Structured Group Treatment for Divorce/Death Adjustment

Margaret H. Hoopes

Sally Barlow

Follow this and additional works at: https://scholarsarchive.byu.edu/irp

Recommended Citation
Available at: https://scholarsarchive.byu.edu/irp/vol6/iss2/3

This Article or Essay is brought to you for free and open access by the All Journals at BYU ScholarsArchive. It has been accepted for inclusion in Issues in Religion and Psychotherapy by an authorized editor of BYU ScholarsArchive. For more information, please contact scholarsarchive@byu.edu, ellen_amatangelo@byu.edu.
STRUCTURED GROUP TREATMENT
FOR DIVORCE/DEATH ADJUSTMENT

By Margaret H. Hoopes, Ph.D. and Sally Barlow, Ph.D.*

(This outline served as the basis for a presentation made at the Fifth Annual Convention of AMCAP in Salt Lake City, Oct. 5, 1979)

Structured group treatments have emerged in the last few years as a viable mode of helping people. They are defined as those groups taking place within a specified amount of time using specified exercises and/or treatment to accomplish a pre-determined set of educational and/or therapeutic goals. Such groups often focus on the stresses caused by such things as predictable developmental needs (leaving home) or unpredictable life crisis (divorce) by teaching skills otherwise left to chance. Underlying problems such as anxiety, depression, and low self-esteem may also be modified by structured treatments.

The following outline will help in the writing, developing, and eventual application of appropriate structured programs. (Drum and Knott, 1977) Following these instructions is a structured treatment for divorced/separated persons developed by Margaret Hoopes and tested by Vogel-Moline (1979). Moline found significant increases in self-esteem and significant decreases in depression among the persons who participated in this eight week structured treatment.

HOW TO WRITE STRUCTURED PROGRAMS

I. Pre-group Planning Variables
   A. Statement of Purpose & Focus of the Group.
      (Choosing the target population.)
   B. Assessment of Need for the Group in the Population being Served.
   C. Determination of Staff and Supportive Resources.
   D. Development of Marketing Strategy.

II. Procedures for Placing Participants in Groups
   A. Informing Participants that Treatment is Available.
   B. Selection of Participants (Orientation).
   C. Creation of Group(s): Place, Time, Size, Preparation.
   D. Involvement of Leaders.

III. Planning the Treatment: Some Considerations
   A. What are the Advantages for Treating this Population in Groups?
   B. What is the Theoretical Basis for Treatment?

IV. Writing the Treatment
   A. General Description of the Treatment--How Many Sessions, What Will Generally Be the Tone?
   B. Objectives for Overall Treatment (Outcomes).
   C. Measurement for Treatment
      1. Cognitive, affective, behavioral
      2. Individual, interactional
      3. Formal, informal
   D. Control Measures for the Treatment (Seeing if you really accomplished what you set out to do!)
   E. Writing for Each Session.
      1. Objectives for the session or groups of sessions
      2. Role of therapist and participants
      3. Exercises, procedures with specific time estimates
      4. Incorporation of data collection
      5. Treatment structured enough to reach goals but also allows for personality of leader(s).

V. Training Leaders, Therapist, Etc.
   A. Written Treatment, Clear Enough That the Essentials Can Be Understood From Reading--Leader Given A Copy of Pre-Training Sessions.
   B. Training Sessions (Number, Length, Timing).
   C. Responsibilities for Each Session in Addition to Treatment.

Instructions for Leaders:

This outline contains instructions for a structured group treatment for single people who are adjusting to separation through death or divorce. The instructions have been written for you to facilitate treatment objectives. Doing the following will help you effectively administer this treatment.

1. Read the instructions until you are very familiar with the procedures.
2. Participate in training sessions until you feel at ease with the concepts and appropriate phrases.
3. In the training sessions learn and practice supportive behaviors.
4. With your co-counselor map out a plan for each session
   a. Who will do what?
   b. How will you keep to the time limit?

*Sister Hoopes is Professor of Child Development and Family Relations at BYU and a member of the Board of Governors of AMCAP. Sally Barlow is a counselor at the BYU Counseling Center.
c. What will you do to help your partner?
d. What help will you expect from your partner?

5. During the training sessions conceptualize information to help you understand the psychological dynamics of separation.

You will receive a room assignment from the project leader. Arrive early and prepare the room. Also procure audio tapes from the project leader and tape each session.

Treatment Procedures

Group Leaders:
Co-therapist; male and female

Group Size:
Six or seven participants and two group facilitators.

General Instructions:

1. Please follow the order given in the treatment.
2. Watch the clock. You must be finished within two hours and you should not dismiss in less than ten minutes of that time. In other words, it’s important that all groups have approximately the same amount of time together.
3. Tape all sessions. Be sure your recorder is working and that the tape gets turned over.
4. Contact absent members by phone the day after session one will be made use of during this phase; i.e. members will ask, give and receive support from one another.

Phase III: Strengths:

During sessions 6 to 8, the group members will learn how to develop an understanding of their personal strengths they have to help them during their post divorce/separation/death from their spouse. Members will be helped by group members to become aware of their strengths. Then if there are some personal weaknesses they wish to overcome they can discuss them with the group and some suggestions will be presented on how to overcome weakness. However, the main focus of this phase is to concentrate on the positive, to help members of the group realize they have potentials which can be made use of and will help them to solve problems and overcome weaknesses.

Each phase builds upon the previous phase, the goals being that group members will learn some ways of dealing with problems and how to gain support in their environment. Also, members will become aware of their own potentials as self-sufficient beings who will be able to help themselves and others. These phases are particularly important for individuals going through a separation from a spouse either from death or divorce.

Session One:

I. Introduction: (5 minutes) Have each one introduce him/herself using first names only. Use an exercise or whatever you want to do, but by the time you finish each participant should know everyone’s name. You can preface the introduction by saying that everyone will get better acquainted before the session is over, but just to start out it’s helpful for people to be able to call each other by name. This should not take more than five minutes. It probably will take less.

II. Tape recorders: (1 minute) Explain to the group that the tape recorders are there for your help. They’re to give you information so that you can do the best job possible. Also, assure them of confidentiality and that they will soon forget about them. Give participants an opportunity to discuss their feelings but do not give them a choice as to whether the session is taped.

III. Expectations of participants: (10 minutes) By confirming or disconfirming the expectations of participants the group leaders should be able to discuss the group process and the major aspect of the treatment; i.e., the support system. Utilize the following instructions to accomplish this:

A. Ask some of the following questions to encourage participants expression of their expectations. Sample questions are: What do you expect to hear? What do you think will happen here? What do you expect of me or of us as group leaders? What do you expect of the other participants? Be sure that you get clarification from the
participants as they express their expectations. Be patient. Silences sometimes mean that people are thinking and will come up with what they want to say. Discuss your own expectations. Be sure that either through what you introduce or what the group members introduce you cover honesty, confidentiality, cooperation, responsibility, and attendance.

B. Define and discuss as a group, support. Ask the following questions: Support — what is it? Why is it important? How will we build it in this group? Make statements like, "We wouldn't be together if you didn't recognize you need help." "What are your resources for help?" Focus on resources of the individual, the group participants, the group leaders and people outside the group. Talk about the importance of having the ability to recognize one's own strengths and not have them obscured by feelings of worthlessness. Ask them for the kinds of behaviors from others, from themselves, that are helpful. Examples of behaviors include: being listened to, having somebody ask them for help, using their own abilities, giving someone help, etc. Some participants may have difficulty seeing themselves as giving or receiving support and will have a hard time giving suggestions.

Caution: As people talk about expectations they may want to discuss their problems. Tactfully, but emphatically, do not let them do this at this time. That is, they may mention their problem. They may say something like, "I expect to be able to deal with my children more effectively" or "I want to be able to date and not be afraid." General statements are O.K.; but if you don't keep control of this, some of them will want to go right into an elaboration of their problem.

IV. Introduction in depth: (30 minutes) Give each person an opportunity to talk about herself and himself. A sample introduction is given and a list of interaction guidelines which must be covered before introduction is given.

Sample introduction to this exercise:

We will take some time now to get better acquainted and to find out the nature of the problems so we will be working with in this group. Each of you take 2 or 3 minutes and tell us some thing about you that will help us to know you. Risk telling us about the parts of you reserved for old friends. Also, identify in a general way the problems you want to work on in the group. (This first identification may not be the problem they will eventually work on but it will begin the process). After each person tells us about himself let's take time to respond and ask questions. (Then talk about the frustration and necessity of keeping within the time limits).

Interaction guidelines:

A. They can't talk about anyone who isn't in the

B. Define and discuss as a group, support. Ask the following questions: Support — what is it? Why is it important? How will we build it in this group? Make statements like, "We wouldn't be together if you didn't recognize you need help." "What are your resources for help?" Focus on resources of the individual, the group participants, the group leaders and people outside the group. Talk about the importance of having the ability to recognize one's own strengths and not have them obscured by feelings of worthlessness. Ask them for the kinds of behaviors from others, from themselves, that are helpful. Examples of behaviors include: being listened to, having somebody ask them for help, using their own abilities, giving someone help, etc. Some participants may have difficulty seeing themselves as giving or receiving support and will have a hard time giving suggestions.

Caution: As people talk about expectations they may want to discuss their problems. Tactfully, but emphatically, do not let them do this at this time. That is, they may mention their problem. They may say something like, "I expect to be able to deal with my children more effectively" or "I want to be able to date and not be afraid." General statements are O.K.; but if you don't keep control of this, some of them will want to go right into an elaboration of their problem.

IV. Introduction in depth: (30 minutes) Give each person an opportunity to talk about herself and himself. A sample introduction is given and a list of interaction guidelines which must be covered before introduction is given.

Sample introduction to this exercise:

We will take some time now to get better acquainted and to find out the nature of the problems so we will be working with in this group. Each of you take 2 or 3 minutes and tell us some thing about you that will help us to know you. Risk telling us about the parts of you reserved for old friends. Also, identify in a general way the problems you want to work on in the group. (This first identification may not be the problem they will eventually work on but it will begin the process). After each person tells us about himself let's take time to respond and ask questions. (Then talk about the frustration and necessity of keeping within the time limits).

Interaction guidelines:

A. They can't talk about anyone who isn't in the
much to offer. Will you come every time? What might stop you from attending? (If the response represents any kind of resistance set up a procedure for someone in the group to help overcome the resistance.) Do you plan to be honest in the group? What difficulties do you see? etc. Do you plan to be responsible to yourself and to members in the group? Do you think you can share your experiences and solutions to problems? Will you ask for help as you need it? Thank you David. I think I understand your commitment. I plan to help you in every way I can.”

VI. Some people will not be able to be committed whole heartedly to each of these. Their feelings of inadequacy may hinder this, or someone may decide the group isn’t for him/her. Respond appropriately, but make sure that everybody in the group has had an opportunity to respond to that commitment. Then each group leader should take his commitment to the group. Tell what he/she is willing to do in relationship to attendance, being on time, and honesty and responsibility to your own set of skills in giving and helping people build a support system and solve personal problems.

Participants will not fully comprehend the commitment. You should be able to detect resistance. Re-enforce any commitment they make and redefine lack of commitment in a positive manner, i.e. Your ability to be honest with us is an indication of strength you have which will be important to all of us. Do not confront persons who are resistant.

VI. Challenge: (10 minutes) Invite participants to practice with other people during the week the rules you are using in the group, i.e., refraining from talking about other people in a blaming way, and concerning their own problems being honest, responsible, etc. Indicate that a couple of people will talk about their problems the following week. Tell them that this time the group will learn a process of solving problems as well as determining explicit solutions for them. Encourage each person to be supportive in some way to at least one person during the week.

Sessions 2-5

Behavior for the therapist:

1. Model supportive behaviors toward group members and each other.

2. Reinforce supportive behavior in the group and any that group members have done outside the group.

Nonverbal

Touching ............ Touching in a positive, empathetic, understanding way.

Head nodding .......... Recognizing, agreeing with, relating to, listening to the other person(s).

Umhum ............ Relating to and/or understanding what is being said.

Smile ............ Indicating warmth and acceptance of the person(s) receiving the smile.

Tears w/other ........ Weeping with and in response to another person because of feelings of empathy, understanding, etc.

Voice tone ............ This refers to change in the general quality of the voice in response to support toward a group member.

Body position open .. This refers to the open position of arms and legs not being crossed or legs loosely crossed in relation to acceptance of an individual - acceptance of feedback.

Proximity close ...... The physical distance between group members, 10 inches or less is close.

Hugging ............ Placing arms around another person and applying pressure with the arms on the person.

Leaning forward ...... Reclining of the body torso toward the group or an individual.

Finger snapping ...... Snapping fingers indicating agreement or support.

Verbal

Concern ............ This refers to statement that expresses care, such as I like you, I accept you, I am glad to be in this group with you, etc.

Confrontation ........ The verbalizing by one person of two sets of incongruent behaviors of another. Must manifest helpfulness and nonattaching in intent.

Positive re-enforcement Statements intending to create a positive emotional experience for the recipient.

Agreement ............ When two people reach the same conclusion and at least one of them verbalizes it.

Similarity ............ When two or more people discover common points or interest, background, knowledge, belief, activity.

Understanding ........ A statement following a statement that indicates the first statement was heard and cor-
rectly deciphered by the person making the second statement.

I. Greetings: Both therapists should say hello to everyone individually by name and in some way verbally and nonverbally let them know that you're glad to see them back. Enforce upon their minds how important it is that everybody be there.

II. Review: Review the importance of a supportive system by asking the group what impressions they have from last week. Bring out what a supportive system is. Emphasize how it includes a lot of people rather than one and that they will be able to build a supportive system by giving support and asking for support. Remind them of how the small group, the one that they are now in, is an opportunity for them to ask and give support. Check to see if any of them are aware of adding to their outside support system by asking for support in some way or giving support after what happened to them in the group last week. (Steps I and II should not take much more than 10 minutes).

III. Discuss the following points with the group: The roles of the therapists and group members are very similar. You should make this clear to group members that they will get better at the things that you do as a therapist as the group progresses. Some of the functions are listed below, but this is not an exhaustive list.

A. Listen carefully.

B. Be responsible for your own understanding of the problem. This means that if you don't understand, then you should ask for information or make clarifying statements which could be checked out by the person who is telling something or recounting a problem. (This is an opportunity for the therapist to teach responsible behavior to the group.)

If you are a group member and you sense that the person who has been talking has risked something, be sure and point this out to them and compliment them on it. Also, if you have had experience similar to the person who is talking, let him/her know that. In every way possible present an optimistic positive approach to the solving of the problems.

D. The therapist(s) should briefly outline a process for solving problems. That outline will be found in the list of general proceedings. Before briefly describing the process tell them that they will learn the procedures as they go along but you want to let them have a general idea of what will be taking place.

IV. Volunteer: The therapist now indicates that this is the first opportunity for them to ask for help from the group by indicating what problem they want to work on. This may startle the group a little bit, but they really should be prepared to do this from last week's introduction to the group and the fact that you are focusing on problems. If you do not get a volunteer, you may want to talk about the resistance of the fear that they have — the risk that it is taking to be first in the group. Have them practice formulating statements which ask directly for help.

V. General Outline of Proceedings: Use this outline to solve problems group members bring up.

A. The person selected will talk about his problem while others listen and get information from that person.

B. The description of the problem should be complete. That is, therapists and group members should encourage the person who is talking about his problem to be specific — to give really useful information.

C. This step has two parts. The first is to have the individual describe how he would like to be. In other words, he has been talking about what the problem is and now he will describe how he would like to be. The second part of this is to ask the individual what solutions he has already tried in solving his problem.

(To get information or to get a description of how the individual would like to be, the therapist should feel free to use imagery, role-playing, small bits of sculpturing, etc., anything that really makes it very clear what the problem is.)

D. What are some ways to change the behavior or attitude or feeling? In other words, try to find as many possible solutions as the group can create, both from their experience and from brainstorming. Both group members and therapists should be highly involved in this process. It would be a good idea for one of the therapists to write the ideas on a note pad and give a summary before moving on to the next step.

E. Weigh the advantages and disadvantages of the solutions that are suggested and then have the individual choose a plan. A decision should be made based on what's really reasonable and possible for the person to do.

F. Train the person to do what he/she has planned to do to solve his problem. You can use people in the group to act as people outside the group in role playing or in skill learning situations. The individual with a problem should practice. This is a teaching-training part that therapists will be highly involved in, but don't discount ideas that come from the group. Some of them won't work and some of them may divert you from the path that you are on, but be sure to comment on the fact that they are thinking and that they are putting forth ideas.

Now that the person has a plan and has
been trained to do it, get a commitment from him/her that she will actually try this out in an environment away from the group. Find out what will get in his/her way and what kind of help is needed from the group and have people volunteer to do whatever is necessary.

VI. If you have time, move to another person and follow through on the same procedures. If you don’t have time, summarize what the group has done. Talk about some things that you’ve seen happening in the group that were supportive and helpful. Indicate that you recognize some problems that other people were wrestling with and that they will have an opportunity to solve the problem in the group. Indicate that you are very interested in everybody and that there will be time to take care of those things. (Keep in mind your responsibility to limit the group to within ten minutes of the two hour time that we have specified. Also be sure to collect any written response, such as the depression check list.)

VII. Challenge each person to continue to practice communication skills and supportive behaviors in his/her own support system during the week, and to supply the problem solving steps where appropriate.

Sessions 6-8:

Behaviors for the Therapists:

1. Model supportive behaviors
2. Reinforce supportive behaviors
3. Clarify
4. Participate by giving strengths and weaknesses but do not dominate
5. If the group does not follow the procedures, make process comments to pull them back to the structure.

I. Greetings: Same as you have been doing.

II. Review: Comment on the problem solving process they have been learning and the problem each is trying to solve. Be supportive as you summarize. Emphasize that persistence and time coupled with support from the group and from outside the group as well as drawing on their own strengths will help solve their interpersonal problems. (Limit this to ten minutes or less.)

III. Final Phase of Treatment: Introduce the final phase. Include in the explanation the following: We have three more weeks together. Some of you may wish to negotiate for more sessions, but for right now we need to move into another phase. Tonight we want to talk about our strengths and our weaknesses. Sometimes because our problems seem so big we tend to minimize or ignore our strengths and focus on our weaknesses. The procedures for this session will help us all to focus on our strengths to the point that we can maximize them in most situations.

IV. Instructions to the Group: Here is a set of instructions for us to follow. Lets take time to read through them individually. Then let’s discuss anything that isn’t clear. (Pass out the instruction sheets. You may get resistance in the form of wanting to discuss the instructions longer than necessary. Say something like the following, “We seem to be having a little trouble getting started. Does anyone wish to volunteer?” Should you not get a volunteer you may ask the group if they want to draw a number to begin or some similar plan.)

V. The Scribe: So that you will have a record of what we do here, I will ask one of you to write down the strengths as they are given by the individual and the group.

VI. Discussion: Use the last five to ten minutes of the session to have the group discuss what they have learned from the session.

VII. In the 8th session, at the beginning of the session, get commitments from everyone to complete research measurement instruments.

INSTRUCTIONS FOR GROUP PARTICIPANTS

Step One:

We have been stressing the need for support. One way of getting support is to volunteer information and also to ask for help. This exercise is designed to help all you do this. One person volunteers to tell the group about his/her strengths. Include talents, abilities, hobbies, interpersonal skills and so forth. Say something like “I have some strengths I want to tell you about.” Here are some guidelines to help you.

A. We need not do something all of the time in order to call it a strength. Not one of us is consistent. Therefore, do not qualify your strengths. Example of a qualifying statement would be “Sometimes I speak clearly and distinctly or once in a while I can say what I want to say.”

B. You are not to say anything negative about yourself. Everything is to be put into a positive context.

(Have someone in the group write the strengths for the person as they talk.) Group: You may ask questions but you are not to negate nor qualify. If you have seen the strength mentioned say so.

Step Two:

When the individual has exhausted her/his lists of strengths, group members then add to it. Be as specific as you can by using incidences which occurred in the group, or specific incidences that you have seen outside the group.
Step Three:

The person who has been telling about his/her strengths now tells the group some things he or she wants to improve. These may be things already mentioned on the strength list which needs strengthening or they may be things that he/she regarded as weaknesses. Problems already dealt with in the group may go on this list, if the individual needs to continue to work on them. When the list is completed, the individual may say to the group, "Are there other things I should be working on? What are your suggestions?" (Asking for help.)

Step Four:

The group then adds to the list the things the individual needs to work on. Be sure to use specific incidences related to the behavior. However, if you don't have it clearly defined, discuss it. Either the individual or the group members will help you define it more clearly.

Step Five:

The individual now indicates some specific things she/he will do to improve the behaviors indicated as weaknesses. The group will help by asking clarifying questions and by giving suggestions. Then, as a group, examine a list of strengths to see which ones will help the individual strengthen the behaviors that he or she is dissatisfied with. Be sure to fill in what resources are available outside the group.

The scribe then gives the list with the specified behaviors to the individual and a new person in the group then begins the same procedures.

References


