Active or passive
interventions in groups:
The group leader's dilemma

Tom Caplan[1]

Abstract: One of the dilemmas often faced by group workers is how involved (how active or passive) to be when facilitating a group in order to produce a positive treatment experience. The 'art' of doing group therapy, therefore, is understanding when to enter into, and when to withdraw from, the activity in the group work process. This paper will describe possibilities for effective group work by group workers which can promote a positive environment for group members either by being active or passive as required in the group setting.

Keywords: Groupwork, facilitation, process, interventions, groupworker.

1. Adjunct Professor: McGill University School of Social Work and Director and Supervisor, McGill Domestic Violence Clinic

***Address for correspondence:** 5845 Cote des Neiges, Suite 440, Montreal, QC, H3S 1Z4. Canada. tcaplan@sympatico.ca*

Introduction

One of the dilemmas often faced by groupworkers is how involved (how active or passive) to be when facilitating a group in order to produce a positive experience. Overall, quantitative research on therapy for groups appears to be lacking. Orlinsky et al. (1994) have shown that a great deal of the success with individuals (regardless of the model used) is due to components that are difficult to measure. Orlinsky and his colleagues discovered that positive outcome was due to two of these 'extra-therapeutic factors' (Orlinsky et al., 1994): (1) the positive perception the group member had with regard to the group leader and (2) the degree to which the group member participated in the process. Caplan & Thomas (2002, 1999, 1995) have described the importance of these factors in groupwork and the role of the groupworker in assuring that a positive environment is provided by being both active and passive as required (Butler & Wintram, 1991). The 'art' of group facilitation, therefore, is understanding when to enter into, and when to withdraw from, the activity in the group.

Structure

Caplan & Thomas (1995) suggest that group member familiarity with structure is an important safety factor. 'The Canadian GroupWork Model' (CGWM) developed at the McGill Domestic Violence Clinic informs the groupwork described in this paper, as well as the way in which the group is organized. In addition to male domestic violence perpetrators and the female survivors of this abuse, the author has used this model in working with a wide range of group types including adult substance abusers, adolescents with anger management problems, individuals and couples with relationship difficulties, mildly intellectually handicapped adults and psychiatric group members in remission (usually through the use of medication). The CGWM has been designed to help group members understand when 'they' must do the work and to minimize the potential for participants to abdicate responsibility for their problems through reliance on

leader intervention (any action, usually verbal, taken by the groupworker within the setting and context of the group). The consistency of structure (Tropp, 1976; Gladding, 1998; Napier, 1998), therefore, should promote member ownership of the group process (Doel & Sawdon, 1999; Butler & Wintram, 1991) and enhance the participants' sense of safety in the group setting, which can expedite their ability to participate. In addition to a thorough and in-depth assessment interview, the CGWM has the following specific structural phases which include (a) a 'sign-in'; (b) a working phase; (c) a didactic phase; and, (d) a 'sign-out' (Caplan & Thomas, 2002).

It is important for a group facilitator to take an active role in order to sustain momentum (Kelly et al., 2001; Rose, 1998; Shulman, 1992; Mullender & Ward, 1991) safety and focus while, at the same time, being uninvolved enough to retain active member participation. The intent of this paper, therefore, is to provide some general guidelines for groupwork novices and experts alike that could prove helpful with this potential facilitation dilemma. These suggestions are not exclusive to any particular group format (open, closed, short-term, long-term, etc.) or population; and, to further explore these ideas, examples will be given from groups that the author has led.

'Active' or 'passive,' (What are the 'rules')?

On a cautionary note, it is important to understand that the terms 'active' or 'passive,' with regard to the group leader's interventions, may be better understood as describing a continuum from 'highly involved' to 'almost absent'. For example, if a groupworker is less active, there can be more opportunity to plan future strategies and build cohesion; by contrast, insufficient activity can cause a group to lose its focus and become derailed. Even though it is hoped that the assessment interview should screen out those members for which groupwork may be inappropriate or difficult, the leader may find members who cannot cope with this form of social structure after they have begun to participate, and who then will have to be offered other possibilities for getting the help that they need.

As with all 'helper' interventions, there is no 'guarantee' that positive results will be achieved. For example, an attempt by the facilitator to engage a 'quiet' or less active group member may only cause this candidate to retreat further from the group process. This author has found that, through patient and encouraging persistence, most group members can become participants, albeit at differing levels of engagement. Finally, most groupworkers will recognize that some group members may need to return to a setting more than once in order to feel comfortable in doing the work that is needed to resolve their particular problem situations. The following, therefore, is offered as a basis for consideration for groupwork intervention and strategy and not as 'hard and fast' rules for groupwork facilitation.

The power of the group leader

The power of the leader in the group setting should not be confused with the concept of transparency or invisibility (Flores, 1997). One caveat, therefore, underlines the importance of group member/leader hierarchy in maintaining control (safety) while concomitantly remaining invisible and transparent. Because of the strong position that a group leader inherits by virtue of her or his function (Doel & Sawdon, 1999; Rose, 1998; Yalom, 1995; Shulman, 1992), it is important that this authority remain functional and positive in maintaining the group members' focus on survival rather than on victimization or distraction from their goals (Theuma, 2001). In achieving this end, it is helpful to remember that interventions do not have to occur immediately as issues evolve. Tracking each group member, and storing the information for future reference, can result in timely interventions that impact in an economical and positive way.

> **Example:** During the 'sign-in' in a substance abuse treatment group John, a group member, stated that his friends were extremely important to him though when he did spend time with them he would find himself 'forced' into having 'just one drink' which would lead to an 'all-nighter.' At this point subsequent

group members seemed to use their sign-in to place the blame of their substance use on others as John had done. By tracking individual member process the group leader realized that a fear of being marginalized or discounted by others (a theme which had come up in the past) was embedded in these group members' statements. When the sign-in was completed the group leader said: 'Many of you seem to be describing how scary it is to feel 'left out' when you're with your friends or loved ones. Do any of you have any thoughts as to how you could be more included with those you care about?'

In this way the leader has redirected the group members to take the responsibility for their behaviours while helping them to understand some of the emotional possibilities inherent in their statements. The following guidelines appear to be effective in the pursuit of this process-oriented, emotionally focussed, cognitive behavioural approach.

Group leader goals

There are three important goals that govern the CGWM.

The first is for the facilitator to help the group member to *connect* to the setting and to the group process. In this way the participant can begin to experience a sense of safety that can lead to greater participation and self-disclosure (Doel & Sawdon, 1999; Flores, 1997).

Once a sense of security has been developed, the next goal is for the group member to take responsibility for his or her problem and collaborate with the leader and other participants in the development of appropriate strategies, (Gitterman, 2001).

A third goal is to assess a group member's emotional states during the groupwork process (Greenberg & Johnson, 1987) and to help this member (1) understand what these emotions represent (Greenberg & Pavio, 1997); and, (2) understand the aetiology of their behaviour.

Helping the group member to join

Engaging all participants in the group process to some extent is extremely important. The facilitator must be aware of individual limitations in order to avoid what the participant might perceive as coercive and which could silence a group member. A 'quiet' or inactive member may be one who is new to the group or who, in general, may lack the confidence of others in the group; or, s/he may be one that could be described as 'oppositional,' defensive or 'dug-in.' In either case, the group leader must use supportive and encouraging strategies to help engage this individual. In summation, a group member's beliefs and behaviours cannot be challenged before s/he has gained some confidence in the group. Linking this person to other group members, or helping her/him to feel included in the group itself is the operative task for this type of participant (Malekoff, 1997; Yalom, 1995).

> **Example:** Aside from seeming to struggle with her first group 'sign-in' in a substance abuse treatment facility, Jane has been silent throughout most of the group. Linda has just discussed her anger at Youth Protection Services, who forced her to place her children with her sister until she is better able to care for them. The group leader recalls that Jane has also been placed under similar conditions and (turning to Jane) says: 'Jane, you have been pretty quiet until now and I was wondering if you can connect in some way to what Linda was saying?'

With this intervention, the group leader has placed control of the process entirely with Jane, giving her an opportunity to comment on any part of Linda's statement, or even to refute the leader's intervention.

It is important for a groupworker to understand member behaviour and process. A group member who initially presents with a highly intellectualized position and focuses on what others have done, is, at first glance, playing the role of 'victim.' This role can be frustrating for a group facilitator and can lead to futile efforts at helping to move the group member out of this position. (Note: It is important to remember that in all interventions

questions should be phrased as much as possible to include the entire group.)

> **Example**: A group member in substance abuse treatment who states during her sign-in that she had relapsed because she stopped attending AA meetings 'otherwise everything else seemed to be going O.K.' can also be saying that she has a fear of being betrayed by the group, a difficulty trusting in others, a concern that she will be ridiculed or be too problematic to be helped, and a need for a formula, because of her own frustration with not understanding why she continues to be unable to fend off relapse. If the group leader recalls that during the assessment interview the group member had been verbally and physically assaulted and demeaned by her parents, the group leader could empathically say: 'I am sure the group understands how difficult it has been for you to trust anyone by asking for their help.'

Process versus content

The CGWM encourages the group facilitator to focus on process (group and individual) rather than content (Shulman, 1992) in order to promote group leader objectivity. Labelling a group member who presents as oppositional or challenging a 'trouble-maker' can prevent empathic interventions. A compassionate statement, on the other hand, can help to maintain group member safety and will help provide a foundation for similar responses from the group as well as insightful self-disclosure (Thomas & Caplan, 1997).

> **Example**: A group member who challenges the group facilitator by saying: 'I really don't like the way you are running this group' may elicit the following thoughts in the group leader if the statement is taken at face value: 'Maybe he's right and I'm not doing good work,' or 'What a pompous jerk!' On the other hand, by examining the process behind what appeared to be a rather scathing and personal comment, the following interpretations can be made: 'Don't get too close,' 'Go easy on me,' or, I'm

frightened.' In this case, the following supportive interventions could be made: 'I know the group understands how difficult it has been for you to come to this treatment,' or 'Does anyone else here feel uneasy about trusting the group?'

Timing

Although, there has been much written about group stages (Schiller, 1995; Schwartz, 1971), it is unlikely that all group members will arrive at the same level, or 'stage,' simultaneously (Thomas & Caplan, 2002). It is essential, therefore, for the facilitator to evaluate each participant's progress before planning her/his intervention. In order to minimize disrupting the group's momentum, the best time for a facilitator to be overtly involved in the group is when the group is active. During this period it is important for the group leader to witness the evolution of group and individual process to avoid the potential of making premature statements provoked by the witnessing of inappropriate group activity such as scapegoating, defocusing, intellectualizing, etc.

> **Example**: A survivors' support group has been involved in a discussion about their anger at, and fear of, family members not trusting them. Sylvie, a group member who had previously disclosed feelings of disconnection from her family had not, as yet, entered the discussion. The group leader, having noticed this, waits for an appropriate break in the discussion, turns to her and says (with a 'linking' intervention: Thomas & Caplan, 1999): 'Sylvie, you and Henry seem somewhat alike in your view of family. What do you think?'

Group leader self-disclosure

Appropriate self-disclosure can be used by the leader to animate the group. On the one hand, leader self-disclosure is a powerful tool and can be a model for group members in building safety, for taking responsibility and promoting interaction. On the other hand, one of the pitfalls of using this strategy is the possibility of moving the group focus from group interaction to the facilitator

which could then diminish group momentum. In the same way that self-disclosure by a group member can animate the group through modeling appropriate behaviour and a sense of safety (Doel & Sawdon, 1999; Malekoff, 1997), leader self-disclosure can also be used to help to create a sense of responsibility and cohesion among group members, as well as highlighting particular issues that might be overlooked by the participants.

> **Example:** Fred (a participant in a survivors' group) describes his concern that he is constantly fearful of doing something wrong in his relationships (work, friends, and partner) – that he is the one to blame when something goes wrong. There is a silence in the group and the group leader, noticing some heads nodding in agreement, enters the discussion by saying: 'I know just how you feel. One day I came home and found my partner looking very down and the first thing I thought was 'what did I do?' This time, however, I asked him 'what was up?', and discovered that it wasn't me at all but that his boss was giving him a hard time. I am sure we have all had similar experiences.'

With this appropriate exposure of self to the group, the group facilitator has normalized the experience of self-doubt as well as demonstrated an appropriate problem-solving option.

Helping group members to take responsibility for their work

Set out below are four of the several strategies which have been found to help members to take responsibility for their presenting problems:

1. Making sure that the group remains focussed on its mandate

Maintaining the group focus on its mandate, goals, *raison d'être*, etc. is an important way of preventing potentially problematic behaviours such as scapegoating, 'bashing' and defocusing (Shulman, 1992). Allowing the group to stray from time to time can give the facilitator some useful information on group process and world-view. However, it can also help group members to avoid

important and potentially therapeutic issues while building a 'negative momentum' that may become difficult to stop.

> **Example:** Jerry, in a domestic violence treatment group, has described that even though he understands he should not have pushed his partner out of the way when he became angry, she has often pushed him aside physically when she becomes upset. Cleve, a somewhat defended group member, immediately jumps in and says: 'That's always the way it is. It's o.k. for women to hit us, but we so much as look at her the wrong way and we are the ones who are wrong – never them.' Simon immediately pipes in: 'Yeah, what about what **they** do. They are the ones who need to be here.' Before anyone else gets a chance to join them the group leader says: 'Even though we all know that two 'wrongs' don't make a 'right,' I understand that it can be tough to focus on our part in a wrong-doing. I wonder whether any of you can suggest some strategies to Jerry that might be more helpful than what he has done.'

Rather than lecturing to, or criticizing the two speakers for women bashing, the leader has brought the group back to its behavioural mandate with a focus on member insight and without perpetuating the attempted shift in focus.

2. *Giving the group members information about their behaviour*

Information-giving to promote insight and behaviour change has been described as an important part of psychotherapy (Ladouceur et al., 2002; Miller & Rollnick, 1991). Education can be considered a significant part of groupwork if one takes into consideration didactic components and information-giving, as well as group member insight gained, interpretations and conclusions.

> **Example:** Sarah, her third time in an inpatient substance abuse treatment centre, told the group (with some despair in her voice) that even though she had done better this time it seemed that everyone she knew was abusing drugs of one form or another. She stated: 'I was clean almost nine moths this time around but I just can't seem to escape my friends who

use. Everyone I know is on drugs – there's just nowhere for me to go.' At this point the group leader/leader stated to the group: 'All of you seem to recognize periods of abstinence and we know from doing research that the percentage of people who remain clean goes up with every treatment they take. Perhaps some of you could respond to Sarah with this in mind.

This information-giving intervention can help the group members to understand that there is a difference between what they perceive and what is factual (reality testing) while respectfully challenging their misconceptions.

3. Facilitating group discussion and dialogue

Facilitation of discussion and dialogue amongst group participants is generally considered to be an important facilitator role (Gladding, 1999). It also can be a metaphor for responsibility taking. That is to say, if a group member engages in, rather than withdraws from, a discussion, this can be a transportable skill (Yalom, 1995) that can be used in taking, rather than abdicating, responsibility in other areas of the group member's life. The CGWM advocates a 'spinning of the groupwork wheel' (Caplan & Thomas, 2004) encouraging peer counselling versus casework in this type of setting.

Example: Jennifer, a relatively new member of a single-mothers' group, had been quiet during the first half of the group session. The counsellor who was leading the group remembered from Jennifer's intake interview that she had many issues around loyalty, reliability and betrayal not only in her now defunct marriage, but also in her family of origin. Some of the other women had been lamenting about 'never seeing it coming' with regard to the end of their relationship with their respective husbands. At this point in time the female counsellor said: 'As a woman I certainly can relate to what you are talking about. Jennifer, I was wondering whether there has been anything in the group that you have connected with so far?'

In this example, the groupwork leader has encouraged Jennifer to take some responsibility for herself by asking her to join in with the rest of the group. The intervention was purposefully made in a non-specific way with the hopes that she might select something by herself that she may have gleaned from the group. Any comment Jennifer makes would be supported and validated with regard to her participation in the group. Supportive challenging (Malekoff, 1997; Mullender & Ward, 1991) can be done gradually, as Jennifer becomes more comfortable in her ability to participate.

4. Accessing the group member's emotional state

An important component of the CGWM is the assessing of a group member's emotional state with regard to what s/he is describing to the group. Safran & Greenberg (1991), Greenberg and Johnson (1988), and Madanes (1995) have shown that focusing on emotion is valuable with regard to behaviour change and communication skills. These authors have described how men often mask their more 'feminine' emotions of 'fear' and 'sadness,' and women, often fearful of expressing their anger, mask this feeling with tears or depression. A man in domestic violence treatment who is able to say to his partner 'It scares me when you …' instead of 'It makes me angry when you …' creates a dialogue that is potentially less blaming and threatening.

There are several strategies used by CGW facilitators to help groupwork participants to examine and process feeling states. These include

- **Teaching the group member what the possibilities are for feeling states in a given situation**
  Teaching the group member about emotional possibilities is important, helpful and often necessary for a number of member types (Greenberg and Johnson, 1987). These can include group members who never learned or understood what basic emotional states are because of the defenses used in their survival and potential concerns about vulnerability; those who understand that they have feelings but are confused about how to label them; and, members who are very concrete in their thinking (cognitive difficulties, educational deficits, etc.).

Example: Solomon, during a substance abuse treatment clinic sign-in, described an incident between himself and his partner wherein she told him that she was not sure that she could trust him not to drink at a wedding they had been invited to. He said: 'It really pisses me off that my wife still doesn't trust me even though I have been in treatment for over a month now.' The group leader replied: 'I am sure many can relate to how scary it is to think of how long it might take to earn back your wife's trust.'

By reframing the anger ('pissed off') with fear ('scary') in a matter-of-fact and non-judgemental way, the group leader is able to show empathy and teach an emotional possibility for that incident.

• **Asking the group to randomly suggest how they might be feeling with regard to the presenting scenario**
Eliciting group members' emotionally based suggestions through a single intervention has at least two positive attributes: this tactic will tend not to disrupt momentum as much as several statements aimed at individual group members (Thomas & Caplan, 1999); it will potentially engage the group in a dialogue and minimize the potential for doing casework (Kurland & Salmon, 1992); and, it will encourage self-discovery and peer mentoring (Malekoff; 1997; Gladding, 1999).

Example: Willa, attending a domestic violence survivors' group, tearfully described how desperately hard she had tried to meet her partner's wishes: 'I don't understand it, I did everything he asked. I knew I wouldn't be able to stay much longer – but I never thought he would actually hit me after all I had done for him.' One of the co-facilitators turned to the group and said: 'It must be very frustrating for Willa to have stayed so long … only to find that she had no choice but to leave. Would any of you care to share with the group how you would feel in Willa's situation?'

In this way the group is encouraged to dialogue around the emotional component of Willa's story.

- **Group leader disclosure of feelings around a particular event**
  How the group leader might feel in a particular situation presented by the group can be suggested if there are additional possibilities for feelings that have not been mentioned in any emotionally-focussed exercise or dialogue, or if the group leader feels that the feeling descriptions presented have been inadequate.

  Example: In a relatively 'young' closed gambling treatment group the members were dialoguing around the struggle that they were having with abstinence and their difficulty in regaining the support and trust from friends and family. The group facilitator had tried to direct the group towards a discussion of how this made them feel, but most of the members were insistent on blaming these others for feelings which were contributing to their relapse. At this point the counsellor said: 'I have two minds about how I would be feeling if I was in your situation. On the one hand I would feel extremely frustrated and sad at not getting the emotional support from others; on the other hand, I would be much more frightened – perhaps terrified – that I would never be able to beat this thing and be lonely and miserable for the rest of my life.' Any thoughts about what I have said?'

  This 'quasi self-disclosure' helps to bring some emotional options to the floor that may difficult for the group to examine. It is a way of challenging the group member's world-view while normalizing it as an acceptable emotional experience.

- **Using a structured group exercise**
  A structured group exercise can be a useful tool when the group appears to be becoming chaotic (Caplan & Thomas, 2004). It can help to bring structure (Shulman, 1992) back into

the group, interrupt inappropriate group member interactions or dialogue and be a model for a 'time-out' or limit-setting skill used to gain perspective on a difficult situation:

Example: In a domestic violence treatment group a male and a female co-therapy team encountered a sense that the group was gradually becoming less and less in control. George, one of the group members, had suggested that his partner was making it impossible for him to feel successful even though she knew how hard it was for him to go for help: 'I am doing what I am supposed to do,' he said, 'but she still gets angry with me.' With this Ted jumped in saying: 'Yeah, all women can do is criticize. When we begin to do well they find some other way of putting us down.' The group seemed to be dividing itself into two camps, one in support of the partner's position and one in support of Ted's perspective. At this point one of the group leaders said: 'OK guys, grab your feeling charts. Now, we are going to go around the room and I would like each one of you, by selecting from the feelings on the chart, tell us how and what you would be feeling, and why, if you were George.'

This 'reaching for feelings' intervention is a way of reapplying group norms and values, by redirecting the interaction and thereby 'gently' interrupting the potential for defocusing from the groupwork goals, or scapegoating the victims of the violence or the group members themselves.

Conclusion

The above guidelines are presented with the recognition that the leader's personal style and spontaneity make any rules formula an impossibility. One will recognise in the examples given above that one caveat for doing groupwork is to share any questions or concerns with the group rather than making the intervention to an individual (Caplan & Thomas, 2002). Another proviso is to understand that with every group leader intervention there will potentially be a decrease in group momentum (Thomas &

Caplan, 1999) and that the leader should attempt to intervene only after the group has developed sufficient interpersonal dialogue between group members that they will have the impetus to continue following the leader's comments. An examination of group process, rather than content (Caplan & Thomas, 1995), prior to formulating a group intervention, can help to maintain member focus with regard to group mandate and goals. Finally, an emotional focus is extremely important in behavioural work (Safran & Greenberg, 1991; Greenberg & Johnson, 1988) and groupworkers should attempt to examine group member feelings with the help of the participants as an aid to behavioural change.

References

Caplan T. and Thomas, H. (2004) If we're all in the same canoe, why are we using separate paddles? The effective use of universal themes in diverse group populations. *Social Work with Groups*. In Press

Caplan, T. and Thomas, H. (2004) If this is week three, we must be doing feelings: An essay on the importance of group member-paced groupwork. *Social Work with Groups* 26, 3, 5-15

Caplan, T. and Thomas, H. (2002) The Forgotten moment: Therapeutic resiliency and its promotion in social work with groups. *Social Work with Groups*, 24 , 2, 5-26.

Caplan, T. and Thomas, H. (1999) Don't worry, it's just a stage he's going through: A reappraisal of the stage theory of groupwork as applied to an open treatment group for men who abuse women. *Groupwork,* 10, 3, 231-250

Caplan, T. and Thomas, H. (1995) Safety and comfort, content and process: Facilitating open groupwork with men who batter. *Social Work with Groups,* 18, 2/3, 33-51

Doel, M. and Sawdon, S. (1999) *The Essential Groupworker: Teaching and learning creative groupwork.* London: Jessica Kingsley

Flores, P. (1997) *Group Psychotherapy With Addicted Populations: An Integration of Twelve-Step and Psychodynamic Theory.* Binghampton, NY: Haworth

Gitterman, A. (2001) Vulnerability, resilience, and social work with

groups. in T.B. Kelly, T. Berman-Rossi, and S. Palombo (Eds) *Groupwork: Strategies for Strengthening Resiliency.* Binghampton, NY: Haworth

Gladding, S. T. (1999) *Groupwork: A counseling specialty.* (3rd ed) Upper Saddle River, NJ: Prentice Hall

Glasgow, G. F. and Gouse-Sheese, J. (1995) Themes of rejection and abandonment in groupwork with Caribbean adolescents. *Social Work with Groups*, 17, 4, 3-27

Greenberg, L. and Johnson, S. (1988) *Emotionally Focused Couples Therapy.* New York: Guilford Press

Greenberg, L. and Johnson, S. (1987) *Emotionally Focused Therapy for Couples.* New York: Guilford

Greenberg, L.S. and Pavio, S.C. (1997) *Working with Emotions in Psychotherapy.* New York: Guilford

Kelly, T. B., Berman-Rossi, T. and Palombo, S. (Eds.) (2001) *Strengthening Resiliency through Groupwork.* New York: Haworth Press

Kurland, R. and Salmon, R. (1992) Groupwork vs. casework in a group: Principles and implications for teaching and practice. *Social Work with Groups,* 15, 4, 3-14

Ladouceur, R., Sylvain, C., Boutin, C. and Doucet, C. (2002) *Understanding and Treating the Pathological Gambler.* Chichester: Wiley

Madanes, C. (1995) *The Violence of Men: New techniques for working with abusive families: A therapy of social action.* San Francisco: Jossey-Bass

Malekoff, A. (1997) *Group work with Adolescents: Principles and practice.* New York: Guilford

Mullender, A. and Ward, D. (1991) *Self-Directed Groupwork: Users take action for empowerment.* London: Whiting & Birch

Napier, R.W. (1998) *Groups: Theory and Experience.* (6th ed.) Boston: Hougton-Mifflin

Orlinsky, D., Grawe, K. and Parks, B. (1994) Process and outcome in psychotherapy: Noch einmal. in A. Bergin and S. Garfield (Eds). *The Handbook of Psychotherapy and Behavior Change.* (4th ed) Toronto: Wiley

Rose, S. (1998) *Group Therapy with Troubled Youth: A cognitive-behavioral interactive approach.* Newbury Park: Sage Publications

Safran, J. and Greenberg, L. (Eds.) (1991) *Emotion, Psychotherapy and Change.* New York: Guilford

Schiller, L.Y. (1995) Stages of development in women's groups: A relational

model. in R. Kurland and R. Salmon (Eds) *Groupwork Practice in a Troubled Society: Problems and opportunities*. Binghampton, NY: Haworth

Schwartz, W. (1971) On the use of groups in social work practice. in W. Schwartz and S. Zalba, (Eds) *The Practice of Groupwork*. New York: Columbia University Press

Shulman, L. (1992) *The Skills of Helping: Individuals, families and groups*. ltasca: F. E. Peacock

Theuma, C. (2001) Social groupwork: A journey of discovery. in T.B. Kelly, T. Berman-Rossi and S. Palombo (Eds) *Groupwork: Strategies for strengthening resiliency*. Binghampton, NY: Haworth

Thomas, H. and Caplan, T. (1999) Spinning the group process wheel: Effective facilitation techniques for motivating involuntary group member groups. *Social Work with Groups,* 21, 4, 3-21

Thomas, H.. and Caplan, T. (1997) Group member, group leader and context: Addressing resistance in groupwork. *The Social Worker*, 65, 3, 27-36

Tropp, E. (1976) A developmental theory. in R.W. Roberts and H. Northen (Eds) *Theories of Social Work with Groups*. New York: Columbia University Press.

Yalom, I.D. (1995) *The Theory and Practice of Group Psychotherapy* (4th Ed) New York: Basic Books