The University of Manitoba

An Application of the Mediating Model
of Groupwork In An In-Service Training
Program for Child Care Workers

by

Christina Cassels

A Practicum
Submitted to the Faculty of Graduate Studies
In Partial Fulfillment of the Requirements for the
Degree of Master of Social Work
School of Social Work
Winnipeg, Manitoba
September 1984

AN APPLICATION OF THE MEDIATING MODEL

OF GROUPWORK IN AN IN-SERVICE TRAINING

PROGRAM FOR CHILD CARE WORKERS

BY

CHRISTINA ELEANOR CASSELS

A thesis submitted to the Faculty of Graduate Studies of
the University of Manitoba in partial fulfillment of the requirements
of the degree of

MASTER OF SOCIAL WORK

©√1984

ACKNOWLEDGEMENTS

TABLE OF CONTENTS

CHAPTER I

INTRODUCTION

Rationale for Social Work Intervention

Every year in Manitoba, emotionally troubled and delinquent children are temporarily or permanently separated from their families and require substitute care. Publicly financed and private facilities such as foster homes, group homes, residential treatment centers and youth centers have opened to meet this need. The principle care given in these residential centers is the child care worker. According to Maier (1977) child care workers* are

> those persons who provide a major portion
> of round-the-clock care, supervision and
> resources for children or youth in a group
> life situation, whether for day care or
> residential care.
>
> (p.130)

Although the child care worker is recognized as the most important person working with troubled children and adolescents (Mayer (1958); Alt (1960); Grossbard (1960); Trieschman, Whittaker and Bendtro (1969); Schwartz, (1971); Maier (1972) and The Child Welfare League of America (1973) formal systematic training and education are virtually non-existant.

The importance of staff training and development for residential child care workers, and the limited resources

---

*Throughout this report the term child care worker and residential child care worker will be used interchangeably. The term child care worker is recognized internationally as referring to those individuals who work with children and adolescents in residential care.

in this area were pointed out by both the national CELDIC
Report (1970)** and the provincial Ryant Report (1975)***.

The Ryant Report (1975) indicated that

> The only training programs for child
> care staff are two evening courses at Red
> River College; any other upgrading must be
> accomplished through in-service training.
> (p.184)

This author's own experience and observation is that many
agencies offering residential treatment provide agency-
based in-service training for child care workers in the
absence of formal preparation for the job. Through Canada
Manpower training grants, agencies in Winnipeg (Marymound,
The Children's Home) have offered training to new child
care workers. Marymound has continued to offer a pre-
service training program for child care staff in
conjunction with job orientation. For several years,
Knowles Center has sent some child care staff and
supervisors to the certificate courses developed by the
Group Child Care Consulting Agency at Chapel Hill, North
Carolina. Through the Government of Manitoba's New
Careers Program, trainees have been placed with the
Manitoba Youth Center, Knowles Center, B and L Group Homes
for training as child care workers.

**One Million children: The Commission on the Emotional
and Learning Disorders in Children. The CELDIC Report.
Ottawa: Leonard Crainford, 1970.

***Ryant, Joseph C., et al. A Review of Child Welfare
Policies, Programs and Services in Manitoba. Winnipeg,
Manitoba: Government of Manitoba, 1975.

It is also the author's observation that many full or part-time child care staff voluntarily enroll in university courses and workshops to improve their skills, knowledge and enhance their career mobility.

In summary, what exists in Manitoba is an acknowledged need for training child care workers, yet virtually no formal educational program exists. While on-the-job learning, supervision and in-service training are used to some extent by all child caring agencies, these appear to be inconsistent in quality and quantity. Agencies and workers are left to their own initiative and resources to address this serious gap in initial and on-going training.

How and why should social work as a profession be involved with this problem?

In referring to a study of 600 American residential treatment institutions for children, Kadushin (1974) notes:

> Social workers along with school teachers were employed more universally in residential treatment centers than other types of professional personnel...and were utilized to a greater extent than [members of] any other professional discipline...
> (p.636)

He also notes that the social worker's assessment and planning responsibilities for children in care extends to a relationship with other (less trained) child care staff that includes acting as a consultative resource (in

treatment alternatives), feedback mechanism and provider of support and encouragement.

The Ryant Report (1975) in its review of Manitoba's Child Welfare Program notes that "The dominant profession in child and family services is social work" (p. 145).

Maier (1963) describes child care as a method of social work. Historically, organizationally and functionally, Maier sees child care as operating in the social work realm.

Bisno (1969) indicates:

> The professional activities of the social worker include not only transactions with "clients" but with other "systems" such as collegues, organizational subordinates and superordinates, lay persons, indigenous nonprofessionals...
>
> (p.82)

Siporin (1972) identifies situational interventions significant for social work helping purposes. Three of these appear to be applicable to the situation in which social workers and child care workers find themselves in residential care. They are: strengthening the natural helping system, direct aid in problem solving and resource provision.

Group dynamics is an area that Maier (1963) identifies as one of three core areas of knowledge for child care workers. The way the child care worker affects the group living experience and specifically, the understanding she/he posesses of group cohesion,

structure, processes, properties and intergroup process can indirectly affect the treatment for the child or adolescent in care. The child care worker must also realize that the group experience has many

> ...strong potentials that can contribute to illness if the goup experience is not con- structed, used and influenced by the child care worker in the service of the treatment goals. The child care worker does this through conscious, professional, and skillful influence on the group process."
>   (Klein, 1975, p.101)

Shaffer and Galinsky (1974) identify a number of moda lities social workers can utilize in working with groups. Papell and Rothman (1966) identify three social group work models: social goals, remedial and reciprocal. The social goals model sees the group as a democratic process for social action. The remedial model utilzes the group as a context for treatment.

The reciprocal or mediating model developed by William Schwartz (1961, 1971, 1976, 1977) and further elaborated on by Lawrence Shulman (1968, 1979) holds that no outside expert or helper "can help people with their problems by deciding beforehand what their desired states of being should be and then enlisting the clients in the effort to acheive them" (Schwartz, 1977, p.1331).

Schwartz views the social worker as a person who "mediates between the client and their systems without being aligned with either one or the other" (Shulman 1979, p.12).

Thus, it appears that it is within the realm of the social work professional to provide training to child care workers. Furthermore, the social worker's knowledge of and skill with group dynamics may have much to contribute to improving the quality of training for child care workers.

Locus and Description of Practicum

This practicum was designed to provide an in-service training program for employed child care workers. Since the use of the group in residential treatment was the author's area of interest and expertise, this practicum was designed to utilize this knowledge.

However, before designing the actual training program, the initial intervention in this practicum required the author to enter an agency (system) interested in providing training to its child care staff. Initial intervention also required mediation between the agency and the child care staff (client) who had an interest and need for such training.

Several factors were considered in the design of the training program and the selection of an intervention strategy:

1. What are the training needs of a specific group of child care workers, of their employing agency, and how do these needs match the author's own area of interest and expertise?

2. How can the child care workers who are all adult learners be engaged in the learning process?

3. How can the past and present work and life experiences of the trainees be shared and utilized?

4. How can the trainees' experiences in the learning group be used to understand group processes and interventions?

5. How can this learning be transferred and applied to the group living situation?

Negotiations with the Knowles Center and Marymound School for Girls and their respective staff resulted in a decision to provide in-service training programs about the use of the group in residential treatment. This practicum was implemented from September 1979 to April 1980.

The reciprocal or mediating model of group work practice, as developed by William Schwartz (1961, 1971, 1976, 1977) was selected for this practicum. This model will be discussed in greater detail in Chapter II and III.

Schwartz's model describes four phases of group development, (tuning-in, beginnings, work and endings) each with its own assumptions about human behaviour, proposed outcomes and worker skills. The author's activity during the pre-group or tuning-in phase focused on work within the agencies to determine the need and parameters for in-service training for child care staff. The author's initial activity with both agencies had a marked impact on the outcome of both groups. These results are discussed in Chapter III and V. The beginning phase with each group was characterized by assisting the group in establishing its purpose, clarifying the worker-

group contract, and dealing with obstacles to group formation. The work phase was different for both groups. At Knowles the author focused on clarifying the contract, dealing with obstacles and creating group interdependence, and providing resources to group participants. At Marymound the focus was on following the group's contracted agenda, maintaining group interdependence and providing learning resources. During the ending phase, the author's efforts were directed towards helping group members recognize their learning and how this could be applied in their work. In addition, the author prepared and intervened to help participants deal with the group ending. Video-tape recording was utilized as a resource in both programs. The intervention and the phases of group development are described in detail in Chapter III.

In summary, the objectives of this practicum were:

1. To use the child care workers identified needs and experiences to develop the basis for an in-service training program.

2. To use the mediating model of group work as a model for assisting child care staff to learn more about groups.

3. To increase child care workers knowledge about groups from their own direct experience in a group.

4. To relate this experience to their work with groups in residential care.

5. To increase the child care workers' confidence and competence in working with the group in residential treatment.

6. To increase the author's skill in working with groups and in applying the mediating model.

A questionnaire designed by the author was administered to both groups during the first session and the last session. The purpose of this questionnaire was to obtain socio-demographic data and a measure of each child care workers knowledge, skill and confidence in working with groups. An open-ended questionnaire was also given to all participants during the last group session to provide the author with some feedback about the effectiveness of the program. These questionnaires and their findings are further described in Chapter IV.

The conclusions based on the questionnaires; a comparison of both group experiences; and the applicability of the mediating model in the training of child care workers are discussed in Chapter V.

CHAPTER II

REVIEW OF THE LITERATURE

The purpose of this chapter is to review the programs, research and theoretical concepts upon which this practicum was based. The review will begin with an examination of the literature related to the role and training child care workers in residential treatment. The use of the group in the residential treatment of children and adolescents and the need for child care workers to possess knowledge and skill in working with groups will be presented. The theoretical model of group work (the mediating model) used in this practicum will be discussed. In addition, the issue of the child care worker as an adult learner and the implication for intervention is briefly described.

The Child Care Worker in Residential Treatment

In the residential treatment of emotionally troubled children and adolescents the Child Welfare League of America's Standards for Services for Child Welfare Institutions (1973) reports that

> The child care staff is the heart of the program in an institution for children. The degree to which a child can benefit from the total treatment program is dependent largely on the contribution that the child care worker is able to make as a member of the staff team implementing the plan for the particular child.
>
> (p.61)

According to Stone (1963) the importance of the child care worker has resulted from the change in her/his role from a custodial to a therapeutic one. Diggles (1970)

notes that this shift was a result of a move away from a one-to-one therapy to the group living unit which "highlights the role of the child care counsellor as a primary therapeutic agent" (p.509). Klein (1975) refers to the living unit as the focal point of treatment:

> It follows from this premise that the child care worker is one of the more significant people in the life of a child in an institution.
>
> (p.91)

Alt (1960) and Maier (1977) also point out that child care workers have become the key staff in the residential treatment of children. This theme is continually repeated in the literature: Laurie and Schulman (1953); Mayer (1958); Alt (1960); Grossbard (1960); Trieschman, Whittaker and Brendtro (1969); Schwartz (1971); Maier (1972); Kadushin (1974); Klein (1975); Toigo (1975); Maier (1977) and Harrington, et al. (1980).

The importance of child care workers as "the major treatment agents in child care programs" (Maier, 1977, p.134) is reinforced by several research studies. Portnoy, Biller and Davids (1972) and Portnoy (1973) conclude the child care worker is perhaps the most influential figure and model for emotionally disturbed children in residential treatment. VanScoy and Bordelon (1974) concluded that of all the helpers in residential care, the child care workers were perceived by residents in care as having the greatest potential to help residents.

Thus, with a shift from custodial care to the importance of the group living situation and milieu the child care worker has been recognized as the most important person in the residential treatment of children and adolescents. Several studies have been cited which support this view.

The Training of Child Care Workers

With the recognition of the importance of the child care worker in residential treatment the need for training the worker has been emphasized extensively in the literature.

Mayer and Matsushima (1969) state:

> Since milieu therapy is the core of residential treatment, and since child care workers are usually not professionally trained, this axiom is a sobering one for any conscientious planner. That is why the need for training child care workers has been emphasized and debated so strenously in the past.
>
> (p.525)

Kadushin (1974) notes that a problem faced by institutions offering residential treatment is

> ...that the people (child care workers) who have the greatest responsibility for therapy and who have the greatest functional power for therapy have the least education and status.
>
> (p.649)

Polsky and Claster (1968) in their analysis of the relationships between staff and children in three cottages within the same institution conclude that the child care

worker "performs socially valued functions that untrained and unskilled people cannot do adequately..."(p.160).

Treischman, Whittaker and Bendtro (1969) emphasize that

> We must stop pretending that workers are "born" to the work...let us begin by teaching them in groups and in individual supervision what we know about establishing relationships, about managing tantrums, activities, and routines.
> (p.233)

The importance of training is further emphasized in the literature by: Willner (1959); Grossbard (1960); Sherman (1961); Mayer (1963, 1965); Hromadka (1964, 1966); Matsushima (1964); Bettleheim (1966); Chambers and Foster (1966); Foster, et al. (1972); Adler (1973, 1978); Klein (1975); Toigo (1975); Mayer, Richman and Balcerzak (1977).

In Canada, The CELDIC Report (1970) identified the lack of adequate training in the child welfare field as a service block to the amelioration of services for children with emotional and learning disorders. The Report concluded that the responsibility for the day-to-day care of such children is with individuals who seldom have the skills and knowledge for such a complex task. The development of training programs is recommended as a means of providing this skill and knowledge.

In Manitoba, The Ryant Report (1975) noted the lack of training for residential child care workers in Manitoba and that most upgrading had to be accomplished by in-

service training.

The situation which exists in Canada appears to parallel the American one described by Gula (1976) where there is

>...no established national curriculum for systematic comprehensive pre-service or in-service training of child care staff, supervisors or institutional administrators. Similarly, there is no recognized set of basic materials useful for the fundamental pre-service or in-service training of child care workers across categorical or service systems.
>
> (p.63)

With formal child care education being limited (Adler, 1978) and reaching "a relatively small number of potential and practicing child care workers" (p.63), a variety of institutionally based programs have been developed to respond to the need for training.

Berwald (1960), Sherman (1961), Matsushima (1964), Cohen (1973), Kurtz (1976), Adler (1978), Hembling and Mossing (1978), Cristiani (1978), Brintall (1978) and Harrington, et al. (1980) all describe a range of programs developed by agencies to meet the training needs of child care workers.

Non-agency based programs have also been described in the literature by Hromadka (1964), Chambers and Foster (1966), Guidon (1975), Daniels, Finck and Woodruff (1976) and Baron, et al. (1978).

Obbard and Pavia (1975) report on the results of 43 responses to a survey of 184 American institutions with

some form of child care programs. From this survey, they
identify five levels of training: certificate, associate
degree, bachelor's degree, master's degree and doctoral
degree. They support Gula's observation concerning the
lack of coordination among existing programs.

Adler (1978) states another problem

> Although modest advances have been made in
> developing programs in community colleges
> and undergraduate departments of univer-
> sities, these reach a relatively small
> number of potential and practicing child
> care workers.
>
> (p.63)

The following objectives for training child care
workers are identified in the literature:

1. To help the child care worker become a therapeutic
    rather than custodial person and to acquaint her/him
    with the specialized knowledge, skills and techniques
    which need to be mastered to develop therapeutic
    competency (Alder, 1973, 1978).

2. "To acheive professional identification, increased
    resources of staff, transferability of knowledge and
    skill from one institution to another" (Child
    Welfare League of America, 1972, p.106).

3. To "raise the status of the child care worker, but
    also, and above all, to protect the children in care
    against abuse of experimentation by workers
    insufficiently prepared for their task" (Hromadka,
    1966, p.184).

4. To prevent inexperience from forcing child care
    workers into custodial rather than therapeutic roles
    (Harrington, et al., 1980).

5. To broaden the range of skills because "few staff
    members have appeared to have qualifications in all
    of the areas needed for successful programming"
    (Harrington, et al., 1980, p.102).

6. To help child care workers avoid becoming caught in
    an authority control pattern in dealing with agres-
    sive or delinquent youngsters (Meyer, 1951; Adler,
    1969).

7. To prepare child care workers to deal with the more
    severely disturbed populations in residential
    treatment (Weintrob, 1974) exhibiting adolescent
    aggression and the mixed symptomatology evident in
    younger children (Redl, 1975).

8. To augment the skills of those already in the child
    care field (Toigo, 1975).

9. To train more child care workers to provide better
    service to the greater number of emotionally
    disturbed children in care (Adler, 1976).

Besides the commitment to the importance of training

child care staff, the recognition of training objectives

and the existence of agency and non-agency based training

programs, the literature also describes how training

actually takes place for the majority of child care

workers.

Toigo (1975) notes that most training occurs on-the-

job after employment is secured. In-service training,

professional supervision, the worker's own experience and

intra-agency courses are described as the main sources of

training (Alt, 1953; Mayer 1963; Mayer and Matshushima,

1969).

Adler (1978) concludes that

> Individual supervision supplemented by
> occasional in-service training seminars,
> continue to be the prevalent staff devel-
> opment method for orientation and con-
> tinuing education of child care personnel.
> (p.63)

The literature also notes obstacles to the design and implementation of standardized training programs.

There is agreement about the need for training but not about the content (Grossbard, 1960). Mayer and Matshushima (1969) discovered "there has by no means been agreement among professionals as to the trainability of child care workers or the most appropriate kind of training" (p.525). It is Bettelheim's view (1966) that child care workers can neither be taught nor trained.

> What is needed is not preparing them for the execution of particular tasks, but helping them to develop deeper insights into themselves, into attitudes and behaviours and to trust that these will benefit both them and their work with the patients.
>
> (p.694)

Two other problems identified by Mayer and Matsushima (1969) are: the lack of consultation with child care workers about the kind of program or training they need; and the lack of direct experience in child care work on the part of professionals who supervise and establish training programs.

Toigo's (1975) conclusion best sums up the state of child care training:

> As matters now stand there appears to be no single resource available nor any single organization that is uniquely effective in the establishment of priorities in the training area...
>
> (p.12)

This section of the literature review has recognized the need for comprehensive child care training, the development of agency and non-agency based programs as a response to the lack of training, the objectives for child care training programs, the means by which training is presently conducted and some of the obstacles that exist with regard to training.

The Group in Residential Treatment

Kadushin (1974) defines a children's institution as "a twenty-four hour residential facility in which a group of unrelated children live together in the care of a group of unrelated adults" (p.617). Konopka (1972) describes institutions as a "special kind of group living" (p.vi). Faraday (1978) points out that group living is a unique service and is the purpose of residential care. The uniqueness of group living as a primary treatment setting and as a helping method in residential treatment is recognized in the literature by Mayer (1958); Diggles (1970); Birnbach (1971); Klein (1975). Schulze (1951) points out that the institution provides a variety of group experiences (living groups, activity or interest groups, the institutional community) that have therapeutic potential.

Fant (1971) also points out the network of groupings in residential care: classroom, cottage, interest group, program group and notes that these groups offer many

opportunities for treatment. Fant goes on to describe several types of groups within a residential setting for children or adolescents: management groups, cottage group meetings, small spontaneous interview groups, formal short-term groups, developmental groups, and clinical groups.

Whittaker (1979) describes the use of the small group intervention in the management of daily living, problem-oriented discussion, program activities and transitions.

The importance of the group living process and the network of groups in residential treatment has implications for the role of the child care worker.

Foster, et al. (1972) points out the child care worker is most always involved with groups rather than individuals, and needs to form the habit of seeing herself/himself as a member of the group and in many circumstances as its leader (p.91).

Maier (1963) identifies the child care method as depending upon the creation of a new primary group - the living group. One of the child care worker's tasks is the leadership and management of the living group and the "overall planning and working with the children toward the betterment of group functioning and relationships among group members" (p.268).

Mayer (1951); Alt (1960); Grossbard (1960); Polsky and Claster (1968); Trieschman, Whittaker and Bendtro

(1969); Diggles (1970); Schwartz (1971); Beker (1972);
Child Welfare League of America (1973); and Adler (1976)
all confirm the role of the child care worker in group
living and their need for knowledge and awareness of group
processes.

Thus, it is the child care worker as the key person
and leader in the group living situation who enables this
aspect of residential care to become a mode of treatment.

What are the skills the child care worker needs to
carry out this task?

The following areas of knowledge and skill have been
identified in the literature as being important for child
care workers in their work with the group living
situation:

1. How leadership is acheived (Foster, 1972), (Child
    Welfare League of America, 1972).

2. How children become scapegoats (Foster, 1972).

3. The effect of group climate on its members (Foster,
    1972); (Redl and Wineman, 1952).

4. How members can sometimes help one another (Foster,
    1972).

5. How worker group interaction affects the children
    (Foster, 1972).

6. Intergroup process (Maier, 1963).

7. How to help isolates become part of the group (Child
    Welfare League of America, 1973).

8. The knowledge and the ability to assess group struc-
    ture i.e. status, roles, sub groups, (Redl and
    Wineman, 1952); power, leadership, (Klein, 1975);
    (Trieshman, Whittaker and Bendtro, 1969); (Maier,
    1963); (Adler, 1976) and composition size

(Burmeister, 1960); (Child Welfare League of America, 1973).

9. The conceptualizing stages of group development (Trieshman, Whittaker and Bendtro, 1969).

10. The effect of cohesion, composition and mood in planning activities (Treischman, Whittaker and Bendtro, 1969); (Whittaker, 1979); as well as group development (Ross and Bernstein, 1976).

11. The ability to help children feel part of a group (Child Welfare League of America, 1973).

12. Utilizing group processes such as identification participation and leadership (Child Welfare League of America, 1973).

13. An awareness of the potentials that exist for a cottage group (Klein, 1975).

14. Knowledge of group properties and processes such as norms, values, mores, (Klein, 1975); (Mayer, 1958).

15. Use of common experiences to aid group formation (Mayer, 1975); (Redl and Wineman, 1952).

16. Recognition of the impact of voluntary as compared to compulsory group participation (Mayer, 1958).

17. Understanding the dynamics and roles of the leader, isolate, follower, cliques and subgroups within the larger group (Mayer, 1958).

18. Enlarging the workers focus from the individual to the group (Polsky and Claster, 1958).

19. How to use peer groups as a catalyst to help children change (Kadushin, 1972).

20. "...the skill that counselors have to develop, therefore is mobilizing the strengths of the group toward constuctive goals and processes rather than delinquency and yet not being trapped into a repressive authority role" (Polsky and Claster, 1958, p.167).

21. Assessing the necessity of regrouping (Redl and Wineman, 1952).

22. Helping to strengthen the peer group (Schwartz, 1971).

These areas of knowledge and skill are impressive. Considering the majority of child care workers come to their work with no formal training the need for comprehensive training cannot be understated.

There are several references in the literature which reinforce the importance of the child care workers training and developing skills in the area of group living.

Polsky and Claster (1968) in their study of the living units at Cedar Howthorne School concluded that much more intensive pre-service and in-service training programs were necessary to train the counselors in group methods and institutional confrontation (p.175).

Maier (1972) saw one of the main child care tasks as leadership and management of the living group. He emphasized the importance of the child care worker's responsibility for the "overall planning and working with the children toward the betterment of group functioning and relationships among group members" (p.268). He concludes that one of the trends in professional development for child care workers is increasing their competence in treating and caring for children in group living situations.

The Child Welfare League of America (1972) stressed the importance of in-service training related to groups:

> In-service training should include promotion of understanding of the indi-

vidual and the group and the interaction
within the professional and administrative
team. Since a particular charge of the
child care worker is the group living
process, it is necessary that guidance in
group interaction be a significant part of
in-service training. Of particular impor-
tance is an awareness of indigenous leader-
ship formation; the development of sub-
groups and the help that isolates need in
order to become part of the group.

(p.109)

In spite of the importance placed on the in-service
training of child care workers in the area of groups and
the group living process, no description of such specific
in-service programs could be found in the literature.

Matsushima (1964) describes a process of using group
supervision as a method of meeting training needs of child
care workers. Beker, et al. (1972) presents a series of
case studies in the use of the group for pre- and in-
service training and in supervision on-the-job. VanScoy
(1976) advocated participation with a co-therapist in
activity therapy as a way to train child care workers in
group dynamics. The Basic Course for Child Care Workers
(1977) was developed by the Group Child Care Consultant
Services of the School of Social Work of the University of
North Carolina at Chapel Hill in response to the need for
a national curriculum for pre-service and in-service
training of child care staff. One section of this course
focuses on the group. This course has been criticized
(Baron, et al., 1978) for not providing enough specific
and practical examples of techniques which child care

workers could implement in their work with a group.

There are obstacles and problems to the development and use of groups, especially the living group, faced by child care staff. Some of those mentioned in the review of the literature are listed below.

1. Redl and Wineman (1952) point out that living in a group does not immediately imply the development of group psychological factors. There is difficulty in establishing the emotional meaning of the group for the children in order to use it for therapeutic ends.

2. Mayer (1958) notes the obstacles of children coming involuntarily, their various problems and the fact that they usually cannot get along in groups.

3. Appleberg states that "while the cottage system provides structure helpful in forming a group, structure in itself does not transform the cottage residents into a cohesive group" (p.142).

4. Polsky and Claster (1968) concluded that where institution emphasis is placed on custody and individual counselling rather than the use of the group, adolescents do not internalize constructive societal values. Thus the method and focus of treatment may act as an obstacle.

5. Schwartz (1971) points out that many agencies with untrained workers focus on their developing skill in one-to-one relationships rather than with groups thus creating another obstacle.

6. Schwartz (1971) further notes obstacles in the child care worker's feeling that mutual aid among the residents is an alliance against authority. There may be a sense of apprehension about group spontaneity. Workers who feel outnumbered may adopt a stereotyped way of dealing with the groups in meetings, "chairing" the session, socializing or using the platform to make speeches.

7. Schwartz (1971) points out that where worker anxiety prevails the informal group processes are left entirely to the children, with few attempts by the adults to affect the real conditions under which they live. A two-tier power structure is created - informal for children and formal for staff - where it

is impossible for the staff to effectively utilize
and influence the group. (p.46)

8. Mayer (1972) indicates that in children's institu-
tions there is often no clinical concept as to what
the group is and what part of the treatment it should
fulfill.

9. Additional obstacles which Mayer (1972) identifies
are the short-life expectancy of the groups; the
inability of some individual members to always
participate in group activity; the group activities
which occur without adult support or against adult
wishes; and acceptance of the adolescents' need for
privacy which may mean withdrawl from the group.

10. Birnbach (1973) cites staff's fear of the peer group
as another obstacle. The 'intention' is to have
youngsters work together to help each other but staff
may fear that a strong, cohesive peer group could
undermine adult authority resulting in a loss of
control.

Klein (1975) notes the following obstacles:

11. Children under nine years of age have not reached the
developmental level that permits group formation.
Children, in care, nine years of age and over are
often below nine in emotional maturity.

12. Trust is needed to form a group bond. Most children
in care have problems trusting others and/or them-
selves which is based on emotional maturity and the
capacity to form interpersonal relationships.

13. The cottage groups are often open groups which suffer
losses. Children in group care are shy of becoming
close because of the losses experienced. Becoming a
member of a group means giving up autonomy and
acceding to group decisions. This calls for self
discipline. Most children in residential care are
unable to go this far.

14. Because many of the children in care have problems in
interpersonal relationships, group membership may be
viewed as a treatment goal rather than an intervening
method.

15. Adler (1976) notes that groups membership in residen-
tial care is not voluntary but the result of adult
selection. This obstacle means considerable staff
effort is required to assist the group in developing

a sense of cohesiveness, common interests and identification.

16. Adler (1979) further states that the type of children in residential treatment "pose management problems for child care workers who jointly with their collegues must divise methods to facilitate group living for all the children" (p.197).

In summary, obstacles to the development and use of groups in residential treatment have been noted. In spite of these obstacles, the literature stresses the fact that collectivities of children do have some group properties and that the obstacles can be managed. Klein concludes that

> The important questions here are whether the child care worker is aware of the structure, how he can help the children to creat a structure that is therapeutic, and how it can be used to facilitate treatment.
>
> (p.103)

This section of the literature review on the group in residential care has examined why institutions are considered valuable as means of treatment, the place of the group living process in residential treatment, the implications this has for the role of the child care worker, the skills needed by the child care worker to be effective in the group living process, the blocks to the use of the group in residential treatment, the importance of in-service training and the materials which have been developed in this area.

The Mediating Model of Group Work

The mediating model of social group work is identified by Papell and Rothman (1966) and Galinsky and Schopler (1974) as one of the main models of social group work intervention. This model is also referred to as the reciprocal or interactionist model. Papell and Rothman (1966) commend this model for systematically organizing the helping process and for making the worker's skills recognizable.

The mediating model has been developed by William Schwartz (1961, 1971, 1976, 1977) and further elaborated by Lawrence Shulman (1968, 1979).

The author used this model in designing and offering a training program for child care workers in the use of the group in residential treatment. The application of this model in a training program will be described in Chapter III and evaluated in Chapter IV.

The model provides the following salient characteristics: a degree of flexibility; a systems view of the client and a way to mobilize the client's own resources and experience. The worker's role is primarily one of mediation, clarification and affirmation of the existing potential for growth.

The mediating view holds that no outside expert or helper

> ...can help people with their problems by deciding beforehand what their desired

> states of being should be and then
> enlisting the clients in the effort to
> acheive them.
>
> (Schwartz 1977, p.1331)

The social workers' field of intervention is at the place where the individual and the systems of society meet. The mutual need of individuals and the systems that matter to them is described by Schwartz as symbiosis (Shulman, 1979, p.6).

Schwartz sees the variations in the social worker's role as arising from: the special nature of the client; the particular system to which the worker is offering assistance and the special problems that bring them (clients and systems) together.

Schwartz (1961) describes four stages of group development: tuning-in; beginnings; work; and endings. These stages are evident both in one meeting of a group and over the group's duration. For each stage, Schwartz (1977) describes assumptions about human behaviour, the outcomes for which the worker/group is striving, and the skills through which the worker mobilizes knowledge and purpose. Shulman (1979) has further specified and elaborated the skills relevant to each of these stages.

Preparation: Tuning-In

This is the first stage of group development in the mediating model.

Schwartz (1977) identifies the important assumptions

of this phase as:

1.   systems are ongoing

2.   communication is coded

3.   new beginnings heighten feelings of inadequacy

4.   new demands set up fears of and dependence on
      authority figures

5.   new situations create positive expectations (p.1334).

The workers goals are:

1.   to enter the system

2.   establish her/his function

3.   direct group members towards work

4.   to make tentative predictions about the actions and
      reactions of herself/himself and group members

5.   to use previous knowledge about the system and group
      members to rehearse her/his own response to her/his
      predictions.

Schwartz (1977) describes the worker's skills in this
stage as: using empathic skills to tune-in to coded
verbal and non-verbal messages; organizing bits of
information into patterns of expectations; breaking down
knowledge into smaller propositions that are relevant to
the type of client; and retaining a peripheral vision for
events to which she/he has not tuned her/his perceptions
(p.1335).

According to Shulman (1979), the worker needs to
tune-in to herself/himself as well as to the client, and
to view the client and the work they are about to engage

in from a developmental perspective.

Beginnings

In this stage the worker seeks "to establish the terms of the 'contract', that is, reach some consensus about the group members' needs and the agency's stake in offering the service" (Schwartz 1977, p.1335).

The assumption is that the group and the agency have a mutual need for each other and have certain expectations of one another. Thus, the worker's goal in this stage is to:

1. establish a clear contract about the purpose of the group

2. breakdown this purpose into specific tasks (work)

3. help the group to reach an agreement on procedures to acheive their purpose.

The worker's skills as described by Schwartz (1977, p.1335) are:

1. to make a simple statement about the client-agency connection

2. to reach for feedback from the group members regarding their conception of the group's purpose

3. to make the demand on group members to engage with one another

4. to negotiate the terms of the group's contract.

Shulman (1970) emphasizes:

5. the worker's ability to be sensitive to indirect cues

6. the workers ability to acknowledge her/his own feelings about the engagement

7. the worker's skills of exploring potential obstacles

8. reaching inside of silence

9. elaboration

10. empathizing with expressed feeling

11. "articulating unexpressed feelings slightly ahead of the client" (p.38).

Work

In this third stage,

> ...group members and worker direct them-
> selves to the main body of problems and to
> the major tasks of the helping process.
> (Schwartz, 1977, p.1335)

Schwartz (1961) identifies five tasks and delineates the skills demanded of the worker to complete these tasks.

The tasks are:

1. "the search for common ground between the needs of the clients and those of the system"

2. "the process of detecting the obstacles that come between the members and their tasks"

3. "the workers responsibilty for contributing ideas, facts and values"

4. "the worker...shares his own vision, his feelings, and his faith in the clients strengths and capabilities"

5. "the worker acts to define the limits and require-ments of the situation in which the small group system is set" (p.1335).

Schwartz (1977) goes on to state that

> ...the ability to decode messages, reach
> for ambiguities, probe for negatives, show
> love and energy in the work, partialize
> tasks, point up the connections between
> fragments of experience, find and mobilize

resources and throught make the 'demand for work' inherent in the contract and in his helping function.

(p.1336)

Shulman (1979) adds the following:

1. elaborating skills (moving from the general to the specific, containment, focused listening, questioning, reaching inside of silence

2. empathic skills (worker acknowledgement of own feelings, reaching for feelings, displaying understanding of client feelings, putting clients feelings into words)

3. demand for work skills (partializing client concerns, holding to focus, checking for underlying ambivalence, challenging the illusion of work)

4. pointing out obstacles (supporting clients in taboo areas, dealing with authority)

5. sharing data skills (providing relevant data, providing data in a way that is open to examination)

6. viewing systems people in a new way

7. sessional ending skills (summarizing, generalizing, identifying next steps, rehearsal, recognition of 'doorknob communications').

Shulman points out that each group session requires sessional tuning-in and contracting skills.

Endings

The skills of this stage are based on the assumptions that endings occur with each group meeting and there is resistance to endings (Schwartz, 1977). Timing is crucial, if the ending is too abrupt, members will have difficulty dealing openly and directly with separation issues. Given time, there are several stages which all

groups pass through in coping with endings. These are:
denial, anger, mourning, acceptance and a 'graduation'
effect where members prepare to transfer their group
experience to other life experiences.

The worker skills Schwartz (1977, p.1337) identifies
for this phase are:

1. monitoring time and noting the closeness of ending

2. watching for cues as the group goes through the
    stages dealing with separation

3. demanding the group face the work of separation

4. recalling positive and negative experiences of the
    group

5. dealing with feelings about the leader

6. preparing for the immediate future

7. sharing her/his own personal feelings about
    separation while maintaining her/his role as facili-
    tator.

Shulman (1979) defines additional skills for the
worker in this stage. They are:

1. identifying major learning

2. identifying areas for future work

3. synthesizing the ending process and content

4. assisting clients in making transitions to new exper-
    iences and support systems.

These four stages of group development and the
workers' skills that have been described provided the
basis for organizing the author's intervention and will be
discussed further in Chapter III.

In reviewing the literature, no references were found where the mediating model was used in the training of child care workers.

This section of the literature review has described some of the concepts underlying the mediating model of social group work, the role of the social worker, and the assumptions and worker skills which characterize each stage of group development.

The Child Care Worker as an Adult Learner

It may be assumed that the child care worker in an in-service training program will be an adult learner.

A brief review of the literature on adult education is included to identify the basic assumptions about adult learners and to consider their implications in the design of the training program described in this report.

The most succinct description of assumptions about adult learning is found in the work of Malcolm Knowles (1970). Knowles (1970) defines andragogy as the "act and science of helping adults learn" (p.38). Andragogy is based on four assumptions about the character of adult learners. First, the self concept of the adult learner has moved from being a dependent one toward one of self-direction. Thus, the adult learner has a need to be perceived by others as self-directing, to be treated with respect, to make her/his own decisions and to be seen as a unique human being. However, because of the carry over

from childhood learning, when adults are first given responsibility for their own learning their initial reaction may be one of shock and disorganization. Thus, there may need to be a process of reorientation. Some of the implications which follow from this assumption are: the learning climate, the location and behaviour of the teacher should be one that puts the adults at ease; adult learners should be involved in the process of diagnosing their needs for learning; learners should be involved in a mutual process with the teacher who serves as a procedural guide and as a content resource in planning their own learning; the teacher is a catalyst, resource person, a co-inquirer in the learning process (Knowles, 1970).

Andragogy "assumes that a teacher can't really teach" in the sense of "make a person learn but that one person can only help another person learn" (Knowles, 1970, p.43).

A second assumption is that adults have a resevoir of experience that becomes a resource in learning. Because adults define themselves largely through their experience, a rejection of this experience for the learner may be synonymous with rejection as a person. As a result of their experience, adults are rich sources of learning and have much to contribute to the learning of others. They also possess a solid foundation upon which to add successive layers of newly acquired skills and knowledge. Concurrently, adults are less open-minded because they

have acquired more fixed habits and patterns of thought. Implications that follow from this assumption are: experiential and participatory techniques that tap into the adult's experience and actively involve her/him in learning; practical application of new learning to the present situation and a human relations laboratory approach where adults receive feedback on their behaviour may help them unfreeze and be more receptive.

A third assumption is that adult readiness to learn is increasingly oriented to the developmental tasks of her/his social roles. Thus the sequence of a learning curriculum needs to be in tune with the learner's developmental tasks. Homogenous or heterogenous groups have appropriate effectiveness. Knowles preference is for a group which provides a variety of subgroups.

Knowles' (1970) final assumption is that the adult learners' time perspective in the application of new learning is immediate and the orientation in learning "shifts from one of subject-centeredness to one of problem-centerdness" (p.39). Some implications of this assumption are

> ...the adult educator must be primarily
> attuned to the existential concerns of the
> individuals and institutions he serves and
> be able to develop learning experiences
> that will be articulated with these
> concerns.
>   (p.48)

Teachers need to be person rather than subject-oriented and learning needs to be problem-focused. The best starting point for learning is with the problems and concerns the adult learners have as they enter learning (the teachers and institutional concerns for learning are items to be negotiated with the student).

Thus, in summary

> ...the central dynamic of the learning process is thus perceived to be the experience of the learner, experience being defined as the interaction between an individual and his environment. The art of teaching is essentially the management of these two key variables...those methods and techniques which involve the individual most deeply in self-directed inquiry will produce the greatest learning.
>
> (p.51)

Some of these assumptions have been reinforced in the child care literature.

Alt (1960) states

> The form and content which training and supervision of cottage parents take must be closely related to their experience and the concept of function accorded to them as well as their own concept of their role.
>
> (p.93)

Grossbard (1960) points out

> When, however, we design a level for people who are actually engaged in carrying out a job, learning is at the optimum when the material is of functional value, having an immediate relationship with concrete problems that the students are facing in their daily routine.
>
> (p.7)

He indicates that a limitation of this approach is that learning may be too specific and not generalized enough.

Mayer (1965) indicates

> The optional use of these sessions (in-service training) can be made if the child care staff is able to participate in the selection of topics and presentation of some of the material.
>
> (p.256)

However, he cautions that

> ...if a person not connected with the administration gives these courses, care must be taken that the courses do not become mere gripe sessions against administrative practices...
> ...the person who gives these sessions should be identified with the general goals of the administration, but should also be sufficiently detracted from its practices in order to be able to look at them objectively.
>
> (p.256)

In addition, many of Knowles' assumptions about adult learners support Schwartz's concepts about the role of the worker and his assumptions about human behaviour in each phase of group development as described in the mediating model.

This section has examined assumptions (cited by Knowles, 1970) about adult learners and the implications these have for learning. The importance of the child care workers involvement in planning in-service training and the practical application of learning, have been reinforced by the child care literature.

Summary

This review of the literature has examined the role the child care worker in residential treatment. The need for staff training and devlopment of child care workers has been reviewed. How the group can be utilized as a positive force in residential treatment, as well as the potential obstacles to the use of the group and the skills needed by the child care worker to be effective in the group living process were described. The mediating model of group work, the stages of group development and related assumptions and skills were presented. Some assumptions regarding adult learners and how these are reinforced in the child care literature were indicated.

CHAPTER III

INTERVENTION

This chapter will describe how the mediating model articulated by Schwartz (1961, 1971, 1976, 1977) and Shulman (1968, 1969) was used as an intervention strategy. This intervention was used in an in-service training program in the use of groups offered in two residential treatment centers. These programs took place between January and April 1980. A total of twenty child care workers participated.

Some examples of the goals, the author's interventions and use of specific skills in each of the four stages of group development will be presented.

Briefly, these stages are:

1. Tuning-In: initiating entry and contracting for in-service training with agency and staff.

2. Beginnings: establishing purposes, procedures and translating these into specific tasks.

3. Work: assisting the group in accomplishing these tasks, clarifying the limits of the group and renegotiating group tasks where necessary.

4. Endings: preparing the group for its final session and helping the group to evaluate its progress.

(See Chapter II for an elaboration of these stages of group development.)

Duration and Setting of the Practicum

Two residential treatment centers were selected for intervention, the Knowles Centre and Marymound School for Girls.

Knowles Centre is a private residential treatment center for latency and adolscent-aged boys. At the time of this practicum, there were three milieu-based living units (one a closed unit) on a single site located on the outskirts of the city of Winnipeg.

Marymound School for Girls is a private residential agency for girls operated by the Sisters of the Good Shepherd. The agency serves predominately adolescent girls and offers a continum of service from closed to community based residential living units. The closed and community based programs are geographically separated. The community based group homes are located in north and central Winnipeg.

Between September 1979 and January 1980, the author held a series of meetings with senior administration, child care supervisors and workers at Knowles and Marymound, to determine the need and desire for in-service training for child care staff. As a result of these meetings, the author offered her services to conduct an in-service training program on the use of groups in residential treatment.

The in-service sessions began in mid-January at Knowles (six child care workers) and at the end of January at Marymound (fourteen child care workers). The in-service programs occurred once per week at both agencies

for a duration of two to three hours over a ten week
period.

Client Group

It is important to note that throughout this practi-
cum, the author recognized that there were two inter-
related systems and thus two client groups. The first
system consisted of the executive-directors and super-
visors of the two agencies with whom the worker assessed
the interest and need for in-service training and
negotiated access to a client group of trainees. The
second system consisted of the child care workers of the
two agencies who were to be the recipients of the in-
service training programs.

The dynamic relationship between these systems is
best illustrated by Schwartz's diagram (1977, p.1334).
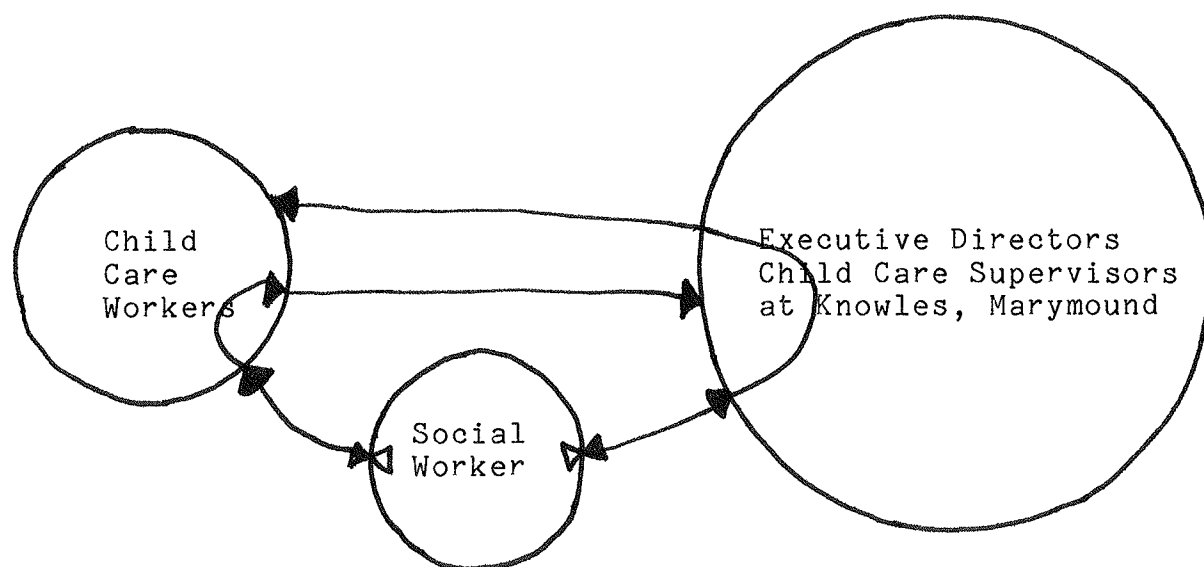
The worker's interventions with each of these systems, especially in the tuning-in phase, were considered critical and are discussed further in Chapter V. A brief description of the process of entering these systems and the skills used by the worker are described.

Tuning-In

Schwartz (1977) identifies the main goal of the worker for this stage as being to enter the agency process and establish the worker's function (p.1331).

Entering the process at Marymound

- August 1979: an exploratory phone call to the executive-director resulted in an invitation to an agency management meeting.

- September 1979: a meeting with agency management group where the author expressed interest in providing in-service training for child care workers in 1980 as part of an M.S.W. practicum. The management group suggested ideas and a way of proceeding that involved meeting with child care workers to assess their interests and needs.

- October to November 1979: the author met with child care staff work groups. A letter and questionnaire were sent to staff who were not able to attend these meetings (six letters were sent - four replies were received) (Appendix A).

- December 1979: a report by the author of the child care

workers needs and interests for in-service training was submitted to the executive-director of Marymound (Appendix B).

- January 1980: the report resulted in further discussions to explore and to negotiate a contract for in-service training with the author and two staff members responsible for this training.
- January 1980: a phone call from one of the above staff confirmed general details of a contract with Marymound.

It was agreed that the author was to:
- provide a ten week, three hours per week in-service training program for child care workers in the use of the group in residential treatment.
- utilize child care workers experiences and the experience in the group as a basis for learning in the training program
- the program was open to all child care staff in Marymound

The agency was to:
- arrange for six to twelve child care workers to attend the program
- arrange for child care workers to attend the training program on work time or receive time back

Entering the process at Knowles Center

- August 1979: an exploratory phone call to the executive-director.

- October 1979: a meeting was held with Knowles management group.

- This meeting led to several meetings with child care supervisors in October-November 1979.

- These meetings identified a number of potential obstacles to acceptance and successful completion of a training program (such as, stress of provincial government evaluation, possible staff changes as a result of the evaluation, uncertainty by supervisory staff about the agency's commitment to release staff from work duties for in-service training and uncertainty on the part of supervisors as to staff selection).

- November 1979: a decision was made with child care supervisors to wait until the provincial government evaluation of the agency was completed before providing an in-service training program.

- December 1979: follow-up phone calls to child care supervisors and the executive-director resulted in conflicting information as to the need for an in-service training program.

- January 1980: at a meeting with two child care supervisors, the author stated her concern that the in-service training program was being forced on child care

workers. This was denied. Support was indicated for the program.

A contract for the author to provide an in-service training program in the use of the group was agreed to as follows:

The author was to:

- provide a ten session program on Thursdays for a maximum three hours per week starting January 17 in the Family Room at Knowles.

- utilize child care workers experience and experiences in the training as a basis for learning about groups.

- assure what happened in the training program would be kept confidential.

The agency was to:

- provide six child care workers for a group (one child care worker would be female).

- insure that child care workers would attend the training program on work time or receive compensatory time back.

It should be noted that the "tuning-in" process in both agencies took several months, numerous phone calls and meetings prior to actual service delivery. The workers skills utilized during this tuning-in phase are described as follows:

Empathic Skills

One of the skills that Schwartz (1977) and Shulman (1979) emphasize as most important to this stage is the worker's ability to use empathic skills to "tune-in" to coded verbal and non-verbal messages. These coded messages can provide clues to unspoken feelings, issues or processes.

At Marymound

The author's use of this skill at the initial meeting with the management group at Marymound was critical to subsequent contact with the agency's child care workers. At this initial meeting, a child care supervisor stated how difficult it was for staff to talk openly in groups and requested that the author meet with staff individually or informally. What this supervisor seemed to be saying indirectly was 'the more informally you can meet with staff the more information you will get'. This comment sensitized the author to the importance of planning to make each meeting with child care staff as informal as possible. The author assumed it would be easier for child care staff to talk without their supervisor (agency representative) being present. Based on this assumption, the author, then planned several interventions to make the client group of child care workers more accessible. First, the author approached the child care supervisor, who appeared most receptive. (The one who made the

comment at the management group meeting). Second, the author requested meeting with her child care staff separately to assess in-service needs and interests. Third, using this experience as an example, the author made similar requests of other supervisors for closed meetings with child care workers in other Marymound settings. All supervisors complied with this request and it was possible for the author to meet separately with child care workers.

At Knowles

While the author was waiting to meet with the management group, a staff person asked her a question which sensitized her to possible problems she had not previously anticipated. The question "when are you coming to teach the course" made the author wonder if her proposal had been accepted prematurely and if so, who had been involved in this decision. Furthermore, when the author was introduced to the management group the executive-director stated: "This is Chris. She will be coming to teach the course on groups." These events led the author to hypothesize that decisions were made centrally without involving staff affected by them.

The author then intervened to re-direct the process in order to clarify her purpose in approaching the agency and to attempt to gain access to the child care supervisors and the client group (child care workers).

Initially, the author requested information on what had transpired between her initial phone call to the executive-director and this meeting. The second step was to introduce herself to the group, clarifying her interest and purpose in contacting Knowles. The third step was through questions, to focus discussion on child care staff development needs at Knowles. Redirecting the process lead to a general discussion and questions. This meeting concluded with the executive-director suggesting the author meet with the child care supervisors as a way of proceeding. The author requested that supervisors approach their child care staff about their needs for staff development prior to meeting with her. At Knowles, the author did not have access to the client group prior to the training program. This, plus the author's initial hypothesis about centralized decision-making sensitized her to possible resistance on the part of the training group.

Both these examples illustrate the importance of the worker's 'tuning-in' to the messages which provided clues about unspoken issues, feelings and processes.

Mediating Function

The following example from Marymound illustrates the use of the author's previous knowledge about a client group and the author's task to mediate between the agency system and the client group.

From the author's previous experience with a similar client group she knew the arrangement of times for in-service training programs for child care workers is difficult due to shift work schedules. Often child care staff are requested to attend training on their days off, sometimes without receiving compensatory time back.

Therefore, the author negotiated her contract with the agency so that child care staff could attend the program during work time or be given compensatory time off for attendance. Initially, the two staff representing the agency requested the author negotiate times with child care staff. Acknowledging a lack of power to influence the scheduling process, the author requested this be done by those responsible for staff scheduling the child care supervisors. The two staff agreed to support this proposal and present it to the supervisors. The proposal was subsequently agreed to by the supervisors enabling the majority of the child care workers to attend on their work time or receive time back.

The tuning-in process with both agencies has been outlined. The use of empathic skills and the use of the worker's previous knowledge about a client group to mediate between agency and client group have been described to illustrate the worker's skills in this stage of group development.

Beginnings

In this stage, the worker's goals are to establish a clear contract about the group's learning goals, translate group purpose into specific tasks, and help the group reach an agreement on procedures.

At Marymound

This stage lasted for two group meetings.

- In the first meeting following introductions and a brief opening statement by the author, the group aired concerns and shared problems they had in working with groups.

- The worker summarized these problems and elicited from the group members what they wanted to know about groups. This resulted in a group learning agenda (tasks). (Appendix C).

- Questions about procedure (large group or small work groups) resulted in the group deciding on and forming small work groups.

- A concern expressed by a group member about confidentiality was clarified by the author.

- The author's role was also clarified: setting sessional contracts; providing resource materials and establishing tasks for the small work group in order to generate material for learning and discussion.

At Knowles

- The beginning stage continued from the first to the fifth meeting.

- The group decided on learning tasks (Appendix D).

- Issues of confidentiality, the purpose of the group, the role of the leader, and involuntary membership in the group were identified by the group members as obstacles. These needed to be dealt with before proceeding to the work stage.

Following are some examples of the skills the worker utilized during the beginning stage:

Worker Statement about Client-Agency Connection

Both Schwartz (1977) and Shulman (1979) stress the importance of the worker's ability to make a simple statement about client-agency connection. The author used such a statement (Appendix E) for both groups. After this statement, the worker's task is to use her skills to reach for feedback from the group members on their conception of their purpose (Schwartz 1977, p.1335).

Reaching for Feedback

At Marymound, the initial feedback concerned group procedure rather than comments regarding group purpose as set out in the opening statement. From such questions as, "was there as set format?", or "would this always be a large group?", the author attempted to reach for feedback

by encouraging discussion among group members. This discussion was very limited. The author attempted to reach for more feedback by requesting that group members share the problems they have in working with groups and what they wanted to know about groups.

This request resulted in an active group exchange. The author summarized the topics identified during this exchange and listed them. The author then suggested that these topics could be the groups learning goals or purpose. The group agreed.

Demand for group members to engage with one another

At Marymound, a group member in the first meeting had commented on the size of the group by asking the question: "will the group always be this size?" (fifteen members). This question had sensitized the author to the issue of group size being a potential obstacle to active group participation.

In the second meeting, the author commented on the size of the group and suggested the group consider forming smaller work groups for discussion and some group tasks. The author described possible alternate ways to form these groups. The author's goal was to have the group members take responsibility for resolving this issue. To do this, the author "demanded" that the group members discuss their reaction to the alternatives and perhaps create their own

solution. The author then withdrew from the discussion.

The group members attempted to draw the author into the discussion and at one point suggested that she sub-divide the group. The author remained uninvolved in this discussion or else redirected questions back to the group.

The group members continued to discuss this issue with one another. They finally reached a solution to this issue and independently established a procedure for forming small work groups.

To resolve this issue, the author demanded the group members "move pàst their embarassment to the exchanges they need in order to deal with their problems" (Schwartz, 1961, p.1335). This process also generated excellent teaching material about the dependancy of the group on the leader.

In the beginning stage, the worker's skills in making a statement about client-agency connection, reaching for feedback and making the demand for group members to engage with one another have been illustrated.

Work

In this stage

> ...group members and worker direct
> themselves to the main body of problems and
> to the major tasks of the helping process.
> (Schwartz, 1977, p.1335)

At Knowles

- The group worked on the learning tasks identified in the beginning stage and developed additional items for learning.

- The additional items came from the author asking the trainees to reflect on their own experience in this and other groups at Knowles.

- One group session was video-taped. This provided the group with material which enabled the members to analyze their own interaction as a group.

At Marymound

- The large group was used for giving information (stages of group development, roles, giving feedback) or for sharing work from the smaller work groups (analyzing tuning-in phase, the first meeting and stages of development for large work groups).

- The author was absent for one session (the seventh) and the group opted to meet on their own and to work in small groups on a task: a self-assessment of each individual's group skills.

- Learning was done in the context of utilizing the groups own experience and relating these to their experiences as child care workers.

Following is a description of skills used by the author in the work stage:

Dealing with Obstacles to Work

One of the skills Schwartz (1971) defines for the worker in this stage is "detecting and challenging the obstacles to work as these obstacles arise" (p.16). Shulman (1979, p.72-73) further defines this as the worker's skill in pointing out obstacles in either taboo areas or dealing with authority themes.

At Knowles

During a discussion about group norms of honesty and confrontation, a member stated that the hidden agenda in the group's formation by the agency was to "heal the wounds between units" (cottage settings). Sensing this may be a group issue, the author asked if other members felt this way. No group members did. The group member then asked the author directly if she knew of a hidden agenda. She replied 'no' and that in initial discussions, the agency had not suggested it had any agendas for staff. Then another group member said "yes, you approached Knowles, it did not approach you." The author then stated that this discussion about whether the agency had a hidden agenda in having this in-service program for staff seemed an important obstacle to have out in the open.

Sharing data skills

At Marymound, the author was to be absent for one session (the seventh). The author proposed that the

group subdivide into the small work groups and engage in a self-assessment of each individual's group skills. The group decided to meet on their own. As group member feedback was an optional, unstructured part of this task, the author decided it was important to discuss the groups ideas on feedback and to provide information in this area before leaving them to proceed on their own.

First, the large group was asked to identify what was important in giving feedback. The group raised concerns about timing and dealing with a defensive person. Second, the author engaged in several spontaneous role plays on giving feedback using situations provided by group members. Third, points raised from group discussion and the role-play situations were related to a hand out on feedback provided to the group by the author.

This sharing of data on feedback by the author provided group learning and left the group with a format for giving feedback.

Endings

In this stage the worker prepares the group for its final session and helps the group to evaluate its progress.

At Knowles

- The author reminded the group in its fifth meeting that this was the half-way mark of its duration.

- The group contracted to discuss endings in its eigth meeting.

- The discussion on endings led the author to focus the group on examining its own ending and to review what members wanted to accomplish in this meeting: how to take back to their co-workers what they had learned in this group.

- In the ninth meeting the group and the author planned the format of the last meeting.

At Marymound

- The author reminded the group in the eigth meeting that there were only two more meetings left.

- The author suggested a possible format for the last meeting. The group agreed to this and a group member suggested a celebration.

- Two group members formed a social committee to decide on a luncheon date when all members could be present.

- In the ninth meeting, the group members began to express anger at the approaching ending and their disappointment with the group.

The last session was a chance, in both groups, to complete evaluations, discuss past learnings, to acknowledge what members felt had or had not been accomplished, what worked or didn't and to give feedback to the author.

Two skills which Schwartz (1977, p.1337) states are important in this stage are the worker's ability to assist the group in reaching positive and negative experiences. In addition, the worker needs to be able to share her own feelings about termination while maintaining her role as facilitator.

The worker sharing her own experiences about the group

As the group at Knowles approached termination the worker realized that the group had been a difficult experience for herself and the participants. Thus, the worker chose to begin the final group with a statement saying what the group had meant to her and requesting feedback from the group on that statement. The author acknowledged her experience first as a means of opening up this area for the group.

She acknowledged that the group had been hard. This had made the group a good learning experience for the author. She listed what she had learned about contracting and confrontation. She stated that for her, the experience was best summed up in the works of a group member, "you came wanting a group but the group didn't come looking for you."

The group member who had made this comment then responded: "it was hard to start a group in an agency like Knowles where staff had been isolated and where there were other pressures."

Helping the group recall positive and negative experiences

The author commented on the positives she saw in the group: their sharing, getting to know each other and the way they had progressed in their work. The author requested specific feedback on the beginning of each group meeting and how she might have handled these differently. One member stated the group always seemed to need fifteen minutes or so to warm up and perhaps the author could have acknowledged this. Another member disagreed, feeling time had been given. Another member stated it was hard for him to start each meeting as he came from another group and his 'punchiness' was a carry-over from that group.

At Knowles, these two interventions on the part of the worker assisted the group members to more openly evaluate their experience as a group.

Summary

This chapter has illustrated how the mediating model of group work was used as an intervention to provide training for child care workers in the use of the group in residential treatment. Selected examples of the goals and specific skills in each of the four stages of group development were presented.

CHAPTER IV

EVALUATION

This chapter will describe a questionnaire which was developed to evaluate this staff in-service training program. A description of the subjects completing the questionnaire, a statistical analysis of the responses and trainee comments from a general evaluation of this program are also included.

A questionnaire (Appendix F) was developed by the author. The assumptions underlying this questionnaire are:

1. That child care workers think they have little knowledge or skill to utilize groups in residential treatment.

2. That their knowledge and skill are influenced by their confidence which relates to their past experience with groups, present supervision, positive role-models, and values/beliefs about the importance /use of groups in residential treatment.

3. That it is possible to affect the knowledge, skill and confidence level of child care workers about groups through a training program which focuses on:

    - recognizing their experience
    - reinforcing present knowledge and skills
    - giving new information
    - using a training group as a basis to understand and to build knowledge and skills about groups
    - using a ten week time period to integrate new learning in their work.

The purpose of the questionnaire was to:

1. Indicate each child care worker's knowledge and skill level in group dynamics and processes. Variables which influence the workers confidence level are also assessed.

2. Assess how the worker's level of knowledge, skill and confidence are influenced by participation in an in-

service training program on the use of groups in residential treatment.

3. Describe selected socio-demographic variables of the child care workers.

There are several limitations to this questionnaire. First, it is not a standardized measure. Second, limitations of time meant that it was not possible to pre-test the questionnaire. Third, it is lengthy. Fourth, the subject population is small. (N pre = 20; post = 14). Fifth, the questionnaire does not directly evaluate the social work intervention used in this in-service training program.

A general evaluation section (Appendix G) consisting of open-ended questions about the in-service training program and the worker's strengths and weaknesses was developed by the author.

Subjects

At Knowles the staff group consisted of five male staff and one female staff. The age range was from twenty-five to thirty-six years. The workers had worked from thirty to fifty-five months as child care workers and from twelve to fifty-five months at Knowles Centre.

At Marymound, the group began with fifteen child care workers and ended with ten. Membership declined because of staff holidays. This group consisted of three males and twelve females. The range of child care experience

went from one person who had no previous child care experience to another who had sixty-three months experience. The workers had been at the agency from two to sixty-three months.

Administration of the Questionnaire

Child care workers were asked to complete the questionnaire at the beginning of the first session (pre) and of the last (tenth) session (post) of the in-service training program. The brief general evaluation section was completed with the post-questionnaire.

Results

Twenty child care workers completed the pre-questionnaire; fourteen completed the post. Five workers were not present for the post-questionnaire either because they were absent or had to leave the program early for vacation. One worker completed the post-questionnaire who had not completed the pre-questionnaire. Thus, the total number of subjects for this questionnaire is fourteen (N = 14).

Socio-Demographic Variables

Age: The age range of the subjects was from 23-53 years.

        50% were from 23-26 years
        30% were from 27-20 years
        15% were from 31-35 years
         5% were from 35 years and over

Sex: 60% female - 40 % male

Education: 35% of the subjects had from 1-3 years of university
25% of the subjects had more than 3 years of university
25% of the subjects had community college training
10% of the subjects had a child care certificate
 5% of the subjects had high school education

Months worked as a Child Care Worker:

This ranged from less than 1 month to 63 months

40% had worked from 0-20 months
30% had worked from 21-40 months
30% had worked from 41-63 months

Months worked in Agency

This ranged from 2 to 102 months

45% had worked from 0-19 months
30% had worked from 20-39 months
25% had worked from 40-102 months

Previous Training with Groups

The following categories were indicated:

80% on-the-job experience
60% in-service training
40% personal growth group
30% community college course
20% youth leadership training
20% life skills training
 5% continuing education course
 5% university course

Other training listed by subjects were: Juvenile Counsellor, New Careers training, Chapel Hill training, Manpower training, work as a camp counsellor.

Previous work or volunteer experience:

This open-ended question was categorized by the number of identified related experiences indicated (O - no related experience to the maximum number indicated = 5). Responses ranged from:

    5% No identified experience
    5% 1 identified experience
   25% 2 identified experience
   20% 3 identified experience
   30% 4 identified experience
   15% 5 identified experience

The most commonly identified experiences in working with people were: volunteer or counselling work with the mentally handicapped, children's camps and recreational experience with children. The least common were bar manager, cashier and waitress.

Knowledge

Subjects were asked to indicate their level of knowledge by a Likert type scale to questions relating to group development and dynamics. The pre and post-test scores for knowledge were compared by T - tests. The acceptable level of differnce for this study was set a p<.01. Knowledge scores between pre and post-testing were found to be significantly different. A T - test indicated that the pre-mean of 86.9 (S.D. 27.5) and the post-mean of 123.57 (S.D. = 1.7) reached a highly significant level of difference (t = 5.73, N = 14, p<.001).

Skill

Subjects were asked to indicate their level of skill by using a Likert type scale to respond to questions relating to group development and dynamics. The pre and post-test scores for knowledge were compared by T - tests. No significant difference was found between pre and post-test skill scores.

Confidence

Subjects were asked to indicate their level of confidence by using a Likert type scale to questions related to variables which may or may not influence a child care workers level of confidence. It was not possible to compare pre and post-test scores for level of confidence as there were a high number of missing cases on the post-test scores (10). Scores for this scale may be missing because administering the post questionnaire in the last session may not have allowed enough time for integration of learning to affect level of confidence.

Further Analysis

Comparison of the two groups, Knowles and Marymound, and their knowledge and skill scores did not produce significant results. Further comparison of knowledge and skill scores with the socio-demographic variables of each group to indicate how these variables were related to the degree of change did not produce significant results. The

only exception to this was the variable of in-service education. At Marymound the people with no in-service education learned more than those who had previous in-service experience related to groups.

Spearman correlations were done to determine what variables were related to the degree of change. Two variables reached significance. The first was a comparison of Date of Birth and Knowledge. Older trainees gained more than younger ones, indicated by a greater difference in their pre and post-scores on the knowledge scale (rho 0.49, N = 14, p = <.03). The second was a comparison of knowledge and skill. Trainees who increased in their knowledge also perceived that they increased in their skill. (rho = 0.92, N = 14, p<.001). Other correlations which the author expected to reach significance but did not were: education and knowledge, and years worked as a child care worker and skill.

Some subjects had worked longer in the agency than they had as child care workers. This would seem to indicate that they had worked in the agency in a capacity other than child care worker. In previous training in groups subjects indicated on-the-job experience and in-service training were the two main sources of previous training. The author had hoped to show a relationship between this variable and level of confidence. However, this was not possible because of the low subject response

to the confidence scale.

Summary

In summary, subjects indicated a significant increase in their level of knowledge between their pre and post-test scores. Although subjects indicated no significant difference between pre and post-test levels of skill there was a significant relationship between knowledge and skill. Those subjects who perceived an increase in level of knowledge also perceived an increase in their level of skill.

At the end of this ten session in-service training program, subjects noted an increase in their level of knowledge. However, measurement at the end of the tenth session may have been too short a time for subjects to note an increase in their level of skill.

Older subjects appeared to benefit more from the training program than younger ones. This may be due to more experience and knowledge on which to build their additional learning. Subjects at Marymound with no prior in-service training perceived they learned more than those who had previous in-service training. This appears to support the observation that in-service training is one of the primary means of providing learning to child care workers.

General Evaluation

      The general evaluation (Appendix G) was responded to by fifteen trainees at the time of the post-questionnaires. Responses are indicated by the three most common responses with the number or responses in brackets.

      Respondents indicated:

1. The three most useful concepts learned as:

     - the different stages of group development (6)
     - the use of specific groups for specific purposes (5)
     - how to give feedback (5)

2. The three most important concepts you already know about groups but which were relearned:

     - how the size of a group and 'common ground' affect a group (6)
     - the importance of termination (4)
     - how to give feedback (3)

3. How staff development program has been helpful in everyday work with groups in residential care:

     - opportunity to be with fellow workers, to get to know them and improve working together (5)
     - confidence to approach other staff (social workers) to change process of group meetings (4)
     - greater awareness of stages of group development and group process (3)

4. a. What like most about format:

        - emphasis on the practical, sharing ideas and resources (7)
        - making own agenda (5)
        - time for discussion (3)

      b. What like least:

        - easy pace (2)
        - variety of individual comments: not manditory, work on days off, not enough time, not enough depth for some topics, time of day, questionnaires too long, no outline

5.   a.   Facilitators strong points:

          - good knowledge (6)
          - able to direct group without taking over (4)
          - open to feedback (4)

      b.   Facilitators weak points:

          - needed to pull group together more at first re:
            purpose/goals, expectations (2)
          - too fixated on importance of groups (1)
          - weak at keeping people on topic (1)

Summary

     This chapter has described the results of a questionnaire used by the author to evaluate this staff in-service training program. A description of socio-demographic variables and a statistical analysis of levels of knowledge, skill and confidence and their relationship to these variables were reported. Responses to a general evaluation were also indicated.

CHAPTER V

SUMMARY

The author set out to use the mediating model of group work to provide an in-service training program on the use of the group in residential treatment to two groups of child care workers. The following are some observations related to the objectives of this practicum outlined in Chapter I. These observations are tentative because they are based on subjective views and involve a small number of participants.

Within the limits of this particular practicum and in the subjective view of those who participated, it appears that:

a) Child care workers used their identified needs and experiences as a base for training. This was done by initially sharing their needs and experiences in working with groups in residential care to create a learning agenda for each in-service training program.

b) Child care workers identified what they liked most about the format of the in-service training program as the emphasis on the practical, sharing ideas and resources, setting their own agendas and having time for discussion.

c) Child care workers in both groups perceived that their knowledge about groups increased between the first and tenth training session. This was found to be statistically significant.

d) Only those child care workers who perceived an

increase in their level of knowledge also perceived an increase in their level of skill in working with groups.

e) In general, there was not a significant measurable increase in level of skill or confidence in working with groups as a result of this training program. This may be due to the short time period between administering pre and post-tests.

f) There was no significant difference between both groups and their acquisition of knowledge and skill.

g) The primary identifiable ways child care workers defined this program as being helpful in their everyday work with groups in residential care included: the opportunity to know fellow workers outside the usual work context and to improve working together; the confidence to approach other staff (social workers) to change the process of group meetings; and a greater awareness of group development and process.

h) The mediating model of group work due to its flexibility, its systems view of the client, its mobilization of the client's own resources and experience; and its fit with the needs of adult learners, appears to be a viable intervention to use with child care workers for in-service training programs.

The above observations cannot be generalized to other situations because of the small number involved and the limitations of the objective criteria for measuring results.

The author had begun the practicum with the view that in each system there were two client groups (agency and child care workers). The author's initial negotiations with the agency provided access to the child care workers. However, the author failed to make provision for an on going mechanism to monitor the contract made with the agency or to evaluate the in-service training program for them. Upon completion of the program at Knowles the executive-director requested some feedback. Two letters were sent to provide closure to this author's contract with the agencies (Appendix H).

In the author's experience with both groups there were differences which seemed to affect the experience of each group.

At Marymound, it was possible to meet with the agency's child care workers either directly at meetings or indirectly (via letter) in order to assess their in-service needs. At Knowles, it was not possible to negotiate access to the client group to assess their needs. This seemed to create more confusion about what the in-service program was about and what the agenda of the agency was in providing this program.

At Marymound, the agency seemed to be working to meet its child care workers' needs. At Knowles, however, the focus seemed to be on accomodating the author's request rather than assessing staff needs.

All child care workers at Knowles were compensated for time spent in this program; this was more variable at Marymound and the length of the group sessions were shortened to meet worker's needs to return to work.

Although the author worked to have all participants attend on a voluntary basis, there were involuntary members in both groups. However, there appeared to be less resentment to this at Marymound than at Knowles.

The size of the group at Marymound (fourteen) was larger than Knowles (six). This provided a broader range of experience for the group to draw on, generated more areas for learning, and allowed for more intensive inter- action within the group. It also allowed for less disruption and/or stress if members were absent during a training session.

The author suggests that consideration be given to the following recommendations, if a similar group approach is planned to provide in-service training with child care workers:

1. The initial intervention with the agency involves two stages:

    a) allowing sufficient time (four to five months)

for negotiating an entry into the agency system, and

b) assessing its child care worker's needs and mediating between the client and the system to establish a working contract.

2. An ongoing reporting mechanism and procedure for evaluation be established with the agency that will not inhibit client participation.

3. Efforts should be made to ensure an adequate group size to provide a range of experience and enhance participation.

4. Participation on a voluntary basis should be negotiated with the agency. This was found to be beneficial in both groups.

5. Effort should be made to have the agency provide the in-service program during working hours. If this is not feasible, the child care workers should receive compensatory time for program participation.

6. To obtain a more accurate measure of increases in skill or confidence, post-tests should be administered thirty to sixty days after the in-service training program is completed.

7. The use of reliable measures is recommended to provide a more valid indication of results.

This chapter has outlined some observations related to the objectives of this practicum, discussed the author's experience of both groups and suggested recommen-

dations for future in-service training programs for child
care workers based on this model.

BIBLIOGRAPHY

ADLER, Jack. "In-Service Training for Child Care Workers." Child Care Quarterly. 1978, 7(1):62-71.

ADLER, Jack. "The Child Care Counsellor as Target of Transferred Behaviour. Child Care Quarterly. 1973, 2(2):98-106.

ADLER, Jack. The Child Care Worker: Concepts, Tasks and Relationships. New York: Brunner Mazel Publishers, 1976.

ADLER, Jack. "The Child Care Worker's Leadership in Group Process." Child Care Quarterly. 1979, 8(3):196-205.

ADLER, Jack. "The Delinquent-Oriented Adolescent in Residential Placement." Child Welfare. 1969, 48(3):142-147.

ALT, Herschel. Residential Treatment for the Disturbed Child. New York: International Universities Press Inc., 1960.

ALT, Herschel. "Responsibilities and Qualifications of the Child Care Worker." American Journal of Orthopsychiatry. 1953, 23:670-675.

American Association for Children's Residential Centers. From Chaos to Order: A Collective View of the Residential Treatment of Children. New York: Child Welfare League of America, 1972.

APPELBERG, Esther. "The Cottage Meeting as a Therapeutic Tool." Group Work as Part of Residential Treatment, Henry W. Maier (ed.). New York: National Association of Social Workers, 1965. Pp.142-154.

BARNES, Herbert F. and Samuel M. Kelman. "From Slogans to Concepts: A Basis for Change in Child Care Work." Child Care Quarterly. 1974, 3(1):7-23.

BEKER, Jerome. "Development of a Professional Identity for the Child Care Worker." Child Welfare. 1975, 54(6):421-431.

BARON, Richard, et al. "Special Essay-Review of the Basic Training Course for Residential Child Care Workers." Child Care Quarterly. 1978, 7(3):250-267.

BEKER, Jerome, Shirle M. Husted, Paul M. Gitelson, Philip
     Kaminstein and Lois Finkle Adler. Critical Inci-
     dents in Child Care: A Case Book. New York:
     Behavioural Publications, 1972.

BERMAN, Netta. "The Group Worker in a Children's
     Institution" Creative Group Living in a Children's
     Institution: A Symposium, Susanne Schulze (ed.).
     New York: Association Press, 1951. Pp. 117-128.

BERWALD, James, F., M.D. "Cottage Parents in a Treatment
     Institution. Child Welfare. 1960, 39(10):7-10.

BETTELHEIM, Bruno. "Training the Child Care Worker in a
     Residential Center." American Journal of Orthopsy-
     chiatry. 1966, 36(4):694-705.

BIRNBACH, David. "Some Observations on the Dilemmas and
     Pressures of the Child Care Job." Child Care
     Quarterly. 1973, 2(2):87-97.

BIRNBACH, David. "The Skills of Child Care." The Practice
     of Group Work, William Schwartz and Zerapio R.
     Zalba. New York: Columbia University Press, 1971.
     Pp. 177-198.

BISNO, Herbert. "A Theoretical Framework for Teaching
     Social Work Methods and Skills, With Particular
     Reference to Undergraduate Social Welfare
     Programs." Journal of Education for Social Work.
     1969, 5:5-17.

BRINTALL, Isabel, V. "A Perspective on Training Child
     Care Workers: A Videotape Teaching Tool Created in
     a Residential Treatment Center for Children."
     Child Care Quarterly. 1978, 7(1):98-108.

BRUNDAGE, Donald H. and Dorthy Mackeracher. "Summary of
     Learning Principles with Implications for Facili-
     tating Learning and Planning Programs." Adult
     Learning Principles and Their Application to
     Program Planning. Ontario: Ministry of Education,
     1980. Pp. 97-116.

BURMEISTER, Eva. The Professional Houseparent. New York:
     Columbia University Press, 1960.

CHAMBERS, Guinevere, S. and Genevieve W. Foster. "Toward
     Improved Competence in Child-Care Workers: A Two-
     Level Training Program." Children, 1966,
     13(5):185-189.

"Child Care Education and the 'Trainers'". Child Care Quarterly. 1979, 8(3):159-160.

Child Welfare League of America Standards for Services of Child Welfare Institutions. New York: Child Welfare League of America, 1973.

CHOROST, Sherwood B. "Emerging Challenges in Child Care Training: The Need and the Response." Child Care Quarterly. 1978, 8(1):5-6.

COHEN, Rosalyn, S. "The Institute for Child Mental Health." Child Care Quarterly. 1973, 2(1):62-67.

CRISTIANI, Therese, S. "Counselling Skills and the Child Care Worker: A Research-Based Training Program. Child Care Quarterly. 1978, 7(1):87-97.

DANIELS, Mary and Lila Finck, Nancy Woodruff. "A Team Approach to Teaching a Developmental Point of View." Child Care Quarterly. 1976, 5(3):187-191.

DIGGLES, Mary W. "The Child Care Counsellor: New Therapist in Childrens' Institutions." Child Welfare. 1970, 49(9):509-513.

DINWIDDIE, William F. Ph.D. "The Perilous Journey - A Training Monograph." Adolescence. 1974, 9(35):339-350.

DOWLING, Scott. "Treatment in Cottage Programs for Children with Severe Developemtnal Disturbances." Child Welfare. 1975, 44(b):395-405.

FANT, Raymond S. "The Use of Groups in Residential Treatment." Healing Through Living, Morris F. Mayer and Arthur Blum (eds.). Springfield, Illinois: Charles C. Thomas, 1971. Pp.72-93.

FARADAY, Marjorie L. "Group Process - The Key to Helping in Residential Care." Group Child Care as a Family Service, Allan Keith-Lucas and Clifford Sanford (eds.). Chapel Hill: The University of North Carolina Press, 1978. Pp.165-177.

FOSTER, Genevieve, W. and Karen D. VanderVen, Eleanor R. Kroner, Nancy Carbonara, George M. Cohen. Child Care Work With Emotionally Disturbed Children. Pittsburgh: University of Pittsburgh Press, 1972.

GALINSKY, M.J., and J.H. Schopler. "The Social Work Group". Models of Group Therapy and Sensitivity Training, J.B.P. Shaffer and M.D. Galinsky (eds.). New Jersey: Prentice-Hall Inc., 1974. Pp.19-48.

GOOCHER, Buell, E. "Ages and Stages in Professional Child Care Training." Child Care Quarterly. 1978, 7(1):7-20.

GROSSBARD, Hyman. Cottage Parents: What They Have to Be, Know and Do. New York: Child Welfare League of America, 1960.

GUINDON, Jeannine. "The Psychoeducateur Training Program." International Journal of Mental Health. 1975, 2(1):27-32.

GULA, Martin. "Office of Child Development: Cirriculum for Residential Child Care Workers." Child Care Quarterly. 1976, 5(1):63-64.

HARRINGTON, William A., et al. "The Development of a Technical Assistance System for Residential Treatment Programs." Child Care Quarterly. 1980, 9(2):100-111.

HEMBLING, David W., and Jeanette Mossing. "An In-Service Basic Counselling Skills Training Program for Child Care Counsellors." Child Care Quarterly. 1978, 7(1):72-86.

HEPWORTH, Phillip H. Personal Social Services in Canada: A Review. Volume 4 Residential Services for Children. Ottawa: The Canadian Council on Social Development, 1975.

HOBBS, Nicholas. "Helping Disturbed Children: Psychological and Ecological Strategies." American Psychologist. 1966, 21(12):1105-1115.

HROMADKA, Van, G. "How Child Care Workers are Trained in Europe." Children Away From Home: A Sourcebook of Residential Treatment, J.K. Whittaker and A.E. Trieschman (eds.). Chicago: Aldine, 1972. Pp.297-303.

HROMADKA, Van. G. "Toward Improved Competence in Child Care Workers: A Look at What They Do." Children, 1966, 13(5):181-184.

KADUSHIN, Alfred. Child Welfare Services. New York: MacMillan Publishing Co., Inc., 1974.

KLEIN, Alan. The Professional Child Care Worker: A Guide to Skills, Knowledge, Techniques and Attitudes. New York: Association Press, 1975.

KNOWLES, Malcolm S. The Modern Practice of Adult Education: Androgogy Versus Pedagogy. New York: Association Press, 1970.

KONOPKA, Gisela. Group Work in the Institution. New York: Association Press, rev. ed., 1970.

KONOPKA, Gisela. Therapeutic Group Work with Children. Minneapolis: University of Minnesota Press, 1949.

KONOPKA, Gisela. "The Role of the Group in Residential Treatment." Children Away from Home: A Sourcebook of Residential Treatment. Pp.171-176.

KURTZ, David P. "A Systematic Supervisory Procedure for Child Care Training." Child Care Quarterly. 1976, 5(1):9-18.

LANDER, Joseph, M.D. and Rena Schulman. "The Impact of the Therapeutic Milieu on the Disturbed Personality." Social Casework. 41, 227-234.

LANG, Norma C. "A Comparative Examination of Therapeutic Uses of Groups in Social Work and in Adjacent Human Service Professions, Part 1." Social Work with Groups. 1979, 2(2):101-115.

LOURIE, Norman V. and Rena Schulman. "The Role of Residential Staff in Residential Treatment". American Journal of Orthopsychiatry. 1953, 23, 798-808.

MAIER, Henry W. "Child Care as a Method of Social Work." Training for Child Care Staff. New York: Child Welfare League of America, 1963. Pp.62-83.

MAIER, Henry W. "The Child Care Worker." Children Away From Home: A Sourcebook of Residential Treatment. Pp.267-272.

MAIER, Henry W. "Child Welfare: Child Care Workers." Encyclopedia of Social Work, Volume I, John B. Turner (ed.). New York: National Association of Social Workers, 1977, Seventeenth Edition. Pp.130-134.

MAIER, Henry W. (ed.) Group Work as Part of Residential Treatment. New York: National Association of Social Workers, 1965.

MAIER, Henry W. "Social Group Work Method and Residential Treatment." Children Away From Home: A Sourcebook of Residential Treatment. Pp.153-167.

MALUCCIO, A.N., and W.D. Marlow. "Residential Treatment of Emotionally Disturbed Children: A Review of the Literature." Social Service Review. 1972, 46(2):230-251.

MATSUSHIMA, John. "Communication and Cottage Parent Supervision in a Residential Treatment Center." Child Welfare. 1964, 43(10):529-534.

MATSUSHIMA, John. "Group Work with Emotionally Disturbed Children in Residential Treatment." Residential Treatment of Emotionally Disturbed Children, George H. Weber and Bernard J. Haberlein (eds.). New York: Behavioural Publications, 1972. Pp.179-190.

MAYER, Morris F. A Guide for Child Care Workers. New York: The Child Welfare League of America. 1958.

MAYER, Morris F. "Differentials in Training Child Care Workers." Training for Child Care Staff. New York: Child Welfare League of America, 1963. Pp.41-62.

MAYER, Morris F. "The Housparent and the Group Living Process." Creative Group Living in a Children's Institution: A Symposium. Pp.97-116.

MAYER, Morris F. "The Group in Residential Treatment of Adolescents." Child Welfare. 1972, 51(8):482-493.

MAYER, Morris F. "Differential Education and In-Service Training for Child Care Workers." Child Welfare. 1965, 44(5):252-261.

MAYER, Morris F. and John Matsushima. "Training for Child Care Work: A Report on a National Conference. Child Welfare. 1969, 48(9):525-532.

MAYER, Morris F. and Leon H. Richman, Edwin A. Balcerzak. Group Care of Children: Crossroads and Transitions. New York: Child Welfare League of America, 1977.

OBBARD, Judith and Louise Pavia. "Characteristics of Child Development and Child Care Training Programs: A Report of a Survey. Child Care Quarterly. 1975, 4(4):244-248.

One Million Children: The Commission on the Emotional and Learning Disorders in Children. The CELDIC Report. Ottawa: Leonard Crainford, 1970.

PARADISE, Robert and Robert Daniels. "Group Composition as a Treatment Tool with Children." Further Explorations in Group Work, Saul Bernstein (ed.). London: Bookstall Publications, 1972. Pp.34-54.

PAPELL, C. and B. Rothman. "Social Group Work Models: Possession and Heritage." Journal of Education for Social Work. Fall 1966, Pp.66-77.

PAYNE, Chris. "Working with Groups in the Residential Setting." Group Work: Learning and Practice, Nano McCaughan (ed.). London: George, Allen and Unwin, 1980. Pp.58-69.

POLSKY, Howard W. and Daniel S. Claster. The Dynamics of Residential Treatment. Chapel Hill: University of North Carolina Press, 1968.

PORTNOY, Sanford M. "Power of Child Care Worker and Therapist Figures and Their Effectiveness as Models for Emotionally Disturbed Children in Residential Treatment." Journal of Consulting and Clinical Psychology. 1973, 40(1):15-19.

PORTNOY, Sanford M. and Henry B. Biller, Anthony Davids. "The Influence of the Child Care Worker in Residential Treatment." American Journal of Orthopsychiatry. 1972, 42(4):719-722.

RAE-GRANT, Quentin and Patricia J. Moffat. Children in Canada: Residential Care. Toronto: Leonard Crainford for Canadian Mental Health Association, 1971.

REDL, Fritz and David Wineman. Controls from Within: Techniques for the Treatment of the Agressive Child. New York: The Free Press, 1952.

RIEGER, Norbert I. and Allan G. Devines. "The Need and Some Specific Suggestions for a Standardized Training Program for a New Professional: The Child Mental Health Specialist. Child Care Quarterly. 1974, 3(3):177-187.

ROSENTALS, Varia, Aaron C. Piper and Hugh Whipple. "Professionalizing the Child Care Worker." Child Welfare. 1979, 53(9):565-569.

ROSS, Andrew L. and Norman D. Bernstein. "A Framework for the Therapeutic Use of Group Activities." Child Welfare. 1976, 55(9):627-640.

RYANT, Joseph C., et al. A Review of Child Welfare Policies, Programs and Services in Manitoba. Winnipeg, Manitoba: Government of Manitoba, 1975.

SANFORD, Clifford and Allan Keith-Lucas. "Seven Helping Methods of the Children's Home." Group Child Care as a Family Service. Chapel Hill: The University of North Carolina Press, 1978. Pp.18-38.

SCHULZE, Susanne (ed.) Creative Group Living in a Children's Institution: A Symposium. New York: Association Press, 1951.

SCHWARTZ, William. "Between Client and System: The Mediating Function" Theories of Social Work with Groups, Robert W. Roberts and Helen Northen (eds.). New York: Columbia University Press, 1976. Pp.171-197.

SCHWARTZ, William. "Generic and Specific Elements in Social Work Practice." Unpublished paper, 1967.

SCHWARTZ, William. "Group Work and the Social Scene." In Alfred J. Kahn, ed., Issues in American Social Work. New York: Columbia University Press, 1959. Pp.110-137.

SCHWARTZ, William. "Groups in Social Work Practice." The Practice of Group Work. Pp.3-24.

SCHWARTZ, William. "Social Group Work: The Interactionist Approach." Encyclopedia of Social Work, Volume II. Pp.1328-1337.

SCHWARTZ, William. "The Practice of Child Care in Residential Treatment." Healing Through Living: A Symposium on Residential Treatment. Pp.38-71.

SCHWARTZ, William. "The Social Worker in the Group." Social Work Process, B. Compton and B. Galaway. New York: Columbia University Press, 1961. Pp.14-28.

SHERMAN, Ralph. "A Training Program for Child Care Workers: A Demonstration." Child Welfare. 1966, 45(9):518-521.

SHULMAN, Lawrence. A Casebook of Social Work with Groups: The Mediating Model. New York: Council on Social Work Education, 1968.

SHULMAN, Lawrence. The Skills of Helping. Itasca, Illinois: F.E. Peacock Publishers, Inc., 1979.

SIPORIN, Max. "Situational Assessment and Intervention." Social Casework. February 1972. Pp.91-109.

Standards for Child Care Workers: Report of the Standards Committee of the State of Washington Conference of Child Care Institutions. Child Care Quarterly. 1973, 2(1):38-55.

STERNBACH, Jack and Allen Pincus. "Differences in Perception of the Group by Cottage parents and Social Workers." Child Welfare. 1970, 49(6):327-335.

STONE, Claire. "The Importance of the Child Care Staff in the Total Treatment Program of the Agency." Training for Child Care Staff. New York: Child Welfare League of America, 1963. Pp.3-13.

SWIFT, Joan. "Issues in Program Structure and Content. Child Care Quarterly. 1975, 4(4):251-254.

TRIESCHMAN, Albert E., Whittaker, James K and Larry K. Bendtro. The Other 23 Hours. Chicago: Aldine Publishing Company, 1969.

TOIGO, Romolo. "Child Care Manpower Development: A Literature Review." Child Care Quarterly. 1975, 4(1):6-17.

TOIGO, Romolo. "The Dynamics of the Juvenile Institution: A Systems Theory Approach." Child Care Quarterly. 1972, 1(4):252-263.

VANDERVEN, Karen D. "Developmental Characteristics of Child Care Workers and Design of Training Programs." Child Care Quarterly. 1979, 8(2):100-111.

VANSCOY, Holly. "The Child Care Worker as an Activity Group Co-Therapist." Child Care Quarterly. 1976, 5(3):222-228.

VANSCOY, Holly and Karen J. Bordelon. "Patients Perceptions of the Residential Treatment Staff: Revisited." Adolescence. 1974, 9(34):237-244.

WEINTROB, A. "Changing Population in Adolescent Residential Treatment: New Problems for Programs and Staff." American Journal of Orthopsychiatry. 1974, 44(4):604-611.

WHITTAKER, James K. Caring for Troubled Children. San Francisco: Jossey-Bass, Inc., 1979.

WHITTAKER, James K. "Training Child Care Staff: Pitfalls and Promises." Mental Hygiene. 1970, 54:516-519.

WILLNER, Milton. "Values of a Community Training Program for Child Care Workers." Social Work. 1959, 4(2):94-99.

APPENDIX A

LETTER TO CHILD CARE WORKERS

AT

MARYMOUND

Hello:

I am a social work student in the Master's program at the University of Manitoba. As part of my requirement for my Master's Degree, I want to do a practical piece of work related to the staff training and group supervision of residential child care workers. Thus I contacted Mary-mound and have met with the unit co-ordinators as well as the 'inside' units and the group home on St. Johns.

Unfortunately, my class schedule does not permit me to meet with you and the workers at your group home during your meeting time. Thus, I would appreciate your response to this letter. In my meetings with other child care workers at Marymound, I have been asking them to describe what they see as their needs for staff development. Once I have an idea of what these are I will meet with Sister Elise and Clay to determine how I might be involved in providing a program for child care staff.

There is a drawback in doing a letter like this and that is we do not get to meet each other and you are not able to ask questions of me. There is some information I would like to give you about my work experience: I have worked as a child care worker and supervisor at Knowles School. While I was at Knowles, I received a Certificate in Child Care from Chapel Hill. After leaving Knowles, I worked at Klinic as a counsellor in their crisis

. . . 2

intervention program. Recently, I have worked in the area of training for child care workers with The Children's Home of Winnipeg and with the Child and Family Services, Fort Alexander. You may also want to find out more about me by talking with the child care workers at Marymound with whom I have had contact.

This is what I would like from you: a description of the areas which are important to you for staff development. The areas where you would like input in order to do your job better. Thus, I would request that you complete the form at the end of this letter and return it to me in the envelope provided. Your response will be treated confidentailly.

Thank you for your time and response.

Sincerely,

CC/ns   Chris Cassels

---

1.   Length of time employed as a child care worker:

      0 - 1 year   _____
      1 - 2 years   _____
      2 - 3 years   _____
      3 +   _____

2.   Areas of importance for staff development.

APPENDIX B

LETTER AND ASSESSMENT OF STAFF DEVELOPMENT NEEDS

MARYMOUND

November 27, 1979

Sister Elise and Clay Wotherspoon
Marymound School
442 Scotia Street
Winnipeg, Manitoba

Dear Sister Elise and Clay:

I have finished my meetings with the child care staff at Marymound. Enclosed you will find a report outlining my impressions of these meetings.

I found the child care staff receptive, responsive and interested in their staff development. I was excited and encouraged by their responses.

I am anxious to talk with you about my impressions. My initial response to the report is that from the commonly identified areas I feel I have the interest and skill to provide staff development for child care workers in the areas of working with groups, working as a team member and counselling skills. What I would propose is that we meet to discuss the enclosed report and to consider how I may be of use in responding to some of the staff development needs identified by your child care workers.

The meetings I have had with the various staff groups have provided me with helpful learning opportunities. I would like to say how much I have appreciated the co-operation and support of the staff at Marymound.

I will phone you to arrange a convenient time to meet.

Yours sincerely,

Chris Cassels

CC/ns

Enc.

AN ASSESSMENT OF STAFF DEVELOPMENT NEEDS

FOR

CHILD CARE WORKERS

AT

MARYMOUND SCHOOL

SEPTEMBER - NOVEMBER 1979

Chris Cassels
Master's Student
School of Social Work
University of Manitoba

Since my initial meeting with the Executive-Director, Treatment Director, Child Care Supervisors and social workers, I have met with the child care staff of the 'inside' units, the College and St. John's group homes. Letters were sent to the child care workers at the Chestnut and Machray group homes. Six letters were sent and four responses were received.

My goal in these meetings has been: to establish what the child care workers see as important needs for their staff development and to provide them with an opportunity to meet me.

The information I gathered from these meetings is based on my subjective impressions of the child care workers responses to the question: What is your priority for staff development' and discussions of these responses.

The responses can be classified into four general areas:

1. Contact with other residential child caring agencies.

   The main focus was to understand how other agencies respond to children/adolescents with problems and to examine how child care staff are utilized.

2. Working with groups.

   Issues identified here were: responding to authority in the group, the use of my authority, group mettings, the spontaneous use of group meetings, dynamics in groups, how many staff should work with groups and managing the group on your own.

3. Intra-agency communication.

   Lack of communication within the system, child care workers feeling excluded, the need for support and recognition, how to communicate both with staff and dealing with a person who is defensive were identified as issues.

4. Counselling skills.

   Issues here were: how to listen more effectively, how to establish a relationship, responding to feelings rather than behaviour,

what is the balance between counselling and
unit management.

There was a split in two of these areas between
the 'inside' and 'outside' units. All the 'inside' units
identified contact with other residential child caring
agencies and working with groups as important areas for
staff development. Neither of these areas was identified
by the 'outside' units.

There were a variety of other areas which were
identified as needs in either one or two units. These
areas were:

- burn out and stress/monitoring personal
  involvement in work
- new ideas for and how to diversify program
  activities
- observing and recording
- more understanding of theoretical concepts
  related to child care
- child/adolescent development
- behaviour management techniques
- symptoms in adolescents
- the staff's parenting role in the lives of the
  girls
- different therapies
- normalization
- sexuality
- juvenile justice system
- community in-services for child care staff
- preparation and support of male staff working
  with adolescent girls

In addition, the following areas were identified
at the initial meeting with child care supervisors and
social workers:

- having child care staff become acquainted with
  other treatment agencies
- training child care workers for work with
  groups
- more sharing of information and appreciation
  between 'inside' and 'outside' staff
- helping staff to deal with confrontation by
  girls in group meetings and assisting staff to
  help girls deal with confrontations
- how to supervise staff
- values clarification

APPENDIX C

LEARNING AGENDA

MARYMOUND

The Use of Groups in Residential Care

Marymound/January 1980

Identified Issues

1. What is group dynamics, group process

2. Stages of development which all groups go through, how to recognize, workers interventions

3. Different uses of groups in residential care

4. The effect of the size of the group on what happens

5. How to get the group involved and keep them involved

6. Who should run a group - one staff, others

7. If one staff runs a group, how can the rest of the staff keep their authority in the group.

8. How do I deal with one powerful person in the group

9. How to avoid power struggles/barriers between staff group/girls

10. The staff as a group: how do we work together - in a group, how can we support one another

11. How can I create a caring atmosphere in my group

12. How can I get kids in the group to work with each other

13. Kids being 'stripped bare' in the group. What is the purpose of the group anyway.

14. Removals from the group - when, how, effect on the rest of the group, explaining to the group

APPENDIX D

LEARNING AGENDA

KNOWLES

Issues in working with groups

1.   Working with an age range

2.   Working with a skill range

3.   Setting out expectations to kids in a group

4.   How much control should the child care worker have in
     a group.

     How much control should the group have.

5.   How do you deal with a group where one kid's needs
     seem to take over/where one kid is an isolate.

6.   Others: Working with a kid who is withdrawn

APPENDIX E

AUTHOR'S OPENING STATEMENT

Author's Opening Statement

I would like to start by explaining what this staff development group is about and what my role is. Then I would like to know if what I've said fits with why you have come here.

All of you as child care workers in a residential setting are working with kids who have been brought together to live in groups. I see the group and the group process as an important part of residential treatment. Groups are often hard to work with and difficult to understand. Because the kids you work with are demanding, it's often easier to work one to one rather than with a group.

This group might be a place where you can get some more information about groups and their use in residential treatment and what makes groups work or not work. Some of this information will come from me but a lot of it will come from you. I believe you already know a lot about groups from your present and past experiences.

I see my job as helping you learn with each other. I will do that by giving you information, letting you share your experiences and looking at what is to be learned from them and also using the group experience we are having here. I want to assist you in taking what you learn here back to your present work. Does this make sense? Does this sound like what you were coming to? Do you have any

questions about what I've said?

(Pause for feedback)

To get started, I think it would be a good idea to share with each other some of the difficulties you have had in working with groups in your unit. That will give us an idea of some of the areas we might want to work on in this group. Would somebody like to start?

APPENDIX F

QUESTIONNAIRE

This questionnaire has four sections.

The first asks for some general information.

The next three sections ask you to evaluate your knowledge, skill and confidence levels as related to the use of groups in residential treatment.

Your responses to this questionnaire will be treated confidentially. They will be used to assist in evaluating this staff development program when it is finished.

Thank you for your assistance.

Chris Cassels

Date _____

Name _____

1. Year of Birth _____   2. Sex: 1 Male ____   0 Female ____

3. Education   0 _____   None

                 1 _____   Grades 1-3

                 2 _____   Grades 4-6

                 3 _____   Grades 7-9

                 4 _____   Grades 10-12

                 5 _____   Community College

                 6 _____   Child Care Certificate

                 7 _____   1-3 years university

                 8 _____   3+ years university

4. Months worked as a child care worker. _____ Months

5. Months worked in this agency. _____ Months

6. Previous training with groups.

    1 _____   On-the-job training/experience

    2 _____   Personal growth group experience

    3 _____   Youth leadership training

    4 _____   Life skills training

    5 _____   Community College Course

    6 _____   In-service training

    7 _____   Continuing education course

    8 _____   University course

    9 _____   Other (please list) _____

    _____

7.   List by JOB TITLE the previous work or volunteer
      experience you have had in working with people.

      1. _____

      2. _____

      3. _____

      4. _____

      5. _____

Using the following scle, place the nuber which best
indicates you knowledge level of the following areas
related to the use of groups in residential treatment.

```
0     1     2     3     4     5     6     7
```

Incomplete   Complete
Knowledge   Knowledge

1. How the number of people in a group affects
    itsfunctioning.   _____

2. How the kinds of people in a group affect
    group interaction.   _____

3. How individual needs and the different task
    and maintenance (supportive) roles indi-
    viduals play influence the group.   _____

4. How the range of talents, personalities and
    points of veiw affect a group.   _____

5. The effect of the group's unspoken roles or
    values on how it works.   _____

6. How who does or doesn't talk in a groupand
    for how long; who they do or don't talk with
    affects the group.   _____

7. How the positive or negative atmosphere
    created in a group affects how it operates.   _____

8. How offering reactions (feedback) to what
    others say or do affects the group.   _____

9. How the position each individual feels they
    have in the group and the position group
    members feel each individual has affects the
    group.   _____

10. How the group members understanding and
    agreementon what the group has come together
    to do affects how it works.   _____

    The tasks and issues for the group and each
    member involved in each stage of group
    development:

11. Tuning-in   _____

12. Beginning   _____

13. Work   _____

14. Termination   _____

15. Know when it is helpful to use a group in
     residential care.   _____

16. Know the potential and limits of the child
     care workers role with groups.   _____

     Know how the following events effect group
     dynamics in residential treatment:

17. The arrival of a new group member.   _____

18. The departure of group members.   _____

19. Who has control and authority in the group.   _____

20. Group members consistently picking on one
     group member.   _____

21. The leadership style and pattern in the
     group.   _____

22. The effect that phases of group development
     and group dynamics have on therapeutic
     programming.   _____

Using the following scale, place the number which best
indicates your level of skill in recognizing, planning and
intervening in the following areas related to the use of
groups in residential treatment.

| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | |

Incomplete Skill   Complete Skill

1. The number of people in a group.   _____

2. The kinds of people in a group.   _____

3. The individual's needs and the different task
    and maintenance (support) roles individuals
    play in groups.   _____

4. The range of talents, personalities and
    points of view.   _____

5. The unspoken rules and values of the group.   _____

6. Who does and doesn't talk and for how long;
    who they do or don't talk with.   _____

7. The positive and negative atmosphere created
    in a group.   _____

8. The offering of reactions (feedback) to what
    others say or do.   _____

9. The place each individual feels they have in
    the group and the place group members feel
    each individual has.   _____

10. The group members understanding and agreement
    on what the group has come together to do.   _____

    The tasks and issues for the group and each
    member involved in each stage of group
    development:

11. Tuning-in   _____

12. Beginning   _____

13. Work   _____

14. Termination   _____

15. The creation of a group in residential care.   _____

16. The utilization of the natural living group.   _____

17. The arrival of new group members.   _____

18. The departure of a group member.   _____

19. Dealing with control and authority in the
     group.   _____

20. Group members consistently picking on one
     group member.   _____

21. The leadership style and pattern of the
     group.   _____

22. The interplay between phases of group devel-
     opment and group dynamics and therapeutic
     programming.   _____

Using the following scale rate how the factors listed below influence your confidence level in working with groups in residential treatment.

          0   1   2   3   4   5   6   7

          No Influence   Much Influence

1.   Never having run a group(s) on my own.   _____

2.   Never having run a group(s) with other staff.   _____

3.   Having had few positive group experiences.   _____

4.   Having positive group experiences but being
     uncertain as to how to translate those
     experiences to using groups in residential
     treatment.   _____

5.   My belief that kids in residential care do
     not have the skills to participate in groups.   _____

6.   Lack of support from the other staff I work
     with for developing or using groups.   _____

7.   Not seeing group skills demonstrated by other
     child care staff I work with.   _____

8.   Not seeing group skills demonstrated by
     social workers I work with.   _____

9.   My belief that groups have little therapeutic
     value for kids in residential treatment.   _____

10. No knowing how to teach kids the skills to be
     in groups.   _____

11. Feeling I do not have enough knowledge or
     skill about groups.   _____

12. Feeling overwhelmed by the amount of energy
     and skill it takes to make a group work.   _____

13. Lack of feedback from other staff on the
     knowledge and skills I do have about groups.   _____

14. Other factors which influence my confidence
     are:

_____

_____

_____

_____

_____

_____

_____

APPENDIX G

GENERAL EVALUATION

SECTION IV

1. What have been the three most useful concepts you
    have learned about working with groups in residential
    care in the past 10 weeks? (List in order of
    importance to you.)

    _____

    _____

    _____

2. What have been the three most important concepts you
    already knew about groups which were relearned for
    you during the past 10 weeks?

    _____

    _____

    _____

3. How has this staff development program been helpful
    to you in your everyday work with groups in
    residential care?

    _____

    _____

    _____

4. a) What did you like most about the format of this
        staff development program?

        _____

        _____

        _____

b) What did you like least about the format of this staff development program?

_____

_____

_____

5. As a facilitator working with groups

   a) What are the facilitator's strong points:

   _____

   _____

   _____

   _____

   b) What are the facilitator's weak points:

   _____

   _____

   _____

   _____

6. Additional Comments:

APPENDIX H

FINAL LETTERS

TO

MARYMOUND, KNOWLES

Winnipeg, Manitoba
April 14, 1980

Ms. Kerry Strom and Sister Sharon
Marymound School
442 Scotia Street
Winnipeg, Manitoba

Dear Kerry and Sister Sharon

Enclosed is a list of child care staff who attended 80% of
the recent staff development program in working with
groups in residential treatment. These individuals are
eligible for the thirty credit hours at Red River
Community College in the Residential Child Care
Certificate Program.

I would like to express my appreciation for being able to
complete part of my social work practicum at Marymound.
Working with the child care staff provided me with a
valuable and exciting learning experience. I enjoyed
working with the child care staff. They were involved in
this program; open to new learning and demonstrated skill
in participating in a group.

I would like to thank both of you for your assistance in
making this experience possible. I would also like to
express my appreciation to other staff in the agency for
the cooperation extended to me.

Sincerely,

Chris Cassels

Enclosure

#12 - 86 Young Street
Winnipeg, Manitoba
R3C 1Y6

April 14, 1980

Don McClintock
Executive Director
Knowles Center
2065 Henderson Hwy.
Winnipeg, Manitoba

Dear Don,

Enclosed you will find the comments of child care
staff on the format of the staff development program on
working with groups in residential care which I completed
recently at Knowles. The comments are from an evaluation
the staff completed in this program. The staff who
participated in the program are aware that I am sharing
these comments with you. Also included are some comments
made during a verbal discussion of the program.

I would like to express my appreciation for being
able to complete part of my social work practicum at
Knowles. Working with the child care staff provided me
with a valuable learning experience. I would like to
thank you for helping to make this experience possible. I
would also like to express my appreciation to other staff
in the agency for the cooperation extended to me.

Yours sincerely,

Chris Cassels

Enclosure

Comments re: format used in the staff development program on working with groups in residential care.

The format for this group was based on the mediating model of working with groups. The staff group was involved in setting their own learning agenda and acting as a resource to each other by utilizing their present and past group experience. My role was to facilitate this process and to provide learning resources as needed.

Verbally child care staff indicated they liked having this program involve staff from each of the cottages as opposed to having the program within a team. This gave the child care staff an opportunity to know each other, to share ideas and to gain an understanding of the different cottage programs.

POSITIVE ASPECTS (from written evaluations)

- relaxed

- opportunity to discuss different issues without rigid deadlines to meet

- helpful to use an ongoing group as a learning medium to learn about groups. The method of allowing discussion to flow from point to point was excellent.

- informal, open, jokes

- I enjoyed the feeling of comfor I felt in the group; with the expectation being left mainly up to myself I found it easy to contribute.

NEGATIVE ASPECTS (from written evaluations)

- did not have an outline of what the 10 weeks was about (this was received later)

- sometimes too relaxed

- unsure as to direction; 10 weeks too long

- because of the easy pace it seemed like we wasted a lot
  of time on irrelevant matters before we could hook onto
  some topic that could stimulate the entire group

- no dislike for this framework

                        Chris Cassels
                        Instructor