

## **Master's Level Addiction Counselors in Group Process**

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### **Introduction**

This article represents a reflection of a unique approach to educating students in group practice. Described here is a model for educating masters level addictions counselors in the theory and practice of group counseling. A growing body of literature in the field of addiction counseling continues to underline group process as an effective tool to facilitate change (Flores, 1997; Cruch, DiClemente, Mauere, Velasquez, 2001). This structure for training graduate level students in group process supports an adult learning model requiring previous knowledge of addiction, expertise in twelve-step facilitation and background in counseling theory (Bernard, Goodyear, 1998; Bilington, 1988; Corey, 2001; Knowles, 1986). The adult learning model, which suggests theoretical learning followed by practical application, is utilized here. The model proposes an opportunity for the student to observe, participate in and lead groups with an addicted client population. Integral to this model is the merging of clinical expertise with state-of-the-art counselor education theory and practice through an intensive supervision structure. The model combines the six-stage change model (Prochaska, Norcross, DiClemente, 1994) with Corey's stages of group process (Corey, 2000). This method includes a supervision segment that monitors student progress and serves as a guideline for student achievement.

The following overview of the model describes books and materials, laboratory objectives, measurement criteria, as well as a breakdown of the model's components. The components of the model include didactic classroom instruction, small group interaction, large group interaction, a clinical laboratory and faculty clinical supervision.

*Books and Materials.* This integrated method of learning relies on the text of Corey's *Theory and Practice of Group Counseling, 5th Edition*, (2000) and the accompanying workbook and video. Assigned readings from Flores (1997) supplement the core body of knowledge covered in the text. Integrating the activities from the workbook with the video demonstration clarifies the core of group process and merges theory and practice.

*Laboratory Objectives.* Laboratory objectives are established for each session and are applied by the students to their field assignments. These weekly laboratory objectives coincide with didactic lectures, reading, video assignments, and classroom discussion. The laboratory experience is the glue that holds this comprehensive model in place.

*Measurement Criteria.* The Group Leadership Effectiveness Scale, adapted by the authors, explores the student's ability to effectively use basic counseling skills such as supporting, facilitating or enhancing process within the group structure (Shadley & O'Mara, 1998), and provides documentation of student progression in leadership skills over the semester. Reliability and validity measures of this instrument are currently being researched.

## **The Model**

The basis of this teaching model requires understanding of how people change and the interaction of the stages of group process as well as an understanding of the characteristics of addiction. It is important to state that the authors' biases are that addiction is a disease that affects the mental, physical and spiritual aspects of the addicted person (Sheehan & Owen, 1999). Therefore, this model assumes knowledge of the behavioral, mental, and spiritual aspects of the addicted client.

The success of self-help groups and group as a treatment modality

is widely documented, and therefore substantiates the need for a systematic training model for addiction counselors (Project MATCH Research Group, 1997). Another essential component of this model is educating the student in the ethical guidelines for group counselors (ASGW Ethical Guidelines for Group Counselors, 1990). The authors propose a model of education that merges theory with practical application while meeting the education requirements of adult learners.

*The Didactic Presentation.* The compatibility of Prochaska and DiClemente's theory of change and Corey's group process are the focus of the didactic component. Integral to this segment of the course is discussion of appropriate leadership techniques for each stage of group process and developing sensitivity for members' readiness for change. Students are encouraged to observe groups in their clinical placements and to note leadership techniques and how they are utilized in a variety of practical applications. Throughout the didactic sessions, student awareness of ethical concerns is continuously supported.

*The Small Groups.* A discussion, a break and small group follow the didactic session. Typically, two groups of seven to 10 students comprise the small groups. These individual groups are conducted in separate rooms with faculty facilitation. In the first small group sessions, the instructors model appropriate group leadership skills by conducting a process group with the students. In the remaining sessions, pairs of students are selected to take over group leadership and to conduct the group incorporating the issues presented in the didactic lecture and assigned readings. The co-leadership model is used so students share responsibility for group leadership and develop a team orientation. A performance scale designed by the authors, the Group Leadership Effectiveness Scale, is completed and given to the student leaders at the end of the small groups. This provides documentation of student leadership effectiveness throughout the semester.

*The Large Groups.* Following a brief break, the next step combines the smaller groups into one larger group with the professors becoming co-facilitators. The goal is to process the student's small group experience. The focus of the large group is for peers and

professors to review student performance and to gain a larger perspective of group process.

*The Clinical Laboratory.* The students are then required to take this group experience to the clinical laboratory and apply their learning as leaders of patient groups. Students participate in three to five group sessions weekly. Later in weekly academic supervision, students present areas of competence and challenge and are directed towards options to support their professional growth.

*Faculty Clinical Supervision.* The one-and-a-half-hour clinical supervision group includes observations and feedback by both professors and peers. Students process their own cognitive and affective responses. They also receive coaching from the supervisory staff at the clinical site. Part of the evaluative process is the blending of faculty, site supervisor, and peer feedback.

## **Summary**

The model described here for educating master's students in group process integrates elements of adult learning theory, the six stage model of change, and Corey's stages of group process. Clinical supervision and 12-step facilitation are integral to the unique architecture of this model. This article delineates the books and materials utilized, a description of the laboratory component and an introduction to the measurement criteria. A step by step execution of the model is described by the authors. Finally, the author's conclude the efficacy of this approach to teaching group process to master's level addiction counseling students.

## **Conclusion**

While the components of this approach are supported in the literature, we believe this unique structural execution leads to a truly effective learning experience. Student evaluation and feedback along with data from the Group Leadership Effectiveness Scale support learning outcomes and reflect student satisfaction with the learning experience. Testimonials from graduates validate their growing

confidence as group facilitators. This model of didactic learning and experiential practice encourages integration of group leadership skills within an addiction group practice.

## References

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