

Group Program Proposal, Assignment #4

**Group Program Title: 14 Week Group Counselling Proposal for Increasing Self-esteem in
Adolescent Females**

Group Marketing Title: Indivisible You: Exploring Identity and Building Self-Esteem

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Abstract

This psychoeducational counselling group is designed to explore the many facets of the emerging female adolescent identity and foster a high level of self-esteem. According to Powell (2004) adolescence is a time, and even more so for females, which can be marked by many identity conflicts and low levels of self-esteem. As such, this 14 week counselling group will facilitate the exploration of group members' identity through utilizing the "The Indivisible Self" model of wellness. The Indivisible Self model was created by Myers and Sweeney (2005), and is based on an Adlerian, strengths-based, holistic approach to counselling. Mindfulness based Cognitive Behavioural Therapy, Acceptance and Commitment Therapy, and Expressive Arts Therapy interventions will be used to help increase group members self-esteem. The end goal of this proposed group program is to help equip group members with a strong understanding of who they are, increase their level of self-esteem, and provide them with a large tool box of new skills to aid them as they continue on their path to adulthood.

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14 Week Group Counselling Proposal for Increasing Self-esteem in Adolescent Females

Self-esteem involves the thoughts and feelings we have about ourselves (Myers, Willse, & Villalba, 2011). Adolescence is a crucial time in our development where we are testing limits, exploring our values, and figuring out who we are (Powell, 2004). Often times the self-esteem of adolescent females during this important transition period, is marked by low levels of self-esteem and identity conflict (Powell, 2004). As such, we are putting forward a group proposal designed to increase self-esteem in adolescent females through exploring the many different aspects of one's identity and teaching new skills in the process.

This proposal will provide background information on self-esteem and group counselling. An outline of the proposed group program and overview of the group details will follow. There will be a discussion on how the group will be run in an ethical manner, followed by our concluding statements. Please see the attached appendices for additional, detailed information regarding this proposed group counselling program.

Background

To provide readers with an in-depth understanding of self-esteem and effectiveness of group counselling in increasing self-esteem in adolescents, the concept of self-esteem will be discussed in detail. We will then review evidence of the efficacy of group counselling as a valid intervention, and discuss the applicability of using group counselling specifically to increase self-esteem.

The Presenting Issue

By the age of 15, adolescents will have experienced many life events that have impacted their self-esteem both positively and negatively. Self-esteem has been discussed as consisting of two different components: (a) efficacy or competence, and (b) self-worth (Young, 2009).

According to Young (2009), efficacy is tied to an individual's belief that they can perform various activities in different situations, and self-worth is a more global feeling that one is worthy, basically good, and deserves to live. Adolescence is a time that can be characterized by low self-esteem and identity conflict, oftentimes even more so for females (Powell, 2004).

Working with adolescence to promote a high level of self-esteem is a crucial task for counsellors to be aware of and undertake. Evidence to support such an undertaking comes from studies that link lower levels of self-esteem with psychological issues as well as the development of physical health problems, as reviewed by Stinson and colleagues (2008). In regards to adolescence specifically, the importance of a high level of self-esteem cannot be overemphasized as it believed to influence important life decisions (Searcy, 2007; Nassar-McMillan & Cashwell, 1997). Some of these life decisions impacted by self-esteem included: (a) whether or not to engage in protected sex, (b) age of first sexual experience, (c) school attendance, (d) drug and alcohol use, (e) peer group selection, (f) diet, job attainment, and (g) enduring or inflicting domestic violence (Searcy, 2007).

Moreover, Haney and Durlak (1998) discussed studies that linked higher levels of self-esteem in adolescents with healthier social and interpersonal relationships, better coping skills, and higher levels of academic achievement. Haney and Durlak (1998) then discussed studies linking lower levels of self-esteem with "higher rates of teen pregnancy, alcohol and drug abuse, juvenile delinquency, suicide, loneliness, depression, social anxiety, and alienation" (p. 423). In summary, high levels of self-esteem are considered an invaluable psychological resource that can have positive impact on major life decisions (Searcy, 2007) as well as on an individual's physical health (Stinson et al., 2008).

In working with adolescence to explore their sense of identity and level of self-esteem, a model of wellness has been put forward. This model of wellness, coined “The Indivisible Self” is evidence-based, and Myers and colleagues (2011) stated that it has been successfully used for counselling children, college students, police officers, and adolescents. According to this model, the parts of one’s self are all interconnected and inseparable, thus the Indivisible Self is at the centre of this model. The five main factors that are all important components of the Indivisible Self are the creative self, coping self, physical self, essential self, and social self (Myers et al., 2011). Using this model allows for the identification of strengths, positive assets, and resources that adolescents already have, which can then lend encouragement to adolescents to utilize these strengths to build a stronger sense of self-esteem (Myers et al., 2011).

Changes in one area of this model can result in positive or negative changes in other wellness areas, and all are influenced by the interactions and influences of those important people in an adolescent’s environment (Myers et al., 2011). Being that often times the most influential group in an adolescent’s life is their peers (Searcy, 2007; Nassar-McMillan & Cashwell, 1997), it follows that counselling with the population may be most effective in a group setting. The next section of this proposal examines the efficacy of group counselling in general, before moving into an in-depth discussion of the effectiveness of a self-esteem counselling group for adolescents based on the Indivisible Self, model of wellness.

Group Counselling as a Valid Intervention

Gumaer (as cited in Margot & Warren, 1996), stated that “people are born in groups, live in groups, work in groups, become ill in groups, and so why not treat them in groups” (n.p.). According to Drumm (2006), group work is a powerful therapeutic endeavor which can result in an atmosphere of mutual aid. In this atmosphere, members learn to identify and voice their own

needs, realize similarities and differences, form connections with others, and practice new skills in an environment of inclusion and respect (Drumm, 2006). Furthermore, group counselling approaches can: (a) increase staff efficiency (Dies, as cited in Drumm, 2006), (b) offer a more affordable therapy option to clients (McRoberts, Burlingame, & Hoag, 1998), (c) universalize issues, which can help increase the sense that one is not alone in their experience (Shaffer & Galinsky, as cited in Drumm, 2006), (d) foster a sense of altruism through aiding other group members (Steinberg, as cited in Drumm, 2006), and (e) provide a safe place to engage in interpersonal learning and further develop socializing techniques (Yalom & Leszcz, 2005).

To provide further evidence of the efficacy of group work, Yalom and Leszcz (2005) stated that “a persuasive body of outcome research has demonstrated unequivocally that group therapy is a highly effective form of psychotherapy and that it is at least equal to individual psychotherapy in its power to provide meaningful benefit” (p. 1). A meta-analytic review by McRoberts and colleagues (1998) supports this assertion. McRoberts and colleagues (1998) reviewed 23 outcome studies completed between 1950 and 1997 that compared the effectiveness of group therapy versus individual therapy. From their in-depth analysis of these studies, they concluded that there were no significant differences in therapeutic outcomes when group versus individual counselling approaches were used.

To provide an example of a study focused on comparing individual versus group therapy, Graham, Annis, Brett, and Venensoen (1996) examined the effectiveness of individual versus group relapse prevention therapy on a total of 91 participants at two different addiction treatment sites. They found that drinking and drug use were substantially less at the 12 month follow up for both groups. The only significant difference found in treatment groups was that participants in the group approach reported a higher degree of social support at the 12 month follow up

(Graham et al., 1996). Corey, Corey, and Corey (2010) stated that group counselling approaches can be a very effective treatment approach for a wide range of presenting issues. We will now review literature that supports the effectiveness of a group counselling approach in exploring and promoting the development of self-esteem in adolescent, female students ages 15 to 16.

Rationale for using Group Counselling to Increase Adolescent Self-Esteem

Adolescence is a time where individuals are increasingly likely to be concerned with figuring out who they are (Nassar-McMillan & Cashwell, 1997). According to Searcy (2007), a main avenue through which youth explore their self-concept and develop self-esteem or lack thereof, is through interactions with their peers. Self-esteem is then developed through associations with others, activities one engages in, and the things that one hears about themselves (Searcy, 2007). Based on this information, work with adolescents aimed at fostering a high level of self-esteem often occurs in a group counselling setting (Nassar-McMillan & Cashwell, 1997).

According to Gumaer (as cited in Margot & Warren, 1996), there is no better environment for youth to learn in than within their peer group, and as such, counsellors working in the school setting can maximize student's learning through group experiences. Nassar-McMillan & Cashwell (1997) stated that many different types of group counselling interventions have been successfully utilized with adolescents with a higher likelihood of experiencing low self-esteem. To support this assertion, Margot and Warren (1996) compared the effectiveness of individual versus group therapy focused on increasing self-esteem for 37, 12 to 15 year old female adolescents who had experienced sexual abuse. They found significantly higher levels of self-esteem of participants in the group counselling condition, when compared to the individual counselling condition one week after the counselling had finished.

In another such study, Hong, Lin, Wang, Chin, and Yu (2012) tested the effectiveness of a functional group counselling intervention on 43 low achieving students' self-worth and self-efficacy. They found that group counselling in a school setting was found to be enjoyable to students and provided an atmosphere that had the ability to promote positive student-to-student learning. More importantly, Hong and colleagues (2012) found that the 43 students that participated in the functional group counselling intervention had significantly improved levels of self-worth and self-efficacy when compared to their peers that did not complete the functional group counselling.

To get a bigger picture of the effectiveness of group counselling interventions in increasing self-esteem in adolescents, Haney and Durlak (1998) conducted a meta-analytic review of 116 studies focused on different therapeutic modalities to increase children and adolescent self-esteem. Of these studies, 84.5% were delivered to groups of children or adolescents. Haney and Durlack (1998) concluded from their review that: (a) significant improvements were not likely to happen if the intervention was not focused specifically on increasing self-esteem; (b) although the majority of participants appeared to benefit from intervention focused directly on increasing self-esteem, there were differences found in types of presenting problem; and (c) intervention programs guided by a specific theoretical background and using evidence-based interventions were more likely to demonstrate successful outcomes. This information is essential to the development of a counselling group aimed to increase self-esteem in 15-16 year olds, as it demonstrates the success of group therapy modalities, calls for a direct focus on self-esteem, and denotes the importance of anchoring this group program within a specific therapeutic background, utilizing evidence-based interventions.

The next section of this proposal will provide a detailed overview of our group program that is grounded in mindfulness based cognitive therapy, utilizing evidence-based techniques from the expressive arts domain. This group is focused on exploring and promoting the development of self-esteem in adolescent females ages 15-16 through examining the five wellness factors identified earlier in this paper (i.e., creative self, physical self, coping skills, social networks, and cultural identity).

The Proposed Group Program

We will now provide an overview of the group, discuss the core objectives, and outline how marketing will be handled. This will be followed by an overview of the group membership and screening process, and a discussion of what will be covered in the pre-group meeting.

Overview of the Group

A. Main [Aim/Goal/Purpose] of the Group:

The aim of the group is to increase self-esteem by exploring identity, based around the five factors in the Indivisible Self model of wellness (i.e., creative self, coping self, physical self, social self, and essential self), with an emphasis on the coping self. There will be a focus on exploring members' current strengths and skills and introducing new skills. The program will promote an internally motivated sense of self-esteem and introduce coping skills from an acceptance and commitment training (ACT) model. Mindfulness skills will also be introduced, and a strengths based view of self, promoted.

B. Type of Group:

This is a *psychoeducational group*, focusing on developing members' cognitive, affective, and behavioural skills through a structured set of procedures within and across meetings" (Corey, et. al., 2010, p.11). Sessions will be designed around different themes and in a structured format, but will balance educational and therapeutic needs of participants (Corey, et.al., 2010, p.11). Lesson plans will be designed to allow time for members to discuss and process the various interventions and topics that will be covered.

C. Educational Objectives being addressed based on Alberta Education Health

Program of Studies (2002): To legitimize how this program addresses curriculum objectives, below are the intended learning outcomes for the psychoeducational goals and materials used in this program. These can be found in the Alberta Learning Health and Life Skills Program of Studies.

Wellness Choices: 9.3 apply coping strategies when experiencing different rates of physical, emotional, sexual and social development (e.g., positive self-talk); 8.3 analyze the messages and approaches used by the media to promote certain body images and lifestyle choices; 8.4 develop personal strategies to deal with pressures to have a certain look/lifestyle (e.g., accept individual look); 9.4 analyze and develop strategies to reduce the effects of stereotyping on body image (e.g., health risks of altering natural body size/shape to meet media ideal); 6.7 identify and communicate values and beliefs that affect healthy choices; 7.10 identify and examine potential sources of physical/emotional/ social support (Alberta Learning, 2002).

Relationship Choices: 6.1 recognize that individuals can choose their own emotional reactions to events and thoughts; 5.2 identify and use long-term strategies for managing feelings (e.g., dealing with disappointment, discouragement); 6.3 develop personal strategies for dealing with stress/change (e.g., using humor, relaxation, physical activity); 7.1 analyze how thinking patterns influence feelings (e.g., positive thinking, all or nothing thinking, overgeneralization, perfectionism); 7.2 analyze the need for short-term and long-term support for emotional concerns (e.g., family, friends, schools, professionals); 9.3 analyze, evaluate and refine personal strategies for managing stress/crises; 7.4 analyze and practice constructive feedback (e.g., giving and receiving); 8.4 analyze the effects of self- concept on personal communication; 6.5 develop and demonstrate strategies to build and enhance relationships in the family (e.g., being honest, expressing empathy); 5.6 investigate the benefits of fostering a variety of relationships throughout the life cycle (e.g., cross-age relationship); 6.6 develop strategies to maintain and enhance appropriate cross-age relationships (e.g., within the family, school and community); 7.9 develop group goal-setting skills (e.g., collaboration); 8.9 describe the characteristics of, and demonstrate skills of, an effective leader and group member; 9.9 evaluate group effectiveness, and generate strategies to improve group effectiveness (e.g., develop skills in facilitating discussions or meetings) (Alberta Learning, 2002).

Learning Strategies: 6.2 identify personal skills, and skill areas, for development in the future; 6.3 analyze influences on decision making (e.g., family, peers, values, cultural beliefs, quality of information gathered); 6.44 identify and develop strategies to overcome possible challenges related to goal fulfillment (e.g., self- monitoring strategies, backup plans) (Alberta Learning, 2002).

D. Counselling Orientation:

This program will integrate several theoretical therapeutic models, including: Adlerian Individual Psychology and Community work model, ACT (i.e., third wave CBT), mindfulness-based cognitive therapy, and person-centred expressive art therapies (Rogers, 2011). The Indivisible Self Model of Wellness will be used and is “based on Adler’s individual psychology and cross-disciplinary research on characteristics of healthy people” (Myers, et.al., 2011, p.28). The model follows the Adlerian “holistic”

view of the individual (Corey, 2008) and promotes a strengths based approach to psychotherapy. The approach is also similar to other programs influenced by the Individual Psychology movement, in that it focuses on empowering self through the identification and appropriate use of personal assets, strengths, and personal connections (Wingett & Milliren, 2008).

E. Addressing the Indivisible Self Five Wellness Factors:

Research showed that of the wellness factors, coping self, social self, and creative self consecutively, had the most “potential for affecting aspects of self-esteem” (Myers et al., 2011, p.89). To address the coping self, described as encompassing realistic belief, stress management, self-worth, and leisure (Myers et al., 2011), the group will utilize mindfulness training based on the ACT strategies. The group will also use traditional CBT activities to combat negative thought patterns. To address the social self, there will be a focus on exploring members’ social networks and how this relates to self-esteem. To address the essential self, there will be a focus on exploring members’ cultural identity, spiritual identity, and personal values. The physical self will be addressed, through exploring members’ body image, with a focus on learning different ways of coping with/changing negative feelings members may have about their bodies. Finally, the group will utilize person-centered expressive art therapies to facilitate mindfulness strategies, create developmentally appropriate interventions, and explore the creative self.

F. Main Topics to be Addressed:

The first theme will focus on understanding self-esteem from a holistic perspective, incorporating wellness factors. The second theme is the development of mindfulness-based strategies for coping with stress. The final theme is exploring personal strengths, choices, and social connections using the creative self factor (Myers et al., 2011).

G. Number, Length, and Frequency of the Sessions:

This group is a fourteen-session group therapy program for adolescent girls, ages fifteen and sixteen years old. Participants will be selected based on a screening and referral process (see Appendix D). The group is a *closed group*; members will be expected to remain in the group until the end. Each session will be three hours in length and occur once per week.

H. Group Size:

The group will have 6 to 8 participants, as a group of this size is big enough for everyone to be involved and encourages group cohesion (Corey et al., 2010).

I. Copyrights:

Coopersmith Self-Esteem School Inventory short form - (CSEI-SF)
(Coopersmith, 1967), Ways of Coping Questionnaire (WAYS) (Folkman & Lazarus

1988), and the 26-item Self- Compassion Scale (SCS) (Neff, 2003), and the Wellness Evaluation of Lifestyle- (5F-WEL) (Myers & Sweeney, 2001) will need to be purchased for evaluation of program effectiveness and client progress. Assessment measures costs are located in Appendix B.

Core Objectives

Overall Most Relevant Group Goals	Measurement (Evaluation) of the Goal & Corresponding Objectives
<p>1. Develop an improved sense of self-esteem- adolescence is a time marked by assaults to self-esteem and identity conflict (Powell, 2004). Higher self-esteem is associated with improved life decisions, better coping skills, and healthier inter-personal relationships (Haney & Durlak, 1998; Nasser-McMillan & Cashwell, 1997; Searcy, 2007)</p>	<p>1a. Post group test scores on the Coopersmith Self-esteem School Inventory Short Form (CSEI-SF; Coopersmith, 1967) are increased from the pre group test scores.</p>
<p>2. Develop stress management coping strategies- through mindfulness based practices. Myers and colleagues (2011) study of wellness suggested that coping self “was the sole wellness factor consistently related to all four components of self-esteem” (p.33). They noted the need for counsellors to “incorporate all aspects of this factor in interventions with adolescents” (p.33) –stress management, realistic beliefs, self-worth, and leisure. Mindfulness based training has been shown to be: (a) successful and effective strategy to help reduce stress (Napoli, 2005; Wall, 2005; (b) helped with attention, improved sense of happiness, and mindful awareness (Bogels, Hoogstad, van Dun, de Schutter, & Restifo, 2008); and (c) in increasing self-awareness and purpose (Birnbaum, 2005) (as cited in Coholic, 2011).</p>	<p>2a. Post group test scores on the Complete Ways of Coping Questionnaire (WAYS; Folkman & Lazarus, 1998) are increased from the pre-group test score.</p> <p>2b. Post group test scores on the 26-item Self- Compassion Scale (SCS; Neff, 2003) are increased from the pre group test scores.</p>
<p>3. Identify personal positive attributes and strengths- using the Indivisible Self Model of Wellness (Hattie, Myers, & Sweeney, 2004). Villalba and Myers (2008) research showed that focusing on “areas of highest wellness and [exploring] ways to address areas of lower wellness”</p>	<p>3a. Compare post group test score on Wellness Evaluation of Lifestyle- 5F (WEL; Myers, Sweeney, & Whitmer, 2001) to pre group test score.</p> <p>3b. Can identify the Indivisible Self Model of Wellness factors- creative self, coping</p>

<p>(p. 30) resulted in a strengths-based intervention that helped build self-esteem and recognize the holistic nature of wellness (Myers et al., 2011). These wellness factors are predictive of self-esteem in adolescents (Myers et al., 2011), suggesting the value in promoting the development of each wellness factor.</p>	<p>self, physical self, essential self, and social self (Myers & Sweeney, 2003) (as cited in Myers et al., 2011).</p>
<p>4. Recognize the power in personal choices- in relation to the creative self factor and life planning. Myer's and colleagues (2011) research demonstrated that interventions targeting the creative self factors improved academic performance and self-esteem. Focusing on personal choices, enhanced sense of personal power, and capabilities increasing self-esteem (Wingett, et.al., 2008),.</p>	<p>4a. Complete Indivisible You Workbook 4b. Can identify the ACT concept of value directed goals and committed action (Strosahl & Robinson, 2008).</p>

Marketing

This group will be marketed as a closed group that employs a referral and screening process. The group will be announced in a brochure that includes: (a) a professional disclosure statement, (b) statement of goals and purpose, (c) policies around entering and exiting the group, (d) expectations for group participation, (e) rights and responsibilities of both group members and the group leader, (f) documentation procedures and the disclosure of information to others, (g) procedures for consultation between group leader and members, (h) techniques and procedures that may be used, (i) education, (j) training and qualifications of the group leaders, (k) time parameters, (l) a statement of what services can and cannot be provided, and (m) potential consequences of group participation (Corey, et. al., 2010). Providing this information is recommended by the Best Practice Guidelines of the Association for Specialists in Group Work (ASGW, 2007).

In addition, providing these details will inform referring agencies and help to avoid miscommunication of the purpose of the group offered (Corey, et.al., 2010). The brochure will be distributed to referral groups, teachers, school counselling and administrative staff, potential participants, and their parents. A marketing poster will also be displayed in the school counselling office, the girls' washroom, and on the school announcement bulletin board. Please see Appendix C to view the Marketing Poster.

Group Membership and Screening

Haney and Durlak (1998) meta-analytic study found that the majority of children and adolescents benefited from self-esteem based counselling interventions. That being said, they found that the populations that seemed to benefit the most from such interventions were those individuals with externalizing problems (e.g., overt behavioural issues), internalizing problems (e.g., anxiety or depression), and lower levels of self-esteem.

Low self-esteem has been found to especially impact adolescent females (Powell, 2004), and has been associated with many different negative outcomes (see Nassar-McMillan & Cashwell, 1997, Stinson & colleagues, 2008; Searcy, 2007). Moreover, Yalom & Leszcz (2005) noted that the most important inclusion factor for the formation of a successful group is that the client is highly interested and motivated to engage in the particular group.

Group member inclusion criteria. As such, it follows that group inclusion criteria will include: (a) the identification of either an externalizing or internalizing issue, which can be identified by the adolescent, teacher, parent, etc.; (b) the individual needs to be a female between the ages of 15-16; (c) they need to demonstrate a lower level of self-esteem, as indicated by the Coopersmith Self-Esteem School Inventory short form; and (d) they need to self-report as being interested in joining the group and motivated to engage in group work.

Group exclusion criteria/contraindicated members. Yalom & Leszcz (2005) stated that the main method through which group leaders select appropriate group members is through the creation of exclusion criteria. If a potential member does not meet the four main group criteria indicated above, there are several factors that can result in their exclusion from the group. Please see below for a list of exclusion criteria:

- If the adolescent is unable to participate due to an inability to examine their own behaviour, self-disclose or give and receive feedback (Yalom & Leszcz, 2005).
- If the adolescent is in the midst of an acute situational crisis (Yalom & Leszcz, 2005).
- If the adolescent is deeply depressed or suicidal (Yalom & Leszcz, 2005).
- If the adolescent does not think that they will be able to attend regularly, as regular attendance is crucial for the development of a cohesive group (Yalom & Leszcz, 2005).
- If the adolescent is highly defensive, as Corey and colleagues (2010) stated that group therapy may be detrimental for this individual and/or counterproductive to other group members.

Pre-group screening process. According to the ASGW (2007) Best Practices Guidelines “group workers screen prospective group members if appropriate to the type of group being offered” (p. 114) and “group workers identify group members whose needs and goals are compatible with the goals of the group” (p. 114). Based on these guidelines, the co-facilitators of this counselling group will be responsible for completing the screening process for any students that express an interest in joining the group. This can also help to maintain and honour students’ rights to confidentiality, as the group facilitators that complete this initial pre-group screening process are bound by and adhere to the ASGW (2007) ethical guidelines for group

practice as well as the Canadian Psychological Association (CPA) (2001) ethical guidelines for counselling practice.

In addition, this will allow for the group facilitators to respectfully and gently work with those students who, after assessment, are not deemed eligible to participate in this self-esteem based counselling group. Corey and colleagues (2010) stated that a crucial question that needs to be considered in any group screening process is “should *this* particular person be included in *this* particular group at this time with *this* group leader?” (Corey, et al., 2010, p. 115). Please see Appendix D for a detailed description of the Group Screening Process, including information on the rationale for utilizing Coopersmith Self-Esteem School Inventory short form, and information on the reliability and validity of this instrument.

Pre-Group Meeting

Corey and colleagues (2010) noted that is important to spend adequate time orientating group members to the group process, as this increases the chances that a group will be successful. In addition, Hannah (2000) stated that the effectiveness of a group can be increased by spending time before the group starts discussing the expectations that are often inherent to group work. Based on this, the group will have one pre-group meeting, which will be an hour and a half in length, and occur one week before the official start date of the group.

Pre-group meetings can also provide an excellent opportunity for members to meet each other and start to explore what the group has to offer (Corey et al., 2010). As such, this meeting will include all group members. Hannah (2000) stated that the benefits of proper pre-group preparation include: (a) increased effectiveness of group interventions, (b) enhanced sense of empowerment for members, (c) fostered the start of essential group work processes, and (d) provided support for group members in the leaders’ beliefs of the value of the group. For more

information on the content of this pre-group meeting, please see Appendix G to review the Pre-Group Meeting Lesson Plan.

Group Details

To provide readers with a more in-depth understanding of what this actual counselling group will look like, this proposal will now review the group format and structure. Group weekly topics and how the group will be evaluated will be outlined. This section of the proposal will conclude with a discussion of what the post-group meeting will cover.

Group Format and Structure

This is a psychoeducational group following a standard format and structured week-to-week. There will be an emphasis on allowing time for processing the various topics covered and interventions utilized. Each group session will open with an overview of the objectives, as well as connect the prior week's work to the intended lesson plan. A check-in process will take place, offering time to discuss unresolved concerns from previous session, thoughts and feelings from the past week, and will be used to assess mood and emerging issues within the group (Corey, et.al. 2010, p.171). Content will then be delivered, followed by therapeutic activities or discussions. A social break will be provided mid-session. To assist students in transitioning back to the regular school day, the group will close with reflective discussions and attempt to summarize themes, give one another feedback, and address questions or problems (Corey, 2010, p.173). This general structure is adapted from McBride (2006) - A Typical Session Plan. Further, a person-centered art therapy approach to personal integration and reflection will be used to facilitate art therapy activities (Rogers, 2011) and help structure lesson planning. The topics and activities to be explored in each session are covered under the next heading, Group Weekly Topics and Main Tasks.

The intent of group sessions is to cover educational materials aimed at increasing the use of adaptive coping strategies when faced with a variety of challenges. The plan is flexible and will allow time to address any therapeutic issues as they arise. Specific group details can be found in Appendix A.

Group Weekly Topics and Main Tasks

Lesson # and Title	Theme	Main Tasks	
1. Getting to know you	Getting to know group members and facilitators, as well as, develop understanding of the concept of self-esteem	1. Welcome message 2. Icebreakers: -When a “squiggle” Breaks the Ice ¹ -Dyad interviews and partner introduction using art (facilitators to participate in this activity with pre-made art and model this process prior to start) 3. Introduce Group Purpose with Group Discussion: What is self-esteem? Why is self-esteem important?	Stage 1: Forming
2. The Indivisible Self Model of Wellness ²	Learn about the wellness model and identifying personal strengths and weaknesses.	1. Introduce Indivisible Self Model of Wellness: What is meant by the Indivisible Self? What are wellness factors? Why are wellness factors important? 2. Pass out Indivisible You Workbooks 3. Activity: Collage Wellness Factor Wheel 4. Discussion: What are my personal wellness factor strengths? How could I use my strengths to build on weaker wellness factors?	Stage 2: Storming

¹ Tache, A.L. (2014). Ice breaker in art therapy. Retrieved from <http://www.scribd.com/doc/138473124/Ice-Breakers-in-Art-Therapy>

² Myers, J.E., Willse, J.T., & Villalba, J.A. (2011). Promoting self-esteem in adolescents: The influence of wellness factors. *Journal of Counseling & Development*, 89(1), 28-36. doi: 10.1002/j.1556-6678.2011.tb00058.x

3. The Essential Self	Explore personal values using ACT values compass concept ³	<p>1. Discussion: What is cultural identity? What is spirituality? How does culture and spirituality inform our values? What are your personal values?</p> <p>2. Activity: Choose between writing your Epitaph or your Eulogy based on how you would want to be remembered⁴- focus on values</p> <p>3. Discussion: What does it mean to lead a value driven life? What does it mean to be internally motivated vs. externally motivated? How could motivation affect our self-esteem?</p> <p>4. Homework: Aim for the Bull's Eye Activity⁵</p>	Stage 2: Storming
4. The Coping Self- Acceptance	Explore the ACT concept of acceptance ⁶ and relate to theme 2 - personal strengths and weaknesses.	<p>1. Discussion: Acceptance the alternative to control and avoidance. What is acceptance? How does it differ from resignation and feelings of failure?</p> <p>2. Activity: Permission Slips Art Therapy Directive⁷</p> <p>3. Discussion: What was that activity like for you? How was it difficult? How did giving yourself permission feel?</p> <p>4. Homework: Complete the Identify What Can't Be Changed⁸ worksheet in your Indivisible You workbook.</p>	Stage 3: Norming
5. The Coping Self- the difference between FEAR and ACTION.	ACT concept of cognitive defusion, rumination, right and wrong trap, and phishing ⁹	<p>1. Discussion: What is rumination? What is phishing? What is the right and wrong trap? How have you used these negative coping strategies in the past? What is the risk in relying on with using these types of thinking patterns?</p> <p>2. Introduce: the ACT FEAR & ACT concept¹⁰.</p> <p>3. Role play: ACT in action.</p>	Stage 3: Norming

³ Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications Inc.

⁴ *Ibid.*

⁵ Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications Inc.

⁶ *Ibid.*

⁷ Art Therapy. (2014). December art therapy activity- Permission slips. Retrieved from <http://www.arttherapyblog.com/art-therapy-activities/december-art-activity-permission-slips/#.U7hOfu3IXHM>

⁸ Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications Inc.

⁹ *Ibid.*

¹⁰ Russ, H. *The happiness trap: How to stop struggling and start living*. Boston, MA: Trumpeter Publications.

6. The Coping Self-positive thinking	Confidence and positive thinking	<ol style="list-style-type: none"> 1. Discussion: What is self-doubt? What is catastrophizing? What is zooming in on the negative? 2. Role play ineffective coping strategies: Avoidance, Perfectionism, Ineffective Communication 3. What is a “confidence mindset”; What are “give-up thoughts” and “go to thoughts”¹¹? 4. Activity: Role Play- Getting off the Self Doubt Path¹² 	Stage 3: Norming
7. The Coping Self-mindfulness	Learn and practice mindfulness strategies	<ol style="list-style-type: none"> 1. Discussion: What is mindfulness? How does it work? How could mindfulness strategies improve my self-esteem and sense of well-being? 2. Mindfulness Exercise: The Breath of Life, Peel an Orange, Choose Every Step, and Inside and Outside¹³ 3. Mindfulness in Art activity- Create a Mandela 4. Discussion: Were you able to be present in the activities? Did you feel a reduced sense of stress? Could you see yourself using these strategies? Do you have places or activities that make you feel present (walking, sports, hobbies etc...)? 	Stage 4: Performing
8. The Coping Self-mindfulness	Learn and practice mindfulness strategies	<ol style="list-style-type: none"> 1. Activity: <ul style="list-style-type: none"> -Yoga -Compassion Mindfulness Guided Meditation Activity¹⁴ -Mindful art therapy activities- painting to music and the Jar of Thoughts¹⁵. 2. Discussion: What were these activities like for you? Did you struggle with keeping your mind present? What kind of activities could you incorporate in your own life? 3. Homework: Read through mindfulness strategies and ideas in your Indivisible You Workbook 	Stage 4: Performing

¹¹ Fox, M.G. & Sokol, L. (2011). *A cognitive therapy guide to overcoming self-doubt and creating unshakable self-esteem: Think confident, be confident for teens*. Oakland, CA: New Harbinger Publications.

¹² *Ibid*

¹³ Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications Inc.

¹⁴ Living Well. (2011). Mindfulness exercises. Retrieved from <http://www.livingwell.org.au/wpcontent/uploads/2012/11/10-CompassionMindfulness>

¹⁵ Coholic, D.A. (2011). Exploring the feasibility and benefits of arts-based mindfulness-based practices with young people in need: Aiming to improve aspects of self-awareness and resilience. *Child and Youth Care Forum*, 40, 303-317.

9. The Physical Self	Explore body image: coping with negative feelings about our bodies	<p>1. Discussion: What does it mean to self-love for a body’s abilities rather than perceived liabilities?¹⁶ What would this look, feel, and be like for you?</p> <p>2. Activity: Tracings of Love Art Therapy Activity¹⁷</p> <p>3. Discussion: Process activity. What was it like to connect your body with positive messages? What was difficult about this process? How could what you learned today help you cope with negative messages you receive about your body from yourself and others?</p> <p>4. Homework: A thank you letter to my body section in Indivisible You workbook</p>	Stage 4: Performing
10. The Creative Self- personal goals & dreams	Explore goals and connect to theme 3 values	<p>1. Discussion: How can our values inform our goals and purpose?</p> <p>2. Activity: Modified version of the Transformational Self Portrait Art Therapy Activity¹⁸</p>	Stage 4: Performing
11. The Creative Self-	Develop goals and discuss identity: based on ACT concept of life vision	<p>1. Exercise: Vision Plateau¹⁹</p> <p>2. Activity: Modified version of the Transformational Self Portrait Art Therapy Activity continued</p> <p>3. Discussion: Start discussion around saying goodbye.</p> <p>4. Homework: Complete vision section in the Indivisible You Workbook</p>	Stage 4: Performing
12. The Social Self – building positive social networks	Building social networks, family, and community resources	<p>1. Discussion: Connect goals to social network, values, history, and personal strengths. How does this all work together? How does having a sense of these build our self-concept, sense of self-esteem, and purpose?</p> <p>2. Activity: Tree of Life Art Therapy Activity²⁰</p> <p>3. Discussion: Looking at your tree, how do you feel about the person you are becoming? What was it like to do this process?</p>	Stage 5: Adjourning

¹⁶ Art Therapy. (2014). Expressive art therapy technique: Body tracing with love. Retrieved from <http://www.arttherapyblog.com/art-therapy-activities/expressive-art-therapy-technique-body-tracings-of-love/#.U7hKGO3IXHM>

¹⁷ *Ibid.*

¹⁸ Art Therapy (2014). Transformational self portrait art therapy activity. Retrieved from <http://www.arttherapyblog.com/art-therapy-activities/transformational-self-portrait/#.U7gvDe3IXHM>

¹⁹ Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications Inc.

²⁰ Denborough, D. (2006). The tree of life. *The International Journal of Narrative Therapy and Community Work*, 2006(1), 19-51.

13. The Social Self – building positive social networks	Building social networks, family, and community resources	<ol style="list-style-type: none"> 1. Exercise: Identify Like-minded People & Identify and Act²¹ 2. Review: Community Resources Section in Indivisible You workbook 3. Discussion: What have you learned about yourself in the group? What have you learned about others in this group? What have been some of the highlights? Are you planning to keep connected? What does that look like? How will you say you goodbye? 	Stage 5: Adjourning
14. Bringing it together- the Indivisible You	Review wellness factors and discuss ACT concept of commitment ²²	<ol style="list-style-type: none"> 1. Hand in Indivisible You Workbook (to be returned at post-group meeting, with facilitator comments) 2. Activity: Indivisible You Trading Cards and Exchange, based on the Artist Trading Cards concept²³ 3. Discussion: How have you changed as a result of this group? What have been some of the highlights and lowlights? 4. Distribute certificate and personalized token of completion- say goodbye. 	Stage 5: Adjourning

Evaluation Information

Evaluation is an important part of a reflective, professional, and ethical practice. The ASGW Best Practice Guidelines (1998) “encourages group leaders to process the workings of the group with themselves, group members, supervisors, and colleagues” (Corey, et.al., 2010, p. 278). Both facilitators will spend 30 minutes following sessions debriefing and evaluating, which will be evaluated by supervisors. The group facilitators will also engage in ongoing weekly feedback evaluation with group members. At the end of each session group members will be asked to fill out a weekly feedback evaluation form (see Appendix L). This process will be used to identify how participants are feeling about the process and identify the possible need to adjust upcoming sessions or to deal with emerging problems. A final evaluation form (see Appendix M) will be used to gain information regarding the group members’ overall experience.

²¹ *Ibid.*

²² *Ibid*

²³ Artist trading cards: A collaborative cultural performance. (2014, July 5). Retrieved from <http://www.artist-trading-cards.ch/>.

Several standardized tests will also be used to evaluate the effectiveness of the program. They will be completed during the pre-and-post group meeting. They can be used to identify program efficacy, to access further funding, to ensure objectives are being met, and to monitor participant progress. Details regarding these assessments are provided in the Proposed Group Program section of this paper and Appendix B (Assessment and Materials Information).

The group assessment results used in this program and the anonymous group members' feedback will be compiled at the end of the sessions, and submitted as a final report to the group facilitators' supervising body. Participants identifying information in regards to the assessments used will be removed to provide anonymity and respect their confidentiality. This information will be used to assess for the need to make any adjustments in programming and/or continued group offerings.

Post-Group Meeting

Group therapy can be an intense process and requires debriefing to ensure that participants are coping well without the support of the group (Corey, et. al., 2010). Also, a follow-up meeting can provide the time needed to complete post-group assessments and evaluation. These types of assessments and evaluations are essential in demonstrating the effectiveness of group therapies, as well as providing facilitators with invaluable feedback about the participants' experience (Corey et al., 2010).

The information gained from post-group assessments and evaluations can also be used to keep facilitators accountable and to adjust format and structure for future groups. Moreover, post-group meetings can provide participants with an opportunity to express any regrets, and may reduce any psychological risks involved in group therapy (Corey et al., 2010). A follow up meeting is also recommended in the best practice guidelines of the ASGW, as they recommend

that “follow-up contact with group members [is] appropriate to assess outcomes” (Corey, et.al, 2010, p.279). Please see Appendix H to view this group’s post-group meeting lesson plan.

Ethical Issues in Group Work

Corey, Corey, and Callanan (2011) stated that group facilitators face unique ethical issues that differ from those encountered in the individual counselling setting. As such, even though group facilitators should already adhere to a code of ethics that governs the way they conduct themselves in individual counselling settings, they should also adhere to a code of ethics designed specifically for engaging in group work (e.g., The Association for Specialists in Group Work or American Group Psychotherapy Association). The authors of this paper adhere to both the Canadian Psychological Association (2001) and the Association for Specialist in Group Work (2007) code of ethics.

According to Corey and colleagues (2011) ethical concerns common to a group counselling setting include: (a) training of group leaders; (b) co-facilitation issues; (c) group membership issues; (d) confidentiality; (e) role of group facilitator values; (f) uses of group interventions; (g) dual roles; and (h) issues surrounding consultation, referral, and termination. Please see the Group Screening Process (Appendix D) for a discussion of how ethical issues surrounding group membership and referral will be handled, and see the Informed Consent Form for Group Counselling (Appendix E), as it covers confidentiality, use of group interventions, termination from the group, and consultation.

As there may be some unavoidable dual roles due this group occurring in a school setting and being facilitated by a teacher-counsellor, please see the Exploring Dual Relationships (Appendix L) for a detailed discussion of how dual relationships will be handled. Important to

note is that all of the different roles that these group facilitators may have to take will be clearly outlined and discussed with group members at numerous points throughout the groups process.

The following section of this proposal will discuss how the facilitators of this group will handle co-facilitation issues, sub-groups, and cover the training guidelines these facilitators will adhere to. Please note the training guidelines section will explore the impact of the facilitator's values on the group.

Co-facilitation Issues

Corey and colleagues (2011) stated that co-facilitating counselling groups can result in many positive benefits, such as different insight into what is occurring in the group dynamic and how to proceed, sharing of group responsibilities, modeling new behaviours to members, and providing each other with support throughout the process. Moreover, Breeksin (as cited in Kivilighan, Miles, & London, 2012) noted that in individually led counselling groups the facilitator cannot possibly keep up with all that is occurring, and that important non-verbal signals of members may be missed. However, co-facilitation of groups can also have some disadvantages, which primarily involve relationship difficulties between members, such as ineffective communication, competition between leaders, and overdependence on one leader (Corey & colleagues, 2011). Kivilighan and colleagues (2012) also discussed the risk of competition and the modeling of unhealthy relationships between co-facilitators occurring.

To ward against the development of any ethical issues arising in regards to co-facilitating this counselling group, these authors will set aside 30 minutes after each group session to discuss what has occurred in each group session, their reactions to one and another, and their perceptions of areas of strengths and weaknesses as group facilitators (Corey et al., 2011). Furthermore, the ASGW (2007) and Corey and colleagues (2011) noted the importance of engaging in regular

supervision as part of ethical group counselling practice. As such, both authors of this group will also engage in supervision sessions focused on their co-facilitation style, and in the event that a conflict does emerge, seek immediate supervision to resolve this conflict before the next group session.

Sub Groups

Sub-groups are an important topic to address in the school setting, as many group members may also have prior relationships due to being in the same classroom, or develop relationships and start to spend additional time together during breaks at school. Gumpert and Black (2006) discussed how, although, many group practitioners identified sub grouping as an ethical issue, there are social work models that actually encourage such relationships outside of the group counselling setting. If the goals of the sub group mesh with the overall goals of the group, sub groups can actually enhance group cohesiveness (Yalom & Leszcz, 2005). However, sub grouping can represent hostility toward the group or group leaders, or be indicative of problem(s) in a group's development (Yalom & Leszcz, 2005).

While sub grouping can have both detrimental and positive therapeutic effects, Yalom and Leszcz (2005) stated that it is not the subgrouping itself that often destroys group progress, but how that subgrouping is addressed or not addressed. Yalom and Leszcz (2005) recommended that the best way to address sub groups is to openly discuss and address these situations with all group members. Moreover the ASGW (2007) noted that group leaders have the responsibility to openly discuss with members the implications of group member contact and involvement outside of the group setting.

Group Facilitator Training Guidelines

The ASGW (2007) noted that group counselling practitioners need to have completed a

core group training component. Both of these authors are in the process of taking “Group Counselling and Process Skills” as part of their Master of Counselling program. Furthermore, the ASGW (2007) stated that group workers recognize that engaging in ethical practice requires continual professional development, training, and supervision. Both of these authors will be supervised (see Appendix A and Appendix E for more information) throughout the duration of this counselling group, and will only utilize interventions in this group that fall within their level of competence.

In addition, part of ethical group practice (or any counselling practice) is actively engaging in self-reflection, and being aware of one’s values and how they may impact interactions with other group members, co-facilitators, and the interventions selected (Corey et al., 2011). Part of the supervision process that these authors will be engaged in will involve discussing their reflections on how their values may be impacting the group counselling process. Both group facilitators are also committed to seeking out their own personal therapy, if issues arise during the group duration that would be more appropriately addressed via this route. Corey and colleagues (2011) stated that personal therapy can enhance group trainees’ ability to recognize countertransference, blind spots, and biases. Personal therapy can also help to increase group therapists abilities to understand themselves and other group members, and to more effectively utilize their personal attributes in a group setting (Corey et al., 2011).

Concluding Statements

Adolescence is a time where individuals are increasingly thinking about who they are and who they want be (Powell, 2004). During this crucial developmental period, there can be many assaults on one’s self-esteem (Powell, 2004). Through utilizing the wide range of evidence-based interventions in designing this group program (e.g., mindfulness activities, expressive arts

activities, cognitive-behavioural/acceptance commitment therapy activities), it is these authors hope that we can help equip these adolescent female group members with the knowledge, understanding, and skills to continue on into adulthood with a strong sense of self and high level of self-esteem.

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Appendix A: Structure and Organization of the Group

Group Purpose and Target Population:

Adolescence is a time that is often characterized with low self-esteem and identity conflict, particularly for females (Powell, 2004). As such this group is targeted for 15 to 16 year old, females who are experiencing a lower level of self-esteem as identified by the Coopersmith Self-Esteem School Inventory Short Form. The purpose of this group will be to provide these adolescents with a safe, caring environment in which to explore the concept of self-esteem and explore their own identity development.

Type of Group:

This group will be a closed group and include anywhere from 6-8 members. The group will run for 14 weeks and each session will run for three hours. The group is structured using an evidence-based model of wellness, called the “Indivisible Self” as discussed by Myers, Willse, and Villalba (2011). Interventions that will be used draw from a variety of therapeutic models, including mindfulness based cognitive behavioural therapy, acceptance and commitment therapy, and expressive arts.

Expectations for Group Members:

Group members will be expected to adhere to some basic group rules. Group members will be given the opportunity to expand and/or personalize these rules during the pre-group meeting (see Appendix G). Please see Group Rules (Appendix F) to review the basic group rules that will be distributed and discussed with group members.

Prep and Debriefing Time for Facilitators:

Group Facilitators will meet 30 minutes before the start of each group session to review the lesson plan for that session and organize any material that will be used. The facilitators will then meet for 30 minutes after each session to debrief and complete documentation. Examples of the debriefing questions that will be used are:

“What stood out for you the most in this session in regards to work done by members? What stood out for you the most in regards to strategies or interventions I (the co-facilitator) used? What do you perceive as one success of this group session? What was one thing that you think we could have done better?”

Facilitation Information:

This group will be co-facilitated by two female counsellors. At the very minimum, group facilitators need to have taken a training course specific to group counselling and adhere to a code of ethics specific to group counselling. These group facilitators will have completed a group counselling course (i.e., Group Counselling and Process Skills) prior to running this group, and will strictly adhere to the ethical guidelines of the Canadian Psychological Association (2001) and Association for Specialists in Group Work (2007). Both facilitators will engage in

supervision during the groups' duration. They will also engage in personal counselling if issues arise that would be better dealt with in an individual counselling setting. In the event that one facilitator is unable to attend a session, group members will be contacted via telephone and an additional session will be scheduled.

Learning Diversity:

There are a wide range of learning styles (e.g., auditory, visual, kinesthetic) and preferences on type of learning environment (e.g., individual activities versus partner activities). As such, this group will incorporate a wide range of activities that are aimed at meeting the needs of the different learning styles and preferences of the group members. Throughout the 14 week group there will be interventions that participants are asked to complete by themselves, with a partner, in small groups, and as a whole group. In addition, there will be some activities that involve art making (expressive arts component), moving around the room (role playing activities, yoga), self-reflection, mindfulness based cognitive behavioural therapy, and Indivisible You workbook tasks.

Multicultural Diversity:

Part of engaging in ethical group counselling is being aware of, acknowledging, and incorporating discussions of multicultural diversity into group counselling sessions (ASGW, 2007). Some specific ways in which the co-facilitators will incorporate discussions of multicultural diversity into this group and remain attuned to how cultural diversity may be impacting group processes are:

-The pre-group session includes an exercise where members are asked to write down one word that describes what it means to them to feel supported or accepted. The facilitators will then read these words and facilitate a discussion of the different meanings/backgrounds that members attribute to what they need to feel supported and accepted.

-When discussing the basic group rules, these facilitators will incorporate a discussion of the different ways of behaving and rules that members have at home.

-Session one will include a discussion among members about the similarities and differences that the group members and facilitators bring with them into the group.

-In session three of this group, we will talk about the role of culture and spirituality in value formation.

-In session 12, we will do an activity built around the role of family and family values in building a concept of self.

-Both facilitators will spend time during debrief and supervision sessions, reflecting on and discussing how their own cultural backgrounds may be impacting their understanding of group members and interventions they are selecting.

Supervision:

Both facilitators will be supervised throughout the duration of this group (please see the Informed Consent for Group Counselling Document, Appendix E, for supervisor names and qualifications). The group facilitators will see their supervisors for a total of two hours per week. Twenty minutes (or more when required) will be spent discussing group counselling specifically. Compensation for this supervision will be provided via an honorarium paid by the University of Lethbridge directly to these supervisors. The honorarium payment will be processed in two different payments, upon each successful completion of the two practicum components these group facilitators will be completing while running this group.

Fees:

Group members will not pay any fees to join this group, as it will occur on school property. Any fees that arise during the duration of the group (e.g., art supplies required and fees to purchase and administer the assessments will be covered by accessing the appropriate school funding). For a list of specific costs attached to the assessment tools and materials, see Appendix B.

File Notes:

File notes will include: the file note template (see Appendix I), the program brochure, the informed consent for participation, assessment results, and records of external communication. File notes for participants will be kept in their school-counselling file, located in a locked cabinet in the school counselling office. File notes will be completed and signed by both facilitators.

Location and Room Set Up:

Group sessions will be held in the Breakout Room at the applicable school. Sessions will be held during the regular school day. Seating to form a circle will be set-up, as well as, art tables and materials as needed.

Drop Out Policy:

Participants will be asked to attend for at least three sessions before making the decision of whether to not to continue in the group. Participants will be asked to give at least one week's notice prior to leaving the group.

Resources used in Creation of this Counselling Group:

The main set of activities cited in this program and models referred to have been taken from the following resources:

- Coholic, D.A. (2011). Exploring the feasibility and benefits of arts-based mindfulness-based practices with young people in need: Aiming to improve aspects of self-awareness and resilience. *Child and Youth Care Forum*, 40(4), 303-317.
- Fox, M.G. & Sokol, L. (2011). *A cognitive therapy guide to overcoming self-doubt and creating unshakable self-esteem: Think confident, be confident for teens*. Oakland, CA: New Harbinger Publications.
- Myers, J.E., Willse, J.T., & Villalba, J.A. (2011). Promoting self-esteem in adolescents: The influence of wellness factors. *Journal of Counseling & Development*, 89(1), 28-36. doi: 10.1002/j.1556-6678.2011.tb00058.x
- Rogers, N. (2011). *The creative connection for groups: person-centered expressive arts for healing and social change*. Palo Alto, CA: Science and Behaviour Books.
- Strosahl, K.D. & Robinson, P.J. (2008). *The mindfulness & acceptance workbook for depression: Using acceptance & commitment therapy to move through depression & create a life worth living*. Oakland, CA: New Harbinger Publications.

Appendix B: Assessment and Materials Information

Budget:

Assessments available through Mind Garden

Coopersmith Self-esteem School Inventory Short Form (CSEI-SF) (1967)	50 for \$100.00 (\$32/grp)
Coopersmith Self-esteem School Inventory Manual (2002)	\$40.00
Ways of Coping Questionnaire (WAYS) (1988)	50 for \$100.00 (\$32/grp)
Ways of Coping Manual (1988)	\$40.00
Wellness Evaluation of Lifestyle (WEL) (2001)	50 for \$100.00 (\$32/grp)
Wellness Evaluation of Lifestyle Manual	\$40.00
Self Compassion Scale (SCS) (2003)	FREE²⁴
	<hr/>
	Initial Cost \$420.00
	(\$96.00 for subsequent groups)

Materials:

Art supplies (priced through Dick Blick Art Materials)	
Sargent Art Childrens's Assorted Taklon Brushed * 8 @ \$3.27	\$26.16
Sargent Art colored pencils 50 set * 2 @ \$6.99	\$13.98
Sharpie set of 24 colored markers * 3 @ 15.30	\$45.90
Blick Pastels set of 12 * 4 @ \$4.69	\$18.76
Blick studio drawing pencils(8 in set) 4 @ \$8.55	\$34.20
Sargent Art Watercolor class set 1 @ \$8.99	\$8.99
Blick Tempura Paints 6 pack pints 2 @ \$13.99	\$27.98
Higgins Eternal Ink 2 @ \$2.93	\$5.86
Art supplies (priced at Michaels)	
Assorted colored cardstock 3pack for \$11.00 * 2	\$22.00
Paper from general school supply	no COST
Scissors, glue, and paper cutting services	no COST
School photocopying services	no COST
	<hr/>
	Initial Cost \$203.83
	(no new materials needed for several subsequent groups)

²⁴ Neff, K.D. (2003). Self Compassion Scale (SCS) permission for use. Retrieved July 10th, 2014 from http://www.self-compassion.org/Self_Compassion_Scale_for_researchers.pdf.

Other:

Kleenex * 4boxes @ \$3/ box

\$12.00

Food for final party:

\$50.00

Cost: \$62.00

Shipping and Handling: \$25.00

Subtotal: \$710.83

GST: \$35.54

INITIAL TOTAL COST: \$710.83

Subsequent groups: \$158.00

Coming this Spring to Westminster School

THE INDIVISIBLE YOU:

EXPLORING IDENTITY AND BUILDING SELF-ESTEEM



COUNSELLING GROUP FOR 15 AND 16 YEAR OLD FEMALE STUDENTS

Do you ever feel like you are just not good enough? Do you ever have feelings of worthlessness? Do you struggle with criticizing yourself? Do you feel like you don't really know yourself or have purpose?



AN EXPRESSIVE ART THERAPY & MINDFULNESS PROGRAM

Join the group and build your self-esteem, explore your identity, and start feeling good about who you are.

This therapeutic group will involve engaging in expressive art therapy activities, mindfulness training, and a chance to connect and work with the support of counsellors and your peers.

Please contact Beth or Kat in your school counselling office for more information. Come in person to Room 101 or call 403-555-1111.

This is a free program offered through your school district.

Appendix C: Marketing Poster: Proof of Purchase of Image used in Marketing Poster

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RECEIPT
Order ID:
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Katherine Coleman 73 Mt. Rundle Blvd W Lethbridge, Alberta T1K 7J2 Canada	
Username: colespat	

Date	Credit Card	Terms
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Appendix D: Group Screening Process

Duration, Location, and Screening Facilitators:

The pre-group screening process will take approximately one to one and a half hours and be completed in the same location where the group will be held, at the group members' school. Each potential group member will be screened on a one-on-one basis with both of the co-leaders, as recommend by Corey and colleagues (2010). This will allow for both group leaders to see how the students respond to them, which can provide some insight into how this student may be in a group situation (Corey et al., 2010).

Assessment of Externalizing or Internalizing Issues and Contraindicated Members:

If the student has been referred by a teacher, parent, etc., due to exhibiting either an internal or externalizing issue that criteria will have been met. If they have self-referred, then the group leader will conduct an informal assessment looking for internalizing or externalizing concerns that the student may have. Examples of questions that could be asked are:

- If you could pick an emotion that you experience the most often, what would that be?
- Tell me about a situation, if you can think of one, where you felt x emotion?
- How do you usually act when experiencing x emotion?
- Are there any situations where feeling this emotion and acting this way has gotten you into trouble with anyone?

This line of questioning will also be used to identify any members that might be contraindicated for this group. We are looking to see if they:

- Are unable to self-disclose and examine their own behaviour
- Are highly defensive
- Deeply depressed or suicidal
- Are in the midst of an acute situational crisis

The group leaders will ask about the student's ability to regularly attend the group and go over the importance of regular attendance, as well as provide the student with the group brochure (see Marketing Section in the main body of this proposal).

Assessment of Age and Sex Criteria:

As the group marketing poster (see Appendix C) will identify clearly the age and sex that this group is targeted for, no further assessment should be needed. In the case that a student expresses interest in attending who is 14 or 17 (one year below of above the targeted age group), and they meet the other criteria, they will be able to join group. According to the ASGW (2012) Multicultural and Social Justice Competence Principles group workers need to be able to “determine if group membership needs to be expanded or altered to allow for a greater level of connection and support for group members who are isolated in the group due to one or more dimensions of multicultural identity of experience” (p. 5). We do not want to prevent any students that have late birthdays or were held back a year from joining this group.

In addition, if other situations arise in which special consideration needs to be given to allowing students to join the group that do not meet some of the screening criteria, the CPA (2001) ethical decision making process will be used, and principles outlined by both the ASGW (2007, 2012) and the CPA (2001) will be considered. Corey and colleagues (2010) stated that a crucial question that needs to be considered in any group screening process is “should *this* particular person be included in *this* particular group at this time with *this* group leader?” (p. 115). Moreover, an “ideal group should contain a variety of resources, worldviews, and behavioural skills” (p. 115), and that a diverse group can allow for the examination/exploration of stereotypes and misconceptions that members may have about one and another/different cultural backgrounds (Corey et al., 2010).

Assessing Level of Self-Esteem:

To assess a potential group members' level of self-esteem the student will complete the Coopersmith Self-Esteem School Inventory Short Form. While this instrument is usually used in individuals ages eight to 15, it has also been used in a school setting for individuals up to the age of 19 (Hurz, & Gullone, 1999). The Coopersmith Self-Esteem School Inventory Short Form is an assessment containing 25 questions, that takes roughly 20 to 25 minutes to complete, and is designed to measure attitudes towards self across multiple contexts (Peterson, 1981). These contexts include evaluative attitudes towards self in social, academic, family, and personal areas (Mind Garden, 2014). The school which offers this counselling group will be responsible for purchasing this assessment tool.

There have been high levels of reliability (internal consistency data by KR 20 ranging from .87 to .92 from studies including grades 4 to 8) documented and an impressive amount of information supports the construct validity of this instrument (Peterson, 1981). However, as self-esteem is a hard construct to measure and there are varying definitions of self-esteem in the literature, Peterson (1981) stated that caution needs to be taken if using this instrument as a diagnostic tool. Therefore, the main purpose of this instrument will be to collect pre-and-post evaluation data, as well as provide a tentative measure of individual self-esteem for group admission purposes. The cut-off score for students to be classified as exhibiting a lower level of self-esteem will follow the guidelines laid out in the Coopersmith Self-Esteem School Inventory Short Form manual.

Assessing Interest in Group and Motivation to do Group Work:

This portion of the pre-group screening process will involve asking open ended questions to assess the student's actual interest in the group and their motivation to engage in group work.

Examples of Questions include:

- Tell me a little bit about what you think this group is about
- Tell me about what made you want to join the group
- Tell me about what you hope to get out of this group
- How do you feel about sharing some of your thoughts, feelings, and experiences with other group members?
- If another member has a different opinion than yours, how might you handle this?
- There will also be time left at the end of the pre-group screening process for students to ask the group leaders any questions that might have at this point.

How to Proceed with Members who are not eligible for the Group:

Any students that do not meet the inclusion criteria/do meet the exclusion criteria, will be told why they do not meet this criteria by stressing how the group may not be an appropriate fit for them, as recommend by Corey and colleagues (2010). This information should relayed in a manner that is direct, open, honest, and, respectful, and time should be spent with the student processing his/her reactions to not being eligible for this group (Corey et al., 2010). Furthermore, these students will be provided with other options that will better meet their needs and assistance should be given in accessing these other options if necessary (Corey et al., 2010).

Appendix E: Informed Consent Form for Group Counselling

Informed Consent Form for Group Counselling²⁵ (Information for Participants and their Families)



Welcome to Indivisible You: Exploring Identity and Building Self-Esteem! To give you a better idea of what you can expect from your participation in this group, we have included the following informed consent information:

Purposes and goals of this group

- To provide a safe atmosphere to work on self-esteem, self-worth, and personal identity issues.
- Provide an opportunity for you to hear other group member's stories and thereby promote the realization that you are not alone regarding your experience.
- Provide an opportunity to help yourself by helping others, specifically by participating in therapeutic exercises and interventions that are pertinent to these common experiences.
- Expose some myths and engage in activities to improve sense of self-esteem, self-worth, and wellness.
- Foster each member's participation as a means and resource for building community and social connection.
- Provide the opportunity for personal growth and insight.
- Encourage you to build healthy relationships, have a positive sense of identity, wellness, and self-worth.

Group Interventions

During group a variety of group processes/interventions will be utilized. Some of these processes/interventions will include large and small group sharing, role playing, the use of art therapy activities, CBT therapies, and mindfulness training.



Confidentiality in a Group Setting

In order to create a therapeutic environment, it is important that **confidentiality** be ***maintained at all times***. Confidentiality means that what **is shared in the group stays with the group**. While you are more than welcome to share with others your own

²⁵ Information used in the creation of this consent form has been taken from the following: First Light Counselling. (2014). Informed consent-group counseling. Retrieved from http://www.cbcmckinney.com/forms/consent_groups.pdf; The Center for Ethical Practice: Continuing Education & Resources for Mental Health Professionals. (2014). Adolescent informed consent form. Retrieved from <http://www.centerforethicalpractice.org/Form-AdolescentConsent>; and Kewley, Erika & McBride, Dawn (2013). Minor counselling consent form.

thoughts, experiences, and goals in regards to the group, you need to ensure that you **do not repeat anything** that others share in the group outside of the group setting.

Confidentiality Specific to Children and Adolescents:



- 1) Counsellors who work with children and adolescents have the difficult task of protecting the minor's right to privacy while at the same time respecting the parent's or guardian's right to information.
- 2) Therapy is most effective when a trusting relationship exists between the counsellor and the child/adolescent. Privacy is especially important in securing and maintaining that trust. It is often necessary for children to develop a **"zone of privacy"** whereby they feel free to discuss personal matters with greater freedom. This is particularly true for adolescents who are naturally developing a greater sense of independence and autonomy. It our policy to create this zone of privacy in a group setting, this means that only very general information will be shared with parents in regards to your child's progress in this group, with the child's permission. An exception to this (in addition to the regular limits of confidentiality) is if we become aware of any situations that could endanger your child. Please feel free to contact either of the facilitators of this group if you have any questions or concerns regarding this policy.

For more on Confidentiality and its Limits: Please refer back to the main informed consent for counselling form.

Some Benefits and Risks in Group Counselling



As already dicussed in the main counselling consent form, counselling can have benefits and risks. Since therapy often involves discussing unpleasant aspects of one's life, you (your child) may experience **uncomfortable feelings** like sadness, guilt, anger, frustration, loneliness and helplessness. On the other hand, counselling has been shown to have benefits for individuals who go through it. Therapy can lead to **better relationships, solutions to specific problems, significant reductions in feelings of distress, and improved self-esteem**. But there are **no guarantees** of what you (they) will experience. Together you (your child) and other group members will work to achieve the best possible results for yourself (him/her). Due to the group setting, there is the **risk of breach of confidentiality** by other group members. If have any concerns regarding changes in your own feelings/behaviours (that of your child's) or think that there has been a breach of confidentiality, you are **encouraged to approach the group leader(s) or their supervisors**.

Some Roles and Responsibilities of Group Leaders and Members

It is the responsibility of the group leader(s) to treat each member with respect and to maintain confidentiality. You are encouraged to participate to the best of your ability. Additionally, you are asked to show mutual respect to the group leader(s) and other members of your group. Again, remember ***what other members share in the group, stays in the group.***

You Have Rights!!!

-While we encourage all members to participate in the group and try out the different activities, you ***do not have to do anything*** that you do not want to.

-You also have the right to ***reveal as little or as much*** as you want to.

-You have the ***right to feel safe*** throughout the group counselling process, if something happens that does not make you feel safe please let the group leaders, your parents, or the group leaders supervisors know.



Your ***presence in this group is highly important.*** If you are ***absent*** from the group this ***can negatively*** affect the experience of you and other group members. Therefore, your facilitators ask that you make ***attendance a top priority!***

It is understood that occasionally you may not be able to attend, due to circumstances beyond your control. If this happens, ***please contact your facilitator(s)*** before group begins let them know you will not be present.

It can often take ***several group sessions for members to "settle in"*** and start to receive the benefits that a counselling group can provide. As such, we ask members to try to attend for ***at least three sessions*** before making the decision of whether or not to continue in the group. In the event that you do decide to leave the group we ask that you give the facilitators at least one week's notice.

Ethical Standards:

In conducting groups, we adhere to the *Canadian Psychological Association Code of Ethics* and the *Association for Specialists in Group Work*.

Supervision and Addressing Group Leader Concerns

Counsellors need to ***consult with other colleagues*** from time to time in order to gain assistance and insight in providing quality and helpful service. In order to

maintain professionalism counsellors may also be **supervised by other counsellors**, which the leaders of this group are. Regardless of the situation, every effort will be made to retain as much confidentiality of the group members as possible. Supervisors and colleagues are bound by the same limits to confidentiality as the group leaders. If you have any concerns regarding the way the leaders of the group conduct themselves, and do not feel comfortable addressing the leader(s) directly, please contact the applicable supervisor. Please see below for group leader and supervisor qualifications and contact information.

Leader and Supervisor Qualifications and Information:

Katherine Coleman:

Pending Master of Counselling: University of Lethbridge (confirmation 05/2015)
Bachelor of Education: University of British Columbia, 2008
Bachelor of Arts: University of Lethbridge, 2002

Supervisor: Kyler Evans

Qualifications: Canadian Counsellor Certified
Phone: 403-795-3280 or Email: arisingphoenixtherapy@gmail.com

Beth Mills:

Pending Master of Counselling: University of Lethbridge (confirmation 05/2015)
Bachelor of Arts: University of Lethbridge, 2008

Supervisor: Erin Musick-Neily

Qualifications: Registered Psychologist
Phone: 403-942-0452

Obtaining Parental Consent (*please check one*)

Parent has sole custody and sole guardianship and can only give consent. One parent has sole custody who can give consent and the other parent has sole guardianship

Parents share joint custody and one parent has sole guardianship. Either can give consent however consent from both parents is preferred.

One parent has sole custody but both parents share joint guardianship. Custodial parent has final consent.

Parents share joint custody and joint guardianship. Either custodial parent can give consent however consent from both parents is preferred.

Although I have the legal write to request to see the written records of my child's group counselling sessions, I agree **not to request to see these records** in order to help in the creation of a 'zone of privacy' for my child:

Parent or Guardian Signature: _____ **Parent or Guardian Signature:** _____

Obtaining Parental Consent and Child Assent:

Please Print Your Name _____ **Telephone #:** _____

Your Parent or Guardian Name(s) _____

Telephone #: _____

Child assent to participate in group: I have read all of the information in **The Indivisible You: Exploring Identity and Building Self-Esteem Informed Consent for Group Counselling Form**, understand the information, and agree to the terms of group participation.

Your Signature: _____ **Date:** _____

Parental Consent: I have read all of the information in **The Indivisible You: Exploring Identity and Building Self-Esteem Informed Consent for Group Counselling Form**, understand the information, and agree to let my child participate in the group.

Parent Guardian Signature(s):

_____ **Date:** _____

_____ **Date:** _____

Appendix F: Group Rules²⁶

All members of the **Indivisible You: Exploring Identity and Building Self-Esteem** group will be expected to follow these basic ground rules:

- Turn off your cell phones before entering the group session.
- Attending all sessions is very important. If you are going to be absent from the group, please give the group leaders as much warning as possible (see group counselling consent form for the group leaders contact information).
- It is important that everyone in the group gets a chance to talk and share their experience, please keep this mind when you are sharing with the group.
- It is your right as a group member to feel safe, respected, and listened to by other group members, and they also have the right to feel the same way. Please keep this in mind when speaking and listening to others in the group.
- It is absolutely essential that what is said in the group stays in the group! This is what it means to keep information confidential. Please see the informed consent individual and group counselling documents for more information on this.
- Members are asked *not* to engage in judgments or ridicule of one another.
- Members are asked to try their best to stick with the topics being discussed in the group sessions.
- It is important that members do not engage in side conversations or interrupt when another member is talking.
- All members of this group are asked to take an open attitude to the different perspectives, opinions, and experiences shared in the group.
- Members will work together to explore self-esteem and their own identity in a helpful, respectful manner, which involves following the above guidelines so that a safe and cohesive group environment can be created.

²⁶ Many of the ideas used in the creation of these basic group rules were taken from: Chen, M., & Rybak, C. (2004). *Group leadership skills: Interpersonal process in group counseling and therapy*. Toronto, Ont: Thomson Nelson. Appendix A (pp.383-385): Sample group proposal- Personal growth group for adolescents in sudden transition.

Appendix G: Pre-Group Meeting Lesson Plan²⁷

Lesson Title: Indivisible You: Exploring Identity and Building Self-Esteem Pre-Group Meeting

Facilitators: Katherine Coleman & Bethany Mills

For Lesson Rationale: Please See the Proposed Group Program section of this proposal.

1. **Curriculum Guide:** Health Program of Studies (Alberta Education, 2002)
7.2 analyze the need for short-term and long-term support for emotional concerns; e.g., family, friends, schools, professionals 7.9 develop group goal-setting skills; e.g., collaboration; 8.9 describe the characteristics of, and demonstrate skills of, an effective leader and group member

2. Learning Outcomes/ Lesson Objectives: (Indicate Knowledge, Skills, Feelings, Beliefs, Behaviours):

The Participant Will Be Able To:	Assessment:
S Identify supportive group behaviours	Listen for verbal evidence of understanding
K Describe different roles within a therapeutic group	Same as above
S Is able to express ideas in dyads and group	Listen for comment and note in case notes
F Can express basic feelings	During animal activity, participant connects to personal feelings

3. **Application:** Participants will begin to understand group process and then be able to decide if they will continue with the sessions.

4. **Lesson Materials and Technology and Resources:** 10 copies of Coopersmith Self-esteem Inventory Short Form (CSEI-SF; Coopersmith, 1981), Ways of Coping Questionnaire (WAYS; Folkman & Lazarus, 1988), and the 26-item Self-Compassion Scale (SCS; Neff, 2003), and the Wellness Evaluation of Lifestyle- 5F-WEL (Myers & Sweeney, 2005). 10 handouts and water/juice.

5. **Opener (Lead In / Hook, Pre Assessment, Intensive Review / Retroconnective):**
Participants will be welcomed by leaders and given a brief overview of the plan & purpose of the post group session.

²⁷ The creation of this pre-group meeting lesson plan is based on information taken from: Hannah, P. (2000). Preparing members for the expectations of social work with groups: An approach to the preparatory interview. *Social Work With Groups*, 22(4), 51-66. doi: 10.1300/J009v22n04_05

6. **Advance Organizer:** This is opening session to a 14-week group therapy program. Participants have been pre- screened, prior to attending. The next time we meet it will be the first session for the group.
7. **Seating Arrangement:** Sit in circle formation.
8. **Summary, Closure, Forward Connective:** Discuss Risks and Benefits of group therapy and the close with a wind down activity- If I were an Animal
9. **Key Questions:**
 - What is self-esteem? What is meant by mindfulness? What is expressive art therapy? What is meant by here and now?
 - What are the collective process goals?
 - What are the benefits and risks of group therapy?
 - What is the role of a group member and leader?

Learning Activities Summary:

WHAT THE GROUP LEADER DOES		WHAT THE PARTICIPANTS DO
5 MIN	1. Overview: Leader will discuss the objectives and agenda for this group meeting (i.e., to review the purpose and nature of the group, talk about what members can expect from the group process, discuss members’ and facilitators’ rights and responsibilities, talk about confidentiality, and spend time answering any questions members might have).	Participants are listening and asking questions.
10 MIN	2. Leader will discuss the Roles of Group Members and Facilitators: It will be important to discuss the role of group facilitators (e.g., highlight that it is different than that of a teacher) as well as the roles and expectations of group members (e.g., to participate in the group, to attend regularly, to have their cell phone turned off during the group, etc.). This could be done through using a chalkboard or flip chart and asking members to identify (or write down) words that come to mind when they think of the terms “group facilitator” and “group member”.	Participant are listening to information and participating in flip chart activity.
15 MIN	Leader will discuss Commitment to the Group and its Work: Discuss what self-esteem is and provide a brief overview of the purpose of using mindfulness, CBT, and expressive arts interventions to explore members’ self-esteem. Briefly overview the different types of groups and define the purpose and nature of a psychoeducational group. Have the members break into facilitator selected pairs and share one past group experience that they have had, what they liked and what they did like about this experience. Then have each member write down one goal they have for this group (they do not need to write down their name on this paper) and place it in a box that gets passed around.	Participants are listening for information and sharing in AB partners. Participants are writing down goals.

10 MIN	<p>Leader will explore the Collective Process Inherent Group Work as well as Group Rules: One group facilitator will then read these goals, and help to facilitate a discussion of how each of these goals tie into what will take place in this self-esteem based group. Building off of this discussion, group facilitators will discuss confidentiality, the importance of attendance, respecting different opinions, understanding how culture plays a role in our transactions styles, discuss group rules, and the value of being open and honest throughout the group process.</p> <p>Leader will ask participants if there are any other group rules they would like to add.</p>	<p>Participants are listening for information. & responding to question.</p>
10 MIN	<p>Leader will discuss Here and Now Experiences: Explore with the members how their interactions within the group can provide them with a safe space to practice new behaviours and ways of expressing themselves outside the group. One activity could be to ask members to put their heads down and close their eyes, then ask them to put up their hand if they “ever wished they had acted a different way or said something different to somebody?”, “if they ever felt that you did not know how to act or what to say in a social situation?”. The facilitators could then ask the members to think about how it felt to raise or not raise their hand to these questions. Afterwards, the facilitators would discuss how one purpose of this group is to practice new behaviours/ways of thinking and process what members are feeling right as it is happening for them in the group setting.</p>	<p>Participant are listening for information, hand raising activity.</p>
15 MIN	<p>Leader will highlight the importance of Mutual Support and Acceptance: Ask the members to write down one word that comes to mind when thinking about being supported or accepted, and then ask them to place that piece of paper in a box. Based on these words, the group facilitators will facilitate a discussion of what it means to support and accept one another, through incorporating a discussion of similarities and differences that may underlie the words selected by members. Facilitate discussion around how member backgrounds could impact our response and how we can support one another’s cultural values.</p>	<p>Participants will complete one word activity and participate in a discussion.</p>
10 MIN	<p>Leader is discussing the Benefits and Risks of Engaging in the Group Interventions: The group facilitators will discuss the benefits that can arise from this group (e.g., increased understanding of self, feeling better about one’s self, and improved relationships with others) as well as the risks. This could be a good time for one (or both) of the facilitators to briefly self-disclose about having tried something that they did not think they would be good at, and what they learned from engaging in this activity anyways. The facilitators will then briefly discuss the different interventions to be used and the benefits that may arise from engaging in an activity, even though the member may have never engaged in this activity and/or feels hesitant in doing so.</p>	<p>Participant will listen for information</p>
5-10 MIN	<p>Leader is responding to questions in Question Period: At this point, we will highlight to members that this pre-group meeting will be ending soon, and ask members to write down any questions that they have and place them in a box to be addressed at the start of the first official group session.</p>	<p>Participants are asking questions.</p>

5-10	Wind Down Activity: To provide the members with a wind down activity we will have them select an animal that best represents how they feel right now , and explain why they picked that animal to the member sitting to the left of them.	Participant complete activity.
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Total Time: 1 ½ hours+ 30 minute debrief with co-facilitator.

Appendix H: Post-Group Meeting Lesson Plan

Lesson Title: Indivisible You: Exploring Identity and Building Self-Esteem Post-Group Meeting

Facilitators: Katherine Coleman & Bethany Mills

For Lesson Rationale: Please see the Group Details section of this proposal.

- 1. Curriculum Guide:** Health Program of Studies (Alberta Education, 2002)
 7.4 analyze and practice constructive feedback; e.g., giving and receiving
 6.6 develop strategies to maintain and enhance appropriate cross-age relationships; e.g., within the family, school and community
 9.9 evaluate group effectiveness, and generate strategies to improve group effectiveness
 6. 4 identify and develop strategies to overcome possible challenges related to goal fulfillment

2. Learning Outcomes/ Lesson Objectives: (Indicate Knowledge, Skills, Feelings, Beliefs, Behaviours):

The Participant Will Be Able To:	Assessment:
F Express & respond to personal feelings and the feeling of others regarding the transition process.	-Will be checked off after responses- note in case notes.
K Understand the meaning of the ACT concept of a value driven life and commitment.	-Assess written response in evaluation form.
S Will give constructive feedback to facilitators.	-Same as above
B Will express belief that they feel confident and prepared to move forward with commitments	-Listen for this type of response in case notes.
H Demonstrate stable and enthusiastic behaviours.	-Watch for this type of behaviour- note in case notes.

2. Application: Participant will be given a model for separation and closure of experiences. They will also identify ways to continue the growth process and to continue to apply group experience to their everyday life, as well as, learn about resources they can access if they feel they need extra support or have ongoing concerns.

3. Lesson Materials and Technology and Resources: 10 copies of Coopersmith Self-esteem inventory- (CSEI-SF; Coopersmith, 1981), Ways of Coping Questionnaire (WAYS; Folkman & Lazarus, 1988) and the 26-item Self-Compassion Scale (SCS; Neff, 2003), and the Wellness Evaluation of Lifestyle- 5F-WEL (Myers & Sweeney, 2005). 10 copies of the group evaluation form, participants Indivisible You workbooks to be returned with feedback, Kleenex, snacks, 10 handouts, and water/juice.

4. Opener (Lead In / Hook, Pre Assessment, Intensive Review / Retroconnective):
 Individually welcome each participant and express your happiness to see them and gratitude for attending this last meeting. Open to group with: “It is so great everyone back together again to say our final goodbyes. This is the outline for today: first we will complete the post group assessments. They are the same assessments as you completed in the pre-group meeting session and were identified in the associated informed consent. When you have finished your consent you can have a break in the foyer. After that we will return here for a discussion, and finally TREATS!!!”.

5. Advance Organizer: The group has completed 14, three-hour group therapy sessions for building self-esteem with the Indivisible Self Wellness Factor Model. They have engaged in learning and discussion activities in Acceptance and Commitment (ACT) coping strategies, mindfulness training, CBT interventions for positive thinking, and art therapy activities. This will be our last meeting.

6. Seating Arrangement: participants will complete assessments and evaluations individually at table; then, they will have breaks in the foyer, and then return to sit in circle formation for discussion.

7. Summary, Closure, Forward Connective:
 Make statements of closure to each participant during snack time. Check in to ensure that they handled the separation experience and are feeling confident moving forward. Express a personalized comment about their participation and the growth within the group. Say goodbye and remind them about the resources they have available to them if they need extra support.

- 8. Key Questions:**
- What problems did you encounter on leaving the group? And on your commitment to your goals?
 - How are your significant others responding to you since you have left group?
 - What effects do you think your participation in the group has had on significant others in your life?
 - How might you be different now if you had not experienced the group?
 - Do you have anything you want to add about yourself or this experience?

(Corey, et.al., 2010)

Learning Activities Summary:

WHAT THE GROUP LEADER DOES		WHAT THE PARTICIPANTS DO
5 MIN	1. Participants will be welcomed by leaders and given a brief overview of the plan & purpose of the post group session.	Listening and asking questions.

20	<p>2. Participants will be directed to complete assessment: and group evaluation (see appendix). Attend to participants who have additional questions. Collect assessments and evaluations.</p>	<p>Completing assessments</p>
15 MIN	<p>3. Participants return to circle seated position and leader opens discussion. Content: Sometimes once a group is over people experience feelings of “discounting” the changes they have made and do feel confident in their ability to follow through with commitments (Corey, et.al., 2010, p. 282). Other times we have a burst of energy in our commitments and then they fizzle off. Key Question: What problems did you encounter on leaving the group? And on your commitment to your goals? How are you going to keep your commitment your goals? Leader is “identifying personal meaning for self & others, relating to real life, connecting to feelings, beliefs, behaviors” (McBride, 2006), as well as structuring time and attending to issues as they arise.</p>	<p>Listening to content and then discussing leader directed questions. Responding and giving feedback to group.</p>
20 MIN	<p>4. Content: For some people, significant others (family, boyfriend, friends) have difficulty with the changes that you have made or on the other hand are really excited and supportive. Give examples. Key questions: How is your significant other responding to you since you have left group? What effects do you think your participation in the group has had on significant other in your life? Leader is “identifying personal meaning for self & others, relating to real life, connecting to feelings, beliefs, behaviors” (McBride, 2006), as well as structuring time and attending to issues as they arise. Key Question: What effects do you think your participation in the group has had on significant other in your life?</p>	<p>Listening to content and then discussing leader directed questions. Responding and giving feedback to group.</p>
10 MIN	<p>5. Content: Sometimes we feel that we haven’t had a chance to say the things we wanted to. Sometimes we feel regret about things that happened in the group. Give examples. Key Question: How might you be different now if you had not experienced the group? Do you have anything you want to add about yourself or this experience? Leader is “identifying personal meaning for self & others, relating to real life, connecting to feelings, beliefs, behaviors” (McBride, 2006), as well as structuring time and attending to issues as they arise.</p>	<p>Listening to content and then discussing leader directed questions. Responding and giving feedback to group.</p>

20 MIN	<p>6. Content: Speak to the group about being a means to an end, change may be slow and subtle, do not expect group alone to change your life, decide what to with what you have learned, and remember CONFIDENTIALITY (review) (Corey, et.al, 2010). Also if you are finding that in the next few months you are struggling with the transition process, please contact Beth, or myself, contact numbers are on the card. Also attached to the card are a variety of resources that you can access.</p> <p>Provide information sheet with attached contact card. Return workbooks with comments and feedback. LESSON IS COMPLETE</p>	<p>Listening to content about transitioning out of group and closure statements. Receiving workbooks and browsing through leader comments.</p>
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Total Time: 1 ½ hours + 30 minute debrief with co-facilitator.

Debrief with co-facilitator:

- How are you feeling about saying goodbye to our group?
- Did you feel that they received enough closure?
- Do you have any concerns about any particular group member and how are we going to address our concerns?
- What do you think went well and not so well in this session?
- How could we improve this process next time?

Appendix I: Client Note Session Template

Client Note for: Counselling Group: Indivisible You: Exploring Identity and Building Self-Esteem²⁸

Facilitated by Katherine Coleman and Bethany Mills

Participant Name:

Session Date:

Start Time:

End Time:

- Informed consent signed
- Pre Group Assessments complete (Coopersmith, WAYS, WEL, SCS)
- Post Group Assessment complete ((Coopersmith, WAYS, WEL, SCS)
- Attended Pre-Group Meeting dated: _____

Session Number and Attendance (Circle group session this note pertains to and Checkmark for presence and or X for Absence)

PrM	1	2	3	4	5	6	7
8	9	10	11	12	13	14	PsM

Observations based on Today's Group Session:

Participation Level, Overall	(a) None____ Just Right _____ Too much____ (b) Needs Prompting____ Initiates without Prompting____ Appropriate Balance_____
Self-disclosure Level, Overall	(a) Low____ (b) On Track _____ (c) Too Much____ (d) Some was inappropriate _____
Contribution to Group Cohesiveness	(a)None____ (b)Just Right _____ (c) Too Much _____
Domain Awareness	(a)Cognitive: No Evidence_____ High Evidence (b)Affective: No Evidence_____ High Evidence (c)Content Focused: Low _____ High
Shared Insight About Oneself	None_____ On track _____ High Degree
Other:	
Other:	

²⁸ Client Note Session Template taken from: McBride, Dawn. (2013). Group File Management System, Part III of III. University of Lethbridge. Will be submitted for publication.

Observed/Disclosed Progress in Meeting Group Goal/Objective #1	None _____ On Track _____ Goal Appears to be Met _____
Observed/Disclosed Progress in Meeting Group Goal/Objective #2	None _____ On Track _____ Goal Appears to be Met _____
Observed/Disclosed Progress in Meeting Group Goal/Objective #3	None _____ On Track _____ Goal Appears to be Met _____
Observed/Disclosed Progress in Meeting Group Goal/Objective #4	None _____ On Track _____ Goal Appears to be Met _____
Group Dynamics this Client may be Contributing to (if any):	
Progress/Changes that the Client Mentioned Today:	
To Continue to Assist this Client, we Might Consider:	

Group Leader Signature _____ Date _____

Group Leader Signature _____ Date _____

Appendix J: Exploring Dual Relationships

The ASGW (2007) outlined the importance of group workers clearly defining and maintaining “ethical, professional, and social relationship boundaries with group members” (p. 116). Moreover, the Canadian Psychological Association (CPA) (2001) code of ethics III.33 noted that counsellors should “avoid dual or multiple relationships... and other situations that might present a conflict of interest or might reduce their ability to be objective and unbiased in their determination of what might be in the best interests of others” (pp. 83-85).

It is important to note that boundaries should be discussed in a developmentally appropriate way (ASGW, 2007; Bodenhorn, 2007). During the screening session as well as during pre-group meeting, boundaries will be discussed openly. There will be a focus on discussing boundaries in the school setting and the different “hats” or roles the counsellors may take (e.g., in the event that a counsellor does have to take a supervisor lunch or recess shift, “I will not be your counsellor or discuss anything that has occurred in a group session, this is to protect your privacy” and “if you do see me talking to a teacher, I will not be discussing you or your situation, unless I have your permission to do so”).

According to Moleski and Kiselica (2005), dual relationships occur when a counsellor has other connections to a client other than the counsellor-client relationships. These dual relationships can come out by chance or be entered into knowingly by the counsellor (Moleski & Kiselica, 2005). In either scenario, what is of the utmost importance is that the counsellor consult his/her ethical code and engage in an ethical decision making process to ascertain whether or not this dual relationship is in the best interest of the client (Moleski & Kiselica, 2005).

Dual relationship situations can arise both inside and outside of the school setting (e.g., group member attends the same church as the counsellor or is in the same book club as a client’s parents). Examples of dual relationships that counsellors may encounter in a school setting are

the referred client: (a) turns out to be the child of a family friend, (b) used to be a student of the counsellor-teacher, (c) the client is currently engaged in individual counselling, but would like to join a group run by the counsellor, (d) the client ends up being friends with the counsellors children, if he/she has any, and (e) the counsellor has been asked to supervise recess or lunches of students they have engaged in counselling with.

In the event that a counsellor experiences an ethical dilemma involving any of these types of dual relationships, Moleski and Kiselica (2005) stated that the principles of autonomy and nonmaleficence are particularly important to consider. This means that these authors will first assess the potential for harm to the client if we do enter into this dual relationship, and then weigh this against the harm that may be caused to the client if we do not enter into this relationship (Moleski & Kiselcia, 2005). Built into this consideration is the exploration of any other options for this client (e.g., if the group member is already an individual counselling client of one of the leaders, will this group be offered at a later date with different counsellors?). In addition, we will need to consider how entering/not entering into this dual relationship will impact the counselling group as a whole.

The ASGW (2007) noted that part of engaging in ethical group work is utilizing an ethical decision making model when faced with any type of ethical dilemma. These authors will utilize the ethical decision making model put forward by the CPA (2001, p.106) in the event that any of these situations arise. These authors will also engage in consultation with supervisors when faced with an ethical dilemma, which will help to ensure the most ethical course of action is taken.

Appendix K: Weekly Feedback Evaluation Form

Indivisible You: Exploring Identity and Building Self-Esteem²⁹

Session #: _____

Facilitators: Beth Mills and Katherine Coleman

Please circle the face that best represents how you feel in answer to the following questions:

1. I understood the information in the lesson and how to do the selected activities.



2. I felt connected to group members, listened to, and able to express what I was feeling and thinking.



3. The activities we did today were useful, engaging, and made me feel closer to achieving a better sense of self-esteem.



4. One sentence that describes a thought, ah ha moment, skill I learned, **or** piece of knowledge I am taking away from this session:

5. One word that describes how I am feeling as I leave this session today: _____.

Optional Response: A concern or problem I struggled with in today's session is:

²⁹ Smiley face response was taken from: Possibilities for learning: planning with and for highly able learners. (2014). Retrieved July 9th, 2014 from http://possibilitiesforlearning.com/?page_id=509

Appendix L: Final Feedback Evaluation Form

Indivisible You: Exploring Identity and Building Self-Esteem

Facilitators: Beth Mills and Katherine Coleman

Please circle the face that best represents how you feel in answer to the following questions:

1. I felt supported and connected to the group.



2. I feel like I have made progress in reaching my goals.



3. The facilitators offered support when I needed it and encouraged me to work towards my goals by participating in the group.



4. The facilitators addressed any concerns brought up by group members.



5. The facilitators explained the ideas and activities in a way that I could understand.



6. Number from 1 to 6 the activities you felt were the most helpful in working towards your goals:

Art therapy activities

Completing the Indivisible You Workbook

Group discussions

Guided meditation

Role-plays

Other _____

7. What does a value driven life and commitment to action mean to you?

8. Is there anything else that you would like to add:

Appendix M: Group Counselling Proposal Marking Sheet

CAAP 6637(2014): Group Counselling Proposal - Mark Sheet

Marked by Dawn McBride, Associate Professor at U of L, Registered Psychologist

Full marks are awarded **only** if a student demonstrates a critical and well thought out approach in addressing the required topics. Furthermore, the student will need to show an exceptional ability to integrate group counselling theory into the proposal. If there are any discrepancies between the assignment directions and this marking grid, the marking grid detail takes priority. *NOTE: The following criteria are taken from the detailed assignment description – please consult frequently.*

TOPIC	EXAMPLES OF CRITERIA (see course assignment for all of the criteria)	MARK	COMMENTS
Format / Organization of the entire document	Overall high quality professional presentation. Includes title page, table of contents where all headings/subheadings have a page number, headers & page numbers as per course syllabus, etc.). To score full points, the proposal's organization & presentation of the material has to be exceptional.	Max: 2	
Writing Skill & APA adherence	For every writing/grammar mistake, .5 point is taken off the score. Max loss for the same mistake, 1point.	Max: 3	
References	Properly cited for all borrowed ideas (both in text and in the reference page). .5 point is deducted for each missed reference and/or reference error.	Max: 2	
SUB SCORE A: MAX 7 EARNED:			

TOPIC	EXAMPLES OF CRITERIA (see course assignment for all of the criteria)	MARK	COMMENTS
Titles x2	<input type="checkbox"/> Formal title adheres to APA (.5 pt) <input type="checkbox"/> 2 nd title, creative/engaging for the stakeholder group (.5 pt)	Max: 1	

Abstract	<input type="checkbox"/> 150-200 words <input type="checkbox"/> Starts with the intent <input type="checkbox"/> Adheres to APA expectations <input type="checkbox"/> Wrote for the intended audience	Max: 2	
Background Information	<input type="checkbox"/> Presenting Issue , 1-2 pages <input type="checkbox"/> Rationale for Group Counselling , 1 to 1.5 pages <input type="checkbox"/> Rationale for Group Counselling with the Presenting Issue , 1-2 pages <input type="checkbox"/> References & academic sources cited	Max: 8	
Proposed Group Program	<input type="checkbox"/> Overview with topics <input type="checkbox"/> Core Objectives <input type="checkbox"/> Identified the <u>most relevant goals and specific corresponding objectives</u> based on the lit (60% peer reviewed, 2002+) <input type="checkbox"/> Goals: realistic, specific, & attainable <input type="checkbox"/> Measurable goals (at least one standardized) <input type="checkbox"/> Identified how clients will be evaluated <input type="checkbox"/> Addressed copyright issues <input type="checkbox"/> 3-4 goals, likely one page	Max: 5	
SUB SCORE B: MAX 15 EARNED:			
Marketing	<input type="checkbox"/> Preamble/overview, .5 -1 page <input type="checkbox"/> Poster effective & engaging <input type="checkbox"/> Attached as appendix, one page	Max: 2	
Group membership screening	<input type="checkbox"/> Group member criteria/eligibility <input type="checkbox"/> Screening process (to determine if they meet criteria and who will be doing this) <input type="checkbox"/> Members not be suited for the group (contraindicated) <input type="checkbox"/> Screening before session 1 <input type="checkbox"/> Enough info provided for a fictional director to run the program <input type="checkbox"/> References cited to justify criteria <input type="checkbox"/> Met page requirement, min. 1.5 pages	Max: 3	

Pre-Group Meeting	<input type="checkbox"/> Preamble paragraph <input type="checkbox"/> Hannah (2000) adherence evident <input type="checkbox"/> Lesson plan (1-3 pages) – enough info presented so someone else could facilitate	Max: 3	
Group Format & Structure	<input type="checkbox"/> Preamble paragraph <input type="checkbox"/> Identifies, briefly, at least 10 structural issues- located in the appendix <input type="checkbox"/> Single spacing <input type="checkbox"/> Word count for each seems reasonable	Max: 5	
Group Weekly Topics & Tasks	<input type="checkbox"/> Identify main themes for each lesson, 1 page <input type="checkbox"/> Present info in a table similar to Murphy & Heyman (2007) <input type="checkbox"/> Congruency between goals/objectives <input type="checkbox"/> 1-2 pages; table ok for the tasks	Max: 3	
Evaluation	<input type="checkbox"/> Weekly feedback form – 1 page <input type="checkbox"/> Overall feedback form – 1-2 pages <input type="checkbox"/> Easy, quick, and informative <input type="checkbox"/> Attached as appendix <input type="checkbox"/> Preamble	Max: 3	
Post-Group Meeting	<input type="checkbox"/> Preamble paragraph...How, when, where, etc. <input type="checkbox"/> Lesson plan – enough info presented so someone else could facilitate <input type="checkbox"/> Min 1, Max 3 pages	Max: 3	
Ethical Issues	<input type="checkbox"/> Code adherence stated (ideally x2) <input type="checkbox"/> Evidence of CAAP 6603 material <input type="checkbox"/> Dual roles addressed <input type="checkbox"/> Min 2, Max 3 pages for non-consent info	Max: 3	
	<input type="checkbox"/> Supplemental Group Counselling Consent form is friendly and adheres to code of ethics (worth 3 points) <input type="checkbox"/> Min 2 -Max 3 pages for the consent form	3	
SUB SCORE C: MAX 28 EARNED:			
GRAND SCORE: MAX: 50 EARNED:			
<i>Office use: /25</i>			