From lessons to sessions: How does second language teaching experience translate to psychoeducational group facilitation?

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Abstract: Reflection on the planning and facilitation of a social work psychoeducational group led to an examination of the transferability of teaching experience. Social interaction in second language studies allows for the learning of skills and knowledge through the mediation of teachers and fellow students. Likewise, psychoeducational groups, in having educational and instructional elements, encourage members to employ learning skills in jointly constructing ideas and strategies related to strengths, emotional resilience and thinking habits. Groupworkers seek to identify and activate the strengths present in members just as teachers do with the knowledge present in students. The communicative approach to language teaching encourages student comfort with working with peers in group tasks so that the teacher becomes facilitator and this translates to psychoeducational groups in terms of mutual aid, anxiety reduction, inclusion and altruism. Group members embrace this and groupworkers benefit from challenging themselves in planning such group sessions.

Keywords: social work; teaching; psychoeducational; mental health; strengths; resilience; groupwork; group work

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A group is ‘a collection of people who spend some time together, who see themselves as members of a group and who are identified as members by outsiders’ (Preston-Shoot, 2007, p. 46). Teater (2014) notes that it is the common trait of experience that ties individuals in a group together. Groupwork, then, can be defined as
a method of social work that aims, in an informed way, through purposeful group experiences, to help individuals and groups to meet individual and group need, and to influence and change personal, group, organisational and community problems. (Lindsay and Orton, 2008, cited in Teater, 2014, p. 241).

The question to be examined in this paper is aptly introduced by Doel’s (2010) assertion that evidence is lacking as to the extent to which a practitioner’s skill as a groupworker is of most significance or whether anybody can follow a highly prescribed programme and facilitate a successful group. Getzel (2009) suggests, through a parable, that the only way for an aspiring groupworker to become an authentic groupworker is through practice. In reflecting upon my planning and facilitation of a group while on first year MSW placement, I wish to examine whether my previous teaching experience is transferable to the facilitation of a group in a social work setting.

In attempting to answer this question I draw upon groupwork theory, methods and approaches as well as those relating to teaching English as a second language, an occupation I have had for over ten years. In this essay I refer to teacher, students/learners and lessons in relation to my teaching and to facilitator, service users/members/participants and sessions in relation to my groupwork on placement. Parallels are drawn between each set of ideas and categories. Language learning theory, social work theory and groupwork theory are utilised in analysing the reasons for selecting the topics covered and for planning the procedure and in assessing whether links do actually exist between these different disciplines. I reflect on my facilitation of a single social work group session which involved an inpatient mental health group at the hospital attached to my community mental health team.

These group sessions last one hour and take place biweekly in the activity room of the acute ward. The members are inpatients in the hospital for varying lengths of time and, in line with Glassman’s (2009) observation, have a wide range of mental health diagnoses, including depression, bipolar disorder and, most commonly, schizophrenia. As such, members have varying degrees of cognitive abilities and are on various types and doses of medication. They come from a wide variety
of socioeconomic and educational backgrounds and are aged from late teens to mid-sixties. Members are free to come and go as they please during the group session, with some arriving later into the session and some leaving during the session. Doel (2013, as cited in Teater, 2014, p. 243) details dimensions by which groups can be profiled and I noted the following about this particular group: it is an existing group; it is open to any inpatients interested but closed to outpatients; difference is allowed for in terms of age, sex and so on; it is practitioner-led with elements of self-help; it is open-ended; it is one hour in length due to attention span issues; size depends on the day but is generally about ten members; attendance is voluntary but encouraged; and the structure is quite tight, but flexible. In the session in question, the group was made up of eleven service users, three nursing staff and my practice teacher, who was directly observing me during the session. A fellow MSW student was also present to assist in some facilitation duties.

Recent trends in Britain suggest groupwork has gone out of fashion and has experienced a rapid decline in social work practice, education and academia (Sheldon and Macdonald, 2009; Cohen and Mullender, 2003, as cited in Mullender et al, 2013). Indeed, in terms of curricula and practice, Drumm (2006, p. 29) observes ‘an alarming trend in the devolution of group work as an effective and viable modality in the field of social work’. However, others are more hopeful with suggestions that published student papers in Ireland and the United States provide evidence that groupwork remains a feature of social work education and practice in those countries (Doel, 2006, as cited in Mullender et al, 2013). My placement experience allows me to relate to the latter perspective since, as well as engaging in the aforementioned hospital group, I co-facilitated or participated in community groups for service users and for family members of people experiencing mental health difficulties, behavioural family therapy sessions and a psychologist-led multidisciplinary team reflective group.

Kurland and Salmon (2006) assert that in social work, a practitioner’s or student’s world view, beliefs and values based upon their experiences strongly influence their practice and comfort with groups and so too the likelihood of their being able to work effectively with groups and whether they have a preference for working with groups. The need has been highlighted for student social workers to be open about their feelings towards groups, to question their own comfort in groups and
to be conscious of any issues of concern for them (Doel et al., 2011). My experience on placement, in voluntary facilitation with support groups for people dealing with depression and in teaching has given me a strong belief in the value of groupwork.

Vygotsky (1989, as cited in Chappell, 2014, p. 6) theorises that ‘we become ourselves through others’. When applied to second language studies, this theory suggests that social interaction is essential for human learning and that individuals systematically learn skills and knowledge through this interaction and through the mediation of expert others, be they teachers or fellow students (Chappell, 2014). From my teaching experience, in comparing one-to-one and group classes, I have come to the belief that this social interaction aids learning most effectively in group situations since other students can be viewed as experts in their own learning experiences and this allows for mutual aid, which Kurland and Salmon (2006, p.79) see as being ‘at the heart of group work practice’. This belief also corresponds to the social constructivist ideas, as referred to by Teater (2014), that human beings construct knowledge and interpretations through shared understandings, language and practices and that individuals are the expert concerning their own experiences. It is argued that a practitioner needs to recognise that groupwork is an appropriate medium for empowering people who are experiencing mental ill-health, to feel confident practising groupwork in the mental health field and to feel excited about the opportunities this field offers (Sturgeon and Keet, 2005). My own belief in the benefits of groupwork translated to my facilitation of the psychoeducational group session at the centre of this essay.

The Association for Specialists in Group Work (1990) defines psychoeducational groups as ‘those used to educate people who are facing a potential threat to understand developmental life events or to learn to cope with immediate life crises’. The structure of such groups is aimed at understanding themes, developing specific skills or dealing with life transitions (Corey, 1990, as cited in Brown, 2005). In a review of 127 psychoeducational groups, Brown (2005) notes that all had a body of information to be presented, with self-care being the primary focus. Thus, all had an educational or instructional component where group members were encouraged to employ cognitive learning skills in engaging with the information and to apply affective learning
skills through expressing feelings and becoming more personally aware (Brown, 2005). Cognitive learning was evident in the group I facilitated in members utilising problem-solving skills, thinking skills and skills relating to perception of the materials used. Affective learning was evident in members being motivated and willing to participate, in valuing what was being learned and in expressing an eagerness to incorporate the learning into their lives. With this in mind, it is important to analyse how I prepared for my facilitation, what I planned for the session and why, what procedure I used and why, what skills I utilised in facilitating the group and how all of this relates to theoretical frameworks in second language teaching, social work and groupwork.

In second language teaching every lesson is built on the assumption of earlier lessons in which topics have been explored, concepts agreed upon and defined; but beyond this there is a great deal of unspoken cross-reference of which everyone is largely unaware. (Halliday and Hasan, 1985, as cited in Chappell, 2014, p. 18).

Therefore, the class, like other groups, exists in a cycle. Doel and Sawdon (1999) note that Tuckman’s (1965) model of group developmental sequences in which each group has a forming, a norming, a storming, a performing and an adjourning stage, is not necessarily applicable to all groups. This is the case as I found it with my particular group. Indeed, it is this very sequential or cyclical nature of classes that makes it so difficult for a teacher to join a class in the middle of its lifespan. However, the problem can be eased if explicit account is taken of the relations between what is said in that lesson and what has been said before in the preceding lessons (Chappell, 2014). Therefore, to prepare for my facilitation, I observed two preceding group sessions.

In the first session, which focused on ‘stress’, I familiarised myself with the physical environment and I took heed of how the service users interacted with the nursing staff, the social workers and each other. In relation to groupwork, anxieties and apprehensions arise for student social workers around non-attendance, hostility, silence or other difficult behaviours (Doel et al, 2011). I noted in my first observation how some service users could be hostile, as one was with
me, and this was something that should be anticipated and managed without allowing it to derail the group session. In the second session, which focused on ‘stigma’, I again observed but this time I participated in the facilitation by reading out some information about ways of challenging stigma. Feeling a little more comfortable in the setting, I contributed to the group, offering some thoughts and feedback at times. This allowed group members to become more familiar with me also. Sturgeon and Keet (2005) point out that in mental health groups, members’ mental health conditions and the side-effects of medications may result in them having an unusual appearance or displaying strange behaviour and this was something to which my group observations allowed me to become accustomed. Indeed, this experience along with that of my teaching gave me reason to relate to the assertion that the unpredictability of, or never quite knowing what will happen in, a group session, is ‘exciting and stimulating rather than threatening’ for groupworkers (Kurland and Salmon, 2006, p.80). Having allayed possible anxieties I may have had about facilitating this particular group, I wanted to plan a session that was exciting and stimulating for the members too.

In selecting what to cover in the session, I was mindful to focus on a topic that would incorporate the social work theories and methods I had been studying and that would also be beneficial to the participants on a practical, usable level. I was also mindful that the session topic be congruent with the mental health ‘recovery’ approach as outlined by the Irish government policy document, A Vision for Change:

While recovery does not necessarily imply a cure, it does suggest that the individual can live a productive and meaningful life despite vulnerabilities that may persist, equipped with the necessary self-understanding and resources to minimise relapse.’ [It is possible for all service users] ‘to achieve control over their lives, to recover their self-esteem, and move towards building a life where they experience a sense of belonging and participation. (Irish Department of Health, 2006, pp. 13, 105).

An emphasis on deficits, illness, pathology and labels fails to recognise other human qualities such as courage, coping, resourcefulness and recovery, thus ‘belief in the strengths of people is at the heart of group work practice’ (Gitterman, 2001; Kurland
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and Salmon, 2006, p. 78). These ideas were to the fore in selecting topics for the session. I held firm the belief that even if weakened by circumstances, strengths and resilience are present in all people and groupworkers have a duty to identify, activate and consolidate these strengths and resilience (Germain and Gitterman, 1996, as cited in Gitterman, 2001). In the classroom, an activity that initiates cognitive activity and is meaningful for learners is socially mediated and that mediation can come from interaction with other learners and physical tools such as handouts (Chappell, 2014). Hence, by adapting and drawing from online materials I created three handouts.

The first, in three-part diagram form and based on Saleebey’s (2006) strengths perspective, linked strengths that help the reaching of goals, strengths that everybody can be seen as having. The second, in list form, drew from Belmont’s (2016) psychoeducational handouts and gave short sentences that offer tips for emotional resilience. The third, also adapted from Belmont’s (2016) materials, contained examples of problematic thinking habits that can be inflexible and a barrier to change along with healthier alternative examples of ways of thinking and expressing feelings. I felt that these topics were congruent with my desire to focus on practical, usable subject matter. Empowerment and education are fundamental components of all group planning and facilitating as is a consideration of the constraints of group members’ sometimes limited abilities (Meagher, 2002, as cited in Sturgeon and Keet, 2005, p. 157). The use of handouts would thus serve to both assist in education and aid understanding of the subject matter for those members with cognitive difficulties.

The group consists of members experiencing a variety of mental health problems, from those with chronic issues to those hospitalised due to a single acute psychotic event. However, all members share the common experience of loss – loss in direction, in confidence or in life roles, leading to stress, relationship breakdown and isolation (Sturgeon and Keet, 2005). Therefore, to have endured so much and survived implies the existence of resilience and to use a variation on Woodcock’s (2001) contention, I wished to remain cognisant of the fact that members moved on a continuum between being a survivor and being a ‘patient’. In line with Bowman’s observation (1995, as cited in Toseland and Rivas, 2001, p. 49) that past groupworkers preferred the term ‘members’ over ‘clients’, so too do I prefer ‘members’ over ‘patients’,
the latter still being the predominant term used in the hospital and in disciplines on the multidisciplinary team other than social workers. With that said, in my language use both in the group and about the group, I was conscious of the fact that I was working with people who have suffered loss, oppression and discrimination and I was vigilant that my language was not simply becoming flowery and lacking in substance (Gitterman, 2001). With the topics and materials planning described, it is important to analyse the procedures used in the group session and why these were used.

Chappell (2014) states that the role of the teacher is to manage the sequencing and pacing of the lesson and to set the conditions for who may contribute and when through interventions that focus the group by initiating inquiry and narrowing, clarifying and extending the focus. Commonalities can be seen across all second language lessons, with an opening, a middle and a closing stage (Chappell, 2014). In the opening stage, teacher talk is foregrounded, attention is captured and the theme and topic are introduced. In the middle stage, regulative language is replaced by instructional language, with goals being set and sustained periods of talk and meaningful activity taking place. This stage is longer, with a range of teacher and learner interaction patterns, sometimes whole class, sometimes smaller subgroups where learners collaborate with peers. Tasks and activities occur serially with each sub-stage connected to the preceding one. In the closing stage, which is usually brief, the lesson’s main aims are recounted. I feel these stages and sub-stages translated to the group session I facilitated, a brief description of which follows.

By way of introduction, I wrote the word ‘strengths’ on the whiteboard. I broke the participants into groups of three, based on where they were sitting, with some subgroups being made up of service users only, some with a nursing staff member and one with my practice teacher. I asked the members to say one/some strength(s) they saw themselves as having and how they came to have these strengths. I wrote these two questions on the whiteboard. For feedback I asked the members to report back to the full group on what their partners had said and my MSW colleague wrote the strengths reported on the whiteboard. I asked the members if they saw some common themes or similarities in the strengths reported back. I handed around the first handout on ‘Strengths’. I read out the sub-heading which stated
that ‘Everybody has these strengths that can be built on to help them reach their goals’ and asked the members if they agreed that strengths can be universal to everybody. I then asked the members to look at the strengths listed and check with their partners what they understood by these terms. I asked for feedback on the meanings and asked members to explain the terms that other members had said they did not understand. Links were then made between the strengths on the handout and those previously written on the whiteboard.

I next asked the group to explain what ‘resilience’ means and having got some feedback, I added a definition for extra clarity. My fellow MSW student handed around the ‘Tips for emotional resilience’ sheet and went through the main parts of the ten sentences, including tips around control, learning experiences, perceptions, hostility, defensiveness and forgiveness, compassion, self-care, isolation, humour and mindfulness. We answered queries that arose. I then asked the members if these were ideas they were open to and all were positive about the ideas and open to using them.

In the final section of the session I handed out the sheet on ‘Problematic thinking habits’. I linked the thinking habits to the strengths we had mentioned and read out some of the sentences, putting the stress on the inflexible, problematic words such as ‘can’t’, ‘should/shouldn’t’, ‘hopeless’, ‘always’, ‘fault’, ‘hate’ and something/somebody ‘making’ you feel a certain way. I then asked the members if they could relate to these types of thoughts and they unanimously said they could. I asked them to work in their groups of three again and think of one or two problematic thinking habits they have had and to try and replace them with healthier thinking habits before asking for feedback. The participants all agreed that this was a strategy they could implement in their lives. To close the session I summarised what we had done, I checked if there were any questions and thanked everyone for coming.

‘The surrounding environment of the communicative event shapes what is said, just as what is said helps shape the surrounding environment’ (Chappell, 2014, p. 32). This corresponds to the assertion by Hall et al (2006) that social work practice would benefit from a reflection on how language is used since this practice is mediated by language and interaction. In using regulative language such as ‘Ok, then’ to signal stage movements and instructional, inclusive language
such as ‘let’s think about’, I felt I was creating a safe, understanding environment that members with cognitive difficulties could comprehend. These instructional methods are designed for educating, however, such classroom methods can be used in the same way for psychoeducational groups (Brown, 2005). This ‘let’s’ language also allowed for a mutuality to be created in a way that Falck (1988, as cited in Rubin, 2001) describes as meaning what is done ‘for’ the service user is done ‘with’ the service user to the greatest possible extent.

A focus on service users’ strengths, competencies and skills rather than their weaknesses, and on their resources rather than their deficits, is a fundamental principle in solution-focused approaches in social work, but it can also help create positive collaboration, especially when contact time is brief and a working rapport needs to be established quickly (Sharry, 2001). Moreover, to have survived disabling events one must have resilience, but for resilience to emerge, conditions in a group need to enable hidden strengths to emerge and be recognised (Woodcock, 2001). Eliciting meanings is a skill I developed in teaching and in eliciting the meaning and examples of strengths from the members, I hoped to follow this sequence of establishing strengths and leading into resilience.

The communicative approach to language teaching requires students ‘to become comfortable with listening to their peers in groupwork or pair work tasks, rather than relying on the teacher for a model’ and so students take on a greater degree of responsibility for their own learning while the teacher assumes the role of facilitator and monitor (Richards, 2006, p. 5). Also in a teaching context, a learner’s cognitive capacity is broadened when jointly constructed language emerges in small groups while this language can then be used for oneself (Chappell, 2014). By setting up smaller subgroups containing three members, I hoped to achieve some of these benefits as well as advancing mutual aid, reducing anxiety, creating a realisation of not being alone and encouraging a sense of altruism (Drumm, 2006; Kurland and Salmon, 2006). This structuring also allowed me to avoid the tendency, as recognised by Rubin (2001), for groupworkers to do individual work in the group. Furthermore, it can be difficult in the classroom for the teacher to listen-in to all subgroups at the same time, though the important thing to gauge is whether the intention of the activity to engage and involve all students is being achieved (Chappell,
This is something I tried to gauge as I monitored the subgroups, while recognising that some members would be quieter than others. Additionally, Healy (2012) notes the importance of establishing trust with group members and I feel that by mentally noting, remembering and using members’ names, a regular feature of my teaching, I was able to create a trustful, welcoming and safe environment.

Emphasis has been placed on the importance of groupworkers’ recognising and acknowledging ‘their own particular nightmare-in-the-group’ (Doel and Kelly, 2014, p. 37). In anticipating the group, I envisaged difficulties around non-engagement, silence, conflict and domination. Conflict can be seen in group members expressing frustration with or hostility towards one another, ridiculing or disagreeing with each other’s suggestions or disputing the effectiveness of the group (Preston-Shoot, 2007). A reason Preston-Shoot (2007) puts forward for this is that members may feel unable to meet the demands made of them in the group, and I feel my planning of a clear, respectful and inclusive session helped in this regard. In terms of a member dominating or monopolising, the facilitator needs to be cognisant of the fact that the person often has something important to express and contribute (Brown, 1992). Whitaker (1985), however, notes that the other members are unlikely to be content with any one person holding a central position like this. This type of domination did not arise, though it is something I have had to manage in my teaching. Alternatively, members who are quiet in a group ‘might be reflective, sleepy, distracted, out of their depth, aggrieved, on medication, worried about something outside the group’ amongst other reasons (Doel and Kelly, 2014, p.151). By recognising the varying cognitive capacities of members, I was prepared to deal with members who were silent and to respect their silence. Breaking into subgroups of three rather than pairs also meant that a silent member would not have a detrimental effect on their partners’ participation, while in the end silent members in all subgroups were encouraged by their peers or staff members.

To conclude, it is pertinent to assess my facilitation of the group and whether my teaching experience does indeed transfer relevantly to my groupwork practice. Doel (2009) asserts that group members need to have confidence in the standards of the groupworker’s practice. Likewise, in second language teaching, Chappell (2014) suggests that a teacher’s attitudes and beliefs about planning will be apparent in her
or his classroom approach and the teacher's beliefs about the nature of language learning can be inferred by students by her or his classroom practice. I feel that the group members recognised that a clear plan had been laid out for the session and that I, as a facilitator, recognised that the knowledge which was the subject of the session and which was being constructed through interaction was 'knowledge that lives within the group' (Tiberghien and Malkoun, 2009, as cited in Chappell, 2014, p. 35). In Brown's (2005, p. 521) review of psychoeducational groups, it was observed that 'scant evidence was provided about the level and training or education for group leaders, particularly their expertise in leading psychoeducational groups'. However, it has been argued that as a groupwork principle, the group is owned by its members, and so the facilitator does not necessarily have to be a mental health professional (Sturgeon and Keet, 2005). I feel that in acknowledging my student status to the group, I was adhering to this principle. At the same time, I believe that, as Wilson et al. (2011) suggest, mental health social workers will also need a confident understanding of the psychiatric and clinical perspectives, like other members of the multidisciplinary team, but that this understanding can only be built up through further experience and training.

Finally, as Drumm (2006, p. 28) notes, 'groupwork is grounded in a substantial theoretical framework', and while I am only at the early stages of understanding this theory, I do have considerable experience in teaching groups and I feel that this does indeed assist me in effectively facilitating other types of groups. I feel that through combining my existing experience with further groupwork theoretical study I will develop a sense of ability, readiness, comfort and excitement about practising groupwork (Sturgeon and Keet, 2005).

By way of reflection, I feel that my teaching experience, which adheres to a communicative approach and is often more aligned to 'facilitating' learning than 'teaching' information, lent itself well to this groupwork situation. The principles necessary for a group to be considered a social work group are outlined by Drumm (2006, pp. 20-21). These include: 'inclusion and respect for all', which I feel was achieved through explicitly recognising each member's input; 'mutual aid', which I feel was accomplished through members working in small groups to explain terms unknown to their partners; 'breaking taboos', which I feel we did by openly discussing the experiences of
mental ill-health without the associated stigma; ‘value of activity’, which I feel was achieved by planning the group to meet the learning styles of the members and taking account of cognitive abilities due to various conditions and/or medications; and ‘problem-solving’, which I feel was done by allowing the group members to explore and develop solutions to problematic thinking habits without my simply giving healthier alternatives. Indeed, one particular service user stated that she generally uses language like ‘it’s hopeless’ but that she could recognise the advantages of adding ‘it’ll get better’. In this way she acknowledged a difficult present while holding out hope for the future. A nurse present noted how powerful she found this statement to be and commended the service user for her input because she does not generally so openly express her thoughts or such an outlook.

‘Groups often become problem saturated […] because the group is focused on a shared challenge or perceived deficit’, resulting in participants’ lack of confidence in their own or the group’s capacity to contribute to change’ (McMaster, 2009, as cited in Healy, 2012, p. 153). It is therefore a role of the groupworker to identify common strengths. By focusing on strengths as the topic for this session I feel I fulfilled this groupworker role. In utilising my experience of the communicative language teaching methodology I encouraged the members to take responsibility for their own learning and this enabled me to emphasise individual and group strengths through drawing attention to the knowledge base within the group.

One participant, a younger service user with educational, cognitive and attention difficulties, did express frustration at a feeling of being unable to understand what was being asked of her and some terms used on the handouts. I handled this by firstly restating the question and then working with her group of three to assist with their initial discussion. This helped to put her anxieties at ease and she explicitly stated this to me. I circulated around the other groups and monitored to make sure that nobody was having difficulty understanding the task. I feel that writing the questions to discuss in subgroups on the whiteboard helped members to stay focused on what to discuss, as they could refer to the questions as they worked together and this is something I do in my teaching. This also helped when two members and subsequently another member arrived late since having the topic
and questions on the whiteboard aided me in giving them instructions for the task.

I feel the approach I took recognised the flexibility of the groupwork method in allowing other social work theories and methods to be utilised (Teater, 2014). I believe this group situation inherently made use of the strengths perspective in the topic it covered; it incorporated social constructivism in recognising the members as experts in their own experiences; it embodied Carl Rogers’s notion of unconditional positive regard in terms of recognising and affirming the group members’ strengths rather than any deficits; it was person-centred in encouraging the members’ natural desire for personal growth and development; it was solution-focused in terms of altering problematic thinking habits and it integrated cognitive behavioural therapy in focusing on the impact of thoughts, feelings and behaviours in causing distress.

Finally, after the session concluded, a member expressed their feeling of being ‘underchallenged in here’ and that this session encouraged the group members to challenge themselves and their ways of thinking. This sums up what I take away from this experience, group members embrace being challenged and groupworkers benefit from challenging themselves in planning group sessions.

References


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