and the group member sharing the letter may decide whether or whether not he/she wishes to receive feedback. If a member does not wish to share the letter in group, he/she may be encouraged to provide a general description of the letter to the group and then share emotions and thoughts experienced while writing the letter.

Youth (Providing a General Letter Description): *This is a letter to my mother. I wrote this letter to express to her my feelings of anger about being left here. At one point, while*

⁵ Adapted from Corey and Corey 2002

writing this letter, I began to get really edgy and angry. I ended up getting up and going for a little walk to cool down. I then came back and finished the letter. After I was done writing, I was still angry but it felt good to express some of those feelings on paper. Writing the letter helped me to really sort out my thoughts and feelings about this issue.

Group Exercises for Exploring Values, Goals and Identity

Past, Present and Future: One exercise that can be beneficial in helping youth learn more about their values and identity is to have them examine themselves in terms of past, present and future experiences (Tlanusta-Garrett, & Crutchfield, 1997).

Youth may be asked to describe a positive experience they have had (Tlanusta-Garrett, & Crutchfield, 1997). This can be something that has occurred in the recent past or farther back in time (Tlanusta-Garrett, & Crutchfield, 1997). Youth can be asked to describe the things they valued about that experience which made it positive (Tlanusta-Garrett, & Crutchfield, 1997). They may then be asked to describe learning they have gained from this experience, particularly anything they have learned about themselves, their behaviour, and their values.

Youth may be asked to describe how their view of themselves has changed after going through this experience (Tlanusta-Garrett, & Crutchfield, 1997). Youth may then be asked what factors are helping them realize their values at the current time, and what factors are working against this end (Tlanusta-Garrett, & Crutchfield, 1997). Youth may be asked to describe which of these factors are within their control and which of these factors are outside of their control.

Youth may then be asked to describe an experience that they are looking forward to (Tlanusta-Garrett, & Crutchfield, 1997). This could be a goal they have set for themselves or an upcoming event. They can then be asked to describe what preparations are necessary for this goal to be realized, this or event to take place, and what work they are currently doing on these preparations (Tlanusta-Garrett, & Crutchfield, 1997). It can be beneficial for the group counsellors as well as other group members to provide input into observations regarding work the youth is currently doing towards these preparations. It can also be beneficial to have other group members provide input into similar observations each of them has made.

I Am Statements: Completing a round of descriptive statements about themselves or “I am statements” can be an excellent exercise for helping youth build self-esteem, explore personal values, and learn more about themselves and others in the group (Tlanusta-Garrett, & Crutchfield, 1997). I am statements involve having each individual make a statement such as “I am strong” and then connect this statement to experiences or achievements which they are proud of and demonstrate strength. The counsellors may begin this exercise by asking group members to volunteer, or this exercise may be completed by going around the circle and having each group member provide their I am statement. If group members are self-conscious about this exercise, the counsellors may begin with personal I am statements.

For Example:

Counsellor: *I am patient. I have been waiting for the opportunity to run this group with all of you for several years now. I have had to go through several years of school and prove my abilities as a child care counsellor prior to being allowed to run groups. I have shown that I have been able to wait patiently and do what I need to do in order to get where I wish to be. I am patient.*

Other group members should then be asked to provide their observations of instances in which the individual has shown the characteristic described. Group members can be encouraged to continue to “catch each other being good”. That is, group members should maintain an awareness of when they see these characteristics being expressed in themselves and others. Group members can be encouraged to give themselves a pat on the back or provide others with a word of encouragement when this occurs.

Using Imagination and Visualization: Describe oneself in terms of who or what one wishes to be, can be a powerful tool in helping realize identity and values (Goebel, 2002). “What if” questions can be used to help youth describe themselves in a similar manner to I am statements. One example of an exercise based on “what if” questions, is to have each youth describe what animal they would be if they could choose to be any animal. Another option is to have each youth describe what they would rename themselves given the opportunity. Youth can be asked to describe any experience behind the chosen animal or new name or any special meanings this animal or name may hold (Tlanusta-Garrett, & Crutchfield, 1997). What characteristics of that animal are he/she attracted to, or which characteristics of the animal does he/she see in him/herself. A youth can be asked to describe what a new name means to him/her. Is there someone else he/she admires who has that name? As follow up it is then important to ask group members to share instances where they have witnessed the other group member exhibiting positive characteristics of the chosen animal or new name.

Group members may also be asked to imagine and describe what they would like to be doing in the future. A timeline may be used such as five or ten years from now. What would they like to be doing for employment? Do they see themselves living in a house or apartment? Where would they like to live? Who do they wish to keep in touch with? Youth in residential treatment centres may have difficulty imagining a positive future due to what may have been a lifetime of experiencing negativity, uncertainty and disappointment.

Many real life examples exist to support the power of visualization and imagination in the achievement of goals. The counsellors may educate group members about statistics around the use of visualization and personal success. The counsellors may explain some of these examples to the group to help build member’s faith in their ability to improve their lives through imagination and visualization.

Taylor (2010) provides some examples of visualization used to gain personal success. Arnold Schwarzenegger used visualization to help himself win Mr. Universe competitions seven times, and Jack Nicklaus uses visualization extensively to help him perform at golf (Taylor, 2010). Taylor also describes another example of success through visualization is the case of Major James Nesmeth an American soldier and prisoner of war kept in solitary confinement for a period of time during the Vietnam War. In order to keep up hope during his imprisonment, he visualized himself playing 18 holes of golf every day. He visualized every detail of the golf course including the smell of freshly cut grass in the summertime. He practiced his swings in his mind over and over again. Eventually, when released from prison, he was able to return to the United States and, on his first game of golf, he took 20 strokes off his game (down to a 74) even though he hadn't played golf in seven years.

When a youth has difficulty responding to questions about their vision for the future, it can sometimes be useful to ask this individual to provide his/her "best guess". The following is an example of how a counsellor may enquire about the best guess.

***Counsellor:** Let's say you did know. What would that look like?*

or

***Counsellor:** What's your best guess about this?*

The Miracle Question: The miracle question is a useful tool for helping people focus on their preferences or ideals for the future and for themselves as a person (Warner, 2007). The use of this question can help youth overcome negative assumptions they may have about themselves, their ability to achieve and the future (Miller & Rollnick, 2002).

Group members should be encouraged to look for similarities between their miracle and the miracles of fellow group members. Group members should also be informed that, although they may not appreciate the others responses to the miracle question, each group member is entitled to their own vision. Group members should be informed that they demonstrate respect by listening patiently and non-judgementally to one another's miracle even though some group members may feel that this exercise is a waste of time.

Envisioning one's ideal state can be a frightening experience for youth who have had their hopes and dreams dashed. Remaining pessimistic, and believing the worst about the future, can provide a defence mechanism to avoid experiencing future disappointment. This desire to avoid the pain of disappointment may motivate group members (consciously or unconsciously) to resist miracle question process.

Youth often have a strong sense of imagination. Highlighting this strength and encouraging group members to use their imagination to achieve their own goals can help increase co-operation of group members in the miracle question process.

For Example:

Counsellor: *Josh, you demonstrate a great deal of imagination in your ability to create drawings, stories, and music. You've mentioned that these creative endeavours help you express your feelings, keep positively motivated and that you enjoy doing them. I would like to explore some other ways that you might use that powerful imagination of yours to realize values that are important to you.*

When completing the miracle question, it is important to focus on a situation over which the group members have some control (Warner, 2007). This is important as the purpose of the miracle question is to have an individual explore/define his or her ideal, explore the ways in which this is coming to fruition and then to find ways to increase or enhance the aspects of the miracle that are already occurring. This is not possible for situations in which the individual has no control. For example, it would not be beneficial to have an adolescent visualize a miracle day where a deceased father is alive and part of the youth's life again.

In order to carry out the miracle question effectively, faith is required on the part of the counsellors. First, the counsellors must have faith in the miracle question process. This is often difficult at first. Faith in the miracle question can be built by practicing it earnestly and repeatedly and observing the results. The counsellors should communicate interest, both verbally and non-verbally, in each group member's miracle and the belief that the process of exploring each member's miracle is beneficial to helping that member achieve greater happiness. Second, the counsellors need to have faith in each group member. The counsellors must communicate the belief that each group member is capable of achieving their miracle. Third, each counsellor in turn needs to be confident and competent to carry out the miracle question thoroughly and completely. It is common for counsellors when initially using the miracle question to rush through it out of nervousness or a desire to "get it over with". A well carried out miracle question requires patience and attention to detail.

Here is an example of the miracle question used to explore a youth's ideal self.

Counsellor: *I want you all to imagine that a miracle occurred tonight, you don't know what caused it, but you wake up tomorrow and you are being that person that you truly want to be (Warner, 2007).*

What is the first thing that each of you notice about yourselves?

What do you notice about the way you feel physically/emotionally?

What is the first thing you do in the morning?

What thoughts are going through your mind?

When asking the miracle question, it is useful to first ask group members to identify what they notice about themselves, their feelings, their senses or their actions. When completing the miracle question, it is important to gain as much detail as possible about each member's vision of the miracle (Warner, 2007). The difference between a novice

completing the miracle question, and an experienced practitioner completing the miracle question, is in the amount of detail elicited about the miracle (Warner). Counsellors may use the “what else” question repeatedly to help members more thoroughly explore their miracle (Warner, 2007). Having members describe sensory experiences is important as this can help create a vision of the miracle which is more vivid and realistic. Once a thorough exploration of what each group member will notice on the miracle day is complete, hypothetical examination of what others will notice can begin.

For Example:

Counsellor:

What do others in your life notice about you on this miracle day?

What might they be thinking/feeling about you?

What about people you walk by on the street?

What do others say to/about you?

How are you interacting with others?

What would a fly on the wall notice about you?

The group counsellors can ask questions regarding events of the miracle day, sensory experiences, achievement of specific goals or adherence to desired behaviours.

For Example:

Counsellor: *What's it like to be getting along with your teacher/peers in class?*

or

Counsellor: *How does it feel to be up in time and getting your daily routines completed?*

Group members may sometimes reply to questions about the miracle day by indicating an absence. For example, a group member may state that he doesn't feel tired, angry or confused. A group member may state that he/she is not fighting, using drugs or crying. When a group member responds that he/she is not experiencing, feeling, thinking or doing something, it is important to ask him/her what is going on instead (Warner, 2007). Remember to get as much detail as possible about what is occurring as this helps create a stronger vision of the miracle.

For Example:

Youth: *On my miracle day, I'm not angry and I'm not fighting with my sister.*

Counsellor: *I hear that you're not feeling angry, what are you feeling instead?*

Youth: *I'm feeling happy and relieved that I don't have to fight about everything today.*

Counsellor: *Tell me more about what it's like to feel happy and relieved. What are you feeling in your body?*

Youth: *I feel less tense, you know. My shoulders are more relaxed and I'm not fidgeting.*

Counsellor: *Not fidgeting. What are you doing instead?*

Youth: *Well, I can just sit there. You know, like a normal person.*

Counsellor: *You had also mentioned that you and your sister are not fighting. What are the two of you doing instead?*

Youth: *Well, we're just getting along. We're playing a game and just hanging out.*

Counsellor: *What's getting along look like? What game are you playing?*

Youth: *We're being polite to one another. Taking turns playing monopoly, laughing and just hanging out.*

Once a thorough examination of each group member's miracle day has been completed, it is then possible to examine the similarities between each group member's miracle day. Exploring the similarities between miracle days can help members realize similarities between each of their values, goals and ideal selves.

For Example:

Counsellor:

*What are the similarities each of you has noticed about your miracle days?
What does this tell you about the similarities between each of your visions for the person you would like to be?*

Once the miracle has been thoroughly explored, it is then time to work with youth around explore which aspects of the miracle they are already experiencing. The more thoroughly that each group member's miracle day has been explored, the easier it will be to make connections between the current reality and the miracle day. It can be beneficial to have group members discuss what aspects of each other's miracles are already occurring.

Problem Based Learning Exercise⁶

Problem Based Learning (PBL) requires group members to work together to analyze a problem issue, research the issue independently, and then discuss their research findings as a group. This exercise provides a model for handling a variety of issues that may be faced by group members. Working through this exercise can help group participants learn

⁶ Adapted from Hall 2006

critical thinking skills, problem solving skills, self-directed learning skills, and teamwork skills.

When to Use It: PBL exercises may be used to facilitate *psychoeducational groups p. 41*. by having group members learn about a problem or situation without getting involved in discussion of personal matters with other members. These exercises may be useful in the early stages of group as they provide a structured group format, focus primarily on an abstract problem external to the group members, and do not require a great deal of emotional processing. These exercises can help group members become accustomed to the group while working through a problem scenario as a team. As well, members may be able to participate in this exercise without having to expose a great deal of difficult personal information.

PBL exercises may also be used to facilitate counselling groups, which include discussion of member's personal experiences. Having group members explore their own experiences can lead to discussion and exploration of issues occurring between group members. This can lead to productive problem solving around these issues but it also may require in-depth exploration of emotions and interpersonal problem solving. Deciding to include personal material depends on:

- the amount of time available for the group,
- the appropriateness of having group members share personal experiences related to the topic at hand (e.g., it may not be appropriate to have group members share experiences of abuse),
- and the group counsellors' confidence that issues between group members can be resolved productively within the group at the current time.

How to Prepare: A chalkboard, whiteboard or piece of poster board would be useful for this exercise as group members are required to process a large amount of verbal information. Maintaining a visual representation can help both the counsellors and group members keep track of important information. Before using this exercise in group, the counsellors will need to establish the purpose of the exercise. What is the reason for using this exercise, with this group, at this time? For example, the counsellors may determine that many group members currently lack skills for handling bullying situations. The counsellors will then need to establish specific goal(s) based on this purpose. For example, the counsellors may determine that the main goal of the PBL exercise is for group members to identify and then apply three to four strategies to use when they, or others, are being bullied.

Time frames should then be set for the completion of each step of the PBL exercise. A problem statement will need to be created that fits the specific issue being addressed. For example, a problem statement could be created by combining elements of several group members' experiences of bullying. This statement should be clear and concise. The counsellors may want to take time to anticipate group members' questions, responses,

and reactions to the PBL exercise so that discussion can lead towards the specific goals outlined.

Problem Based Learning Exercise Example: The next section includes an example of how problem based learning can be applied in a group format to work through a bullying scenario. Issues around bullying can be sensitive, and are important topics in residential treatment centres and group homes. The group counsellors will have to ensure that discussion remains respectful and appropriate. As well, current bullying issues within the centre may need to be processed and addressed.

Step 1: Review facts of a statement

1. Tell group members that we are working through a problem solving process that can be useful in helping them manage a variety of issues.
2. Provide group members with a fictional problem statement which may be written up on a board for group members to see. Ensure that the details of the fictional problem are not overly similar to the a current struggle faced by a specific group member

For Example:

***Counsellor:** John is having difficulty dealing with situations in which he feels that other kids are making fun of him. Others sometimes disrespect John by calling him names or shoving him. He often feels frustrated, confused, and tired of dealing with these situations. John often yells, screams, swears, ignores directions, and is sometimes physically aggressive in return. This causes him further problems (loss of privileges, trouble with authorities etc.).*

Ask group members to consider similar situations that they have experienced. Encourage them to keep their own experiences in mind while working through the problem solving process. At this point it is not necessary for group members to share their bullying experiences. Opportunities for sharing these experiences will occur later.

Step 2. Explore problem: What is/are the main problem(s).

As a group discussion, have the group members break the problem statement into smaller sub-problems and discuss. Member responses can be written up on a board. Examples of the sub problems are:

1. Kids make fun of John.
2. Kids disrespect John.
3. Kids push and shove John.

4. John sometimes reacts by yelling, screaming, swearing, ignoring directions, and is sometimes physically aggressive in return.

Counsellor: *What questions could you ask John about each of the sub problems to help you understand this situation? Who, what, where, when, and why.*

Examples of responses could include: (Member responses can be written up on the board)

1. Kids make fun of John.

- Why do kids make fun of John?
- Why John and not someone else?
- What is occurring when kids are not making fun of John?

2. Kids disrespect John.

- Why do kids disrespect him?
- What names do kids call him?
- Where is he when kids call him names/push him?
- When do kids call him names?
- What can John do when they call him names?
- What is occurring when kids are not disrespecting John?

3. Kids push and shove John.

- Why do students push/shove him?
- When do kids push/shove him?
- What can John do when they push/shove him?
- Where are the adults when they push/shove him?
- What is occurring when kids are not disrespecting John?

4. John sometimes reacts by yelling, screaming, swearing, ignoring directions and is sometimes physically aggressive in return.

- Which actions from others are most likely to upset John and get him to react negatively?
- How could John react more effectively?
- Do John's reactions sometimes make him a target for bullying?
- What is occurring when John does not react in a negative manner?

Discuss the questions as a group. You may have the group explore these questions by describing things that have occurred in their own experiences.

Step 3. Exploring Hypothesis

Ask the group members to determine which of the questions need to be answered in order to help John solve this problem and which questions will not help him solve the problem. Ask the group to explore hypotheses for each of the questions that need to be answered in order to help John solve the problem. Each group member will then identify one or two questions which they think is most important to helping John solve his problem.

Step 4. Develop Resource List and Discuss.

Ask the group members to develop a list of resources to help understand and solve this problem. The counsellors should also research this issue. Counsellors should encourage group members to identify multiple resources, including people as well as written material. People to ask might include a counsellor, principal, parents, youth leader, friends, or coach. Written material might include books, internet, magazines, or pamphlets. Provide some resource materials for group members. Each group member will research the main question(s) identified as being most important for helping John solve his problem. Instruct group members to choose at least one book or printout to read and to interview at least one person.

Step 5. Discussion of Findings.

Have group members identify the question(s) they have researched and discuss the findings of their research with the group. The counsellor will also discuss their own research findings. In a residential treatment centre or group home setting, the research may be compiled into a poster or a binder which can be easily accessed.

Step 6. Skill Practice and Future Application

Provide group members with an opportunity to role play skills they have learned through their research and/or practice these skills in their own lives. In a residential treatment or group home setting, this might include making this skill practice part of the youths' goals or treatment plans. Rewards may be possible for the positive application of certain goal behaviours by individuals or the group as a whole.

Art, Sports and Wilderness in Group Therapy

Group counsellors should not assume that running a group necessarily means sitting and talking about issues. Adolescents often respond best to groups which involve physical or artistic activities (Williams, 2000). Also, many adolescents will respond negatively to the idea of being engaged in therapy labelled as "counselling". Adolescents may have had negative or ineffectual experiences with traditional counselling and may be resistant to engaging in further "counselling" experiences. Many life lessons and a great amount of therapeutic work can be accomplished with youth through the use of physical activities (Wright, 2006; Williams, 2000). These activities can include sports, art or wilderness experiences. Active group processes provide opportunities for mentorship and teaching of

youth (Wright, 2006; Williams, 2000). When youth face challenges as a group, they are put in a position which requires them to work on social skills (Williams, 2000).

Providing youth with an opportunity to gain some achievement in a certain skill also provides them with an opportunity to gain a sense of self-esteem and self-confidence. They can feel that they are a part of something larger than themselves and can enhance their sense of personal identity, by identifying as a practitioner of the art or skill they have learned (Wright, 2006). Youth engaged in physically demanding activities may be provided with opportunities to prove that they are “tough” in positive sports or work activities rather than being engaged in violence (Wright, 2006). Sports, art and wilderness experiences also provide adolescents with opportunities to practice self-discipline (Wright, 2006; Williams, 2000).

Counsellors can use metaphors from sports, art and wilderness activities to teach lessons about real life. For example, in many sports, it is necessary to maintain a strong defence in order to be successful. Many youth, when first engaged in sports, focus mainly on offence and the glamour and excitement associated with offensive plays (Wright, 2006). Counsellors may draw a parallel between an adolescent’s sport of choice and other life areas (Wright, 2006). Sports provide a number of excellent learning opportunities for youth with anger management issues. Counsellors may also draw parallels between the necessity of defence in sport to the necessity of youth to control their anger in many social situations (Wright, 2006). A counsellor may examine times when youth have reacted to anger provoking situations with flashes of anger or violence without concern for the consequences. The counsellor may then help youth gain insight into these instances of anger by drawing parallels with times when youth have engaged in sports without concern for defensive play (Wright, 2006). Sporting activities also provide youth with opportunities to become more attuned to their physical body (Wright, 2006). By participating in sports, youth can better understand their physical reactions to psychological issues such as stress and anger (Wright, 2006).

Unique or Difficult Clients

Inappropriate Behaviours and Group Rule Adherence: Counsellors should avoid allowing members to act out during group. Allowing acting out behaviours such as making rude or threatening comments, making obscene or inappropriate gestures, side talking, continually breaking group rules or distracting others can be harmful in several ways. First, allowing acting out rewards the member’s inappropriate behaviour. Adolescents often view a lack of response to their behaviours as a sign of approval. Second, this undermines the counsellors’ authority as the members may come to see the counsellor as ineffective and unable to control the group (Dies, 2000). Third, allowing acting out can be damaging to other group members who may be the target of the behaviour (Dies, 2000). These members may now feel that group is not a safe place for them to share their emotions and experiences. Other members might imitate acting out behaviours either as a means of self-defence or because they believe that this behaviour will be tolerated (Nichols-Goldstein, 2001).

Group members who are acting out may be cued or removed from the group. At one end of the spectrum removal may consist of a simple direction to have the youth leave the group and wait away from the group (e.g. in the hallway) for a counsellor to come discuss the situation or go touch his/her door and return. On the moderate end of the spectrum, removal may consist of a time out for a specific period of time away from the group (e.g. in his/her room). On the other end of the spectrum, a youth may be removed from the rest of the group counselling period. This can have consequences related to completion of the behavioural contract.

Issues With The Group Process: Adolescents may display resistance to the group process for a number of reasons. Adolescents may have had negative experience with counselling in the past, groups or other, which influence their view of the safety, utility or effectiveness of group (Corey & Corey, 2002). Adolescents may also find the group process boring or may experience issues with other group members or group counsellors which cause them to resist the group counselling process. There are several different ways that counsellors can effectively deal with members who display a great deal of resistance to group processes (Corey & Corey, 2002).

Strategies Include:

1. Meet with the member individually outside of group to discuss perceived reluctance to be engaged in group (Corey & Corey, 2002). Provide the member members with information about the purpose of the group and group processes (Corey & Corey, 2002). Explore the member's attitudes towards group as well as their past counselling experiences (Corey & Corey, 2002). Point out that they made a conscious choice to be involved in group and could have chosen to take the consequences for not attending group (Corey & Corey, 2002). Consequences can be tailored to fit with the specific group home setting, and may include a loss of privileges associated with the group. For example, if the group is planning a special outing or event, a youth who refuses to attend regular group meetings may not be allowed to participate. Also, if group is an enjoyable activity the youth may be barred from group counselling sessions as a consequence in and of itself.

2. During group, if the member poses a great deal of resistance, it is often useful to question them regarding the reasons for their resistance (Corey & Corey, 2002). It is important to avoid reacting in an emotional manner, taking member resistance personally or responding defensively. (Corey & Corey, 2002; Nichols-Goldstein, 2001)

For Example:

Youth: *This group sucks, no-one wants to be here.*

Unhelpful responses: *Too bad you don't have a choice.*

No, this group doesn't suck, your attitude sucks.

Corey and Corey (2002) describe more helpful responses including asking the member the reasons why they do not wish to be part of the group. Counsellors may share with the member that they themselves do not enjoy being told what to do and that they can identify with the difficulty the youth is experiencing from being involved in the group against their will. It is important to allow the member to feel that their concerns are heard while at the same time avoid allowing the member to simply complain about what they do not like about the group (Corey & Corey, 2002). This can be accomplished by keeping the discussion focused on the members' feelings and their past experiences. Also, it may be useful to have other group members, who are functioning well in group, share their experiences if they were initially reluctant to become involved in the group.

For Example:

Counsellor: I'm wondering why you don't feel like you want to be here?

Adolescents often have little interest in group processes at first and so group counsellors should do everything possible to encourage participation (even if it is given reluctantly) (Dies, 2000).

Issues With Authority: Adolescents often react with anger and/or defiance towards individuals in authority (Fem Azima, as cited in Nichols-Goldstein, 2001). This is often due to negative past experiences with authority figures and/or a need to test and rebel against authority as part of defining personal identity and boundaries. These behaviours are especially common among group home residents, many of whom have experienced neglect and abuse at the hands of individuals responsible for their care. Adults sometimes make the mistake of responding to these behaviours either in an overly authoritarian manner or in an overly passive manner (Fem Azima, as cited in Nichols-Goldstein, 2001).

There are several ways in which group counsellors can improve interactions and build relationships between themselves, as authority figures, and adolescents experiencing issues with authority. First, rules should be enforced consistently and as objectively as possible (Corey & Corey, 2002). Second, adolescents should be treated with respect, and allowed personal choice, without allowing them to harm others or break rules (Corey & Corey, 2002). Third, it is important to demonstrate a consistent willingness to discuss disagreements in a manner which respects everyone's positions and opinions (Akos, Hamm, Mack, & Dunaway, 2007).

Rolling With Resistance: Enea and Dafinoiu (2009) describe resistance in the counsellor client relationship as "a predictor of change refusal". According to Miller and Rollnick (as cited in Enea & Dafinoiu, 2009), resistance is inherent to change and is a natural part of the change process. Enea & Dafinoiu note that resistance may take the form of denying responsibility for behaviours or blaming others. These authors discuss how counsellors can handle clients who present with resistance without the use of direct confrontation. Using reflecting statements, to re-frame what the youth has just said, can help that individual come to their own realizations about change and resistance. These authors note

that the use of the formula “Yes you are right although...” can help counsellors maintain agreement with the youth while at the same time suggesting change (p. 195).

For Example:

Youth: *I hate this place, the staff are jerks, the food sucks and I wish that I could just go home. I wish I didn't have to listen to the rules here so that I can go home for the whole weekend.*

Counsellor: *So, you've stated that there are some problems with this group home, and that you wish to return home. It is understandable that you would want to be with your family, and it is true that problems do exist at this facility. You've also mentioned that in order for your home visits to increase, which you want, you will need to learn to better adapt to this facility.*

Handling Conflict and Arguments

It is desirable to create rules for the manner in which members can voice their disagreement with one another and the group counsellors. Requiring members to provide evidence for their arguments, and work through logical thinking processes, can be beneficial in a number of ways. Creating rules around how disagreements are discussed can allow members to feel heard, discuss disagreements in a positive manner, and learn valuable abstract thinking and communication skills (Akos, Hamm, Mack, & Dunaway, 2007).

For Example:

Youth: *What he just said is dumb.*

Counsellor: *Actually he had some valid points to his argument. Could you please explain what reasons you have for disagreeing with what he said and explain your ideas on the topic? Remember to use I statements.*

Adolescents are constantly striving for acceptance and greater popularity among their peers. Sometimes, adolescents will use bullying or teasing as a means of reinforcing a social structure they have established. (Akos, et al., 2007) Ensuring that all members of the group feel as though the group is welcoming and accepting greatly enhances the functioning of the group and improves the self-esteem of group members (Akos, et al.).

Discussing Group Members Behaviours: It is common in groups for some members to have difficulty getting along with other group members, to experience personality conflicts or to dislike or disagree with others. When group members comment about behaviours exhibited by other group members or the group counsellors, it can often be beneficial to re-direct the conversation to how that individual's experience would be different if they perceived a change in other member(s) behaviour (Warner, 2007). This technique can be applied when group members are discussing behaviours occurring inside or outside of group.

For Example:

Youth 1: *She never pays attention in group and she never shares about anything really important.*

Counsellor: *Tell me, what would be different for you if you believed that she was paying enough attention in group and sharing more about herself. Remember to use I statements.*

Youth 1: *Well, at least I'd feel like I wasn't the only one making an effort to make this group work.*

Youth 2: *Yeah, well she talks throughout the group and no-body wants to hear about her all the time.*

Counsellor: *Ok, what would be different for you if you believed that she was not sharing an excessive amount?*

Youth 2: *I would feel more like I could talk because I would have a chance to get a word in.*

Counsellor: *So, you've identified that you would feel more comfortable talking if she were to talk less, and you've identified that you would feel better about the group if you talked more. How can you two (or the group) work together so that both of you are more satisfied?*

Conflict Resolution⁷

Conflict resolution is extremely important in residential treatment centres and can be carried out effectively in a group format. A native Hawaiian conflict resolution process called Ho'oponopo has been successfully adapted and applied to residential care settings with adolescents. Ho'oponopo group meetings can be held at weekly intervals. All of the youth living in one particular house can meet and discuss any problems they may have experienced with one another during the week that they could not resolve on their own. In Traditional Ho'oponopo, an elder would act as the mediator. However, in group homes, one of the staff may act as a mediator. When working with youth on issues of conflict resolution, it may be beneficial to re-frame conflict not as something to be taken personally, but rather as an "interaction of interdependent people who perceive incompatible goals and interference from each other in achieving these goals." Folger and Poole as cited in (Arsenault, 2000).

⁷ Adapted from Arsenault 2000

For Example:

Counsellor: *You each have wants, needs, and goals. In order to live happily with others, it is necessary for everyone to respect each other's right to several things. You rely on the other person to show you respect by being kind and polite; to respect your space; and to respect your property. You also rely on each other for company. Because you all live here together, and see each other daily, it is only natural that you are going to experience times when your wants, needs and goals conflict with the wants, needs and goals of another. It is at these times that you need to consider not only what you want or need but also what others want or need. By considering the needs and wants of others, as well as your own wants and needs, you can avoid a great deal of arguing and fighting.*

Running a Ho'oponopo Group: At the beginning of each session, the mediator will get the group to settle and focus. The mediator then asks group members if they are experiencing issues of interpersonal conflict. Once an issue is mentioned, it is determined if witnesses to the conflict are present. If witnesses are present, the complainant then explains their side of the story, followed by explanations from others involved in the conflict. Witnesses each receive opportunities to add their observations, feelings and positions regarding the argument. After this is complete, the group then moves into a problem solving stage. The mediator then asks participants to accept responsibility for their part in the situation. If this cannot be accomplished, the mediator asks questions of all the participants to gain further clarification on the issue. If participants will not accept responsibility of their actions, then the issue may be reframed as a shared responsibility rather than the action of one individual against another.

Individual members are then asked to forgive one-another. The mediator makes an assessment of each participant's ability to show remorse for their actions and to apologise. With guidance from the mediator, the group decides on what steps should be taken to restore peace. The mediator has the final say in what steps will be taken. The mediator then informs participants that they are not to bring the issue up again outside the group. The mediator then re-frames the issue as a learning opportunity. The above process may be repeated for the next issue.

Once all issues have been raised, the group participants are asked to summarise each issue and the learning gained. The group participants then engage in an activity which requires co-operation and team work. One example of this type of activity is cooking a meal together and eating it.

Final Thoughts

Skill and technique are important in running effective groups with persons of all ages. However, it has been the author's experience that the most important factor in working with youth is the demonstration of consistent caring. The best techniques or theories can never replace a day-to-day, interaction-by-interaction demonstration of respect towards youth, taking genuine interest in their lives, consistently trying to be supportive and caring enough to set firm boundaries and appropriate consequences.

Youth need loving parents and mentors in their lives. While group counselling cannot replace family, it is the author's belief that increased cohesiveness, honesty, respect and understanding among staff and youth, achieved through quality group counselling, can nurture and enhance life experiences in group homes and residential treatment.

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