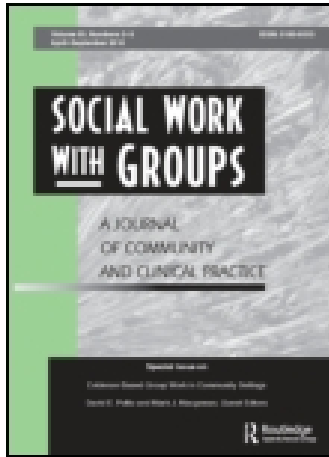


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Applying Evidence-Based Practice in Group Work at an Alternative High School

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Social workers often are reluctant to use evidence-based practice in group work. Part of this reluctance is because of the perceived rigidity of the process and its emphasis on research. However, social workers can rely on the four cornerstones of evidence-based practice—research, clinical experience, personal views, and client’s perspective—to provide an evidence-based group intervention. In this article, the authors illustrate how social workers used the four cornerstones at one alternative high school to provide an evidence-based group intervention. These cornerstones were used from the beginning of the process, which started with choosing the type of intervention, through the end of the process, which concluded with assessing the intervention. In this article, the authors show that it is possible for social workers to provide an evidence-based group intervention, while remaining flexible, thereby contributing to social workers’ knowledge of how to use evidence-based practice with groups.

KEYWORDS *evidence-based practice, social work with groups, clinical experience, client’s perspective*

Evidence-based practice (EBP) is a clinical practice method that was first developed in the medical field as a way to build critical assessment skills and add scientific merit to physician decision making (Mullen, Bledsoe, & Bellamy, 2008). *EBP* refers to the “conscious, explicit, and judicious use of current best evidence in making decisions about the care of individual patients” (Sackett, Rosenberg, Gray, Haynes, & Richardson, 1996, p. 71). EBP consists of the following five stages: (1) creating questions that reflect

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the need for information; (2) researching the best available evidence to answer the questions; (3) analyzing the validity and relevance of the evidence; (4) integrating clinical expertise, client values, and relevant evidence to generate an intervention; and (5) evaluating the methods and outcomes of the service, with a focus on client assessment and problem resolution (Sackett, Strauss, Richardson, Rosenberg, & Haynes, 2000).

In recent years, EBP has gained attention from health care professionals (Edmond, Megivern, Williams, Rochman, & Howard, 2006; Nolan & Bradley, 2008), and some social work professionals see its merit (e.g., Gambrill, 1999; Gilgun, 2005). EBP encourages social workers to commit to the best interests of their clients by seeking out and employing the most empirically supported approaches as opposed to the more traditional approaches (Gitterman & Knight, 2013) such as “authority-based” methods (Grambrill, 1999). EBP also encourages social workers to constantly learn as the field changes (Gitterman & Knight, 2013). The innate value of EBP is in the accumulation of experiences by practitioners and the reintegration of these experiences into practice (Edmond et al., 2006).

Social work professionals who conduct group work have contributed to the mentioned accumulation of experience by documenting their use of EBP (Pollio & Macgowan, 2011). For example, using a quasi-experimental design, researchers found that the Supporting Tempers, Emotions, and Anger Management intervention was positively associated with changes in parent and teacher reports of youth behavioral and emotional issues (Bidgood, Wilkie, & Katchaluba, 2011). In spite of such research, the number of articles documenting the use of EBP in group work remains scarce (Mullen et al., 2008).

Part of the rationale for the dearth in the literature on EBP group work is because, though some social workers see its merit (e.g., Gambrill, 1999; Gilgun, 2005; Pollio & Macgowan, 2011), others have found that social workers are reluctant to adopt it (Mullen et al., 2008). Like other professions (Nolan & Bradley, 2008), some social workers posit that EBP might not be useful when providing psychosocial intervention because it limits the ability to incorporate the client perspective. They also perceive the process as rigid and are concerned it will lead to fewer personalized interventions (Edmond et al., 2006). This supposition is predicated on the belief that EBP favors a mechanistic approach to interventions that does not allow for the integration of implicit knowledge gained from practice experience (Edmond et al., 2006).

Social workers may also be reluctant to use EBP because they perceive the methods used to evaluate practices (such as experimental designs) as not useful for social work because these methods tend to reduce multidimensional problems into quantifiable variables that can be measured (Plath, 2006). In particular, experimental designs are not responsive

to the complex and diverse settings, which are also often in flux, most often served by the profession (Gray & McDonald, 2006). Some further argue that by focusing only on well-defined and quantifiable variables of a client rather than viewing the client as a whole person, providers can only offer temporary solutions that do not solve the core issue (Gitterman & Knight, 2013). Thus, many believe social workers should use qualitative methods, rather than experimental methods, to address the diverse needs of the clients receiving social work services (Addis, Wade, & Hatgis, 1999).

Social workers are also reluctant to use EBP because they view it as a one-size-fits-all approach that is conceptually narrow and theoretically limited, especially in view of the constant developments in social theory (Gray & McDonald, 2006). EBP is considered to be a linearized problem-solving model and commonly criticized for oversimplifying real-world problems that are embedded in a larger social context (Gitterman & Knight, 2013). In fact, social workers note concerns that widespread practice of evidence-based treatment will limit and delay the development of new theories and alternative interventions (Addis et al., 1999). They further contend that the social work field is diverse and our understanding of the social phenomena too mercurial to be able to be encompassed by current evidence (Addis et al., 1999).

To address these concerns, Gilgun (2005) presented a more fluid approach to EBP that relies on four general cornerstones rather than a step-by-step process. The four cornerstones, one of many approaches to EBP, includes the following: (1) evidence and theory; (2) clinical expertise, which includes professional values and lessons learned from experiences with clients; (3) the practitioner's personal views, beliefs and assumptions; and (4) the clients' perspective or, in other words, how the clients themselves contribute to the intervention (Gilgun, 2005). Although the cornerstone model has utility, other models exist (Macgowan, 2008).

These four cornerstones encompass the basic principles of EBP. Indeed, both the five stages of EBP and the four cornerstones emphasize the same principles: research and integration of this research with clinical expertise and client perspective (Edmond et al., 2006; Sackett et al., 2000). However, the application of the four cornerstones is less rigid than the five stages because, as opposed to a step-by-step process, the cornerstones can be interwoven. Consequently, the four-cornerstone approach is a more flexible implementation of the EBP process in clinical practice.

The purpose of this article is to demonstrate the flexibility of the four cornerstones in providing an EBP group intervention. In this article, we show that it is possible to provide a personalized evidence-based intervention. In particular, we illustrate how two social workers applied the four cornerstones at an alternative high school.

CHOOSING THE TYPE OF INTERVENTION

In determining the type of intervention needed, as consistent with the group planning model (Northen & Kurland, 2001), the social workers began by collaborating with school staff and students to assess the needs of their clients. The social worker's research on working with schools influenced this choice (Comer, 1988); their clinical expertise, which taught them that forming strong relationships provided a foundation for having a positive intervention; and their personal belief that forming a positive relationship with the clients during this initial phase of the intervention would be beneficial in meeting the clients' needs.

Based on these cornerstones, the social workers interviewed the principal and guidance counselor using the following questions: "How can we best help your school? What do your students need? What has worked in the past? What didn't work? What would you recommend that we do?" The principal and guidance counselor reported that a group intervention would best serve their students because (1) a majority of the students might have difficulties talking to one person and (2) a group intervention would serve more students. Thus, in this initial phase of the intervention, the social workers were able to use the elements of EBP to direct their choice of intervention by intertwining elements from all four cornerstones.

Following the decision to have a group intervention, the social workers utilized a planning model as developed by Roselle Kurland (1978) as a general framework to guide them in the development of a successful group intervention. This framework suggests practitioners working with adolescents to focus on components such as need, purpose, composition, structure, content, pregroup contact, and social/agency context as he or she prepares to provide the group services (Malekoff, 2014). Keeping these guidelines in mind, the social workers again used a combination of the client's perspective and their personal views to direct their decisions regarding the topics to be covered in the group intervention. First, they interviewed the principal and counselor for possible group topics, and the following list was generated: anger management, multitopic concerns for girls, and interpersonal communication. The school staff members reported the most interest in an anger management group because a majority of the students had been referred to the school for behavioral problems, which is consistent with referrals to other alternative high schools (Foley & Pang, 2006).

Drawing on the indicated rationale, the social workers met with school staff and discussed the possibility of surveying the students to assess which group topic was of most interest to the students. Initially, the principal was hesitant about surveying the students; however, the social workers advocated for administering a survey because (1) the school staff reported that the students often declined to participate in social work services at the school and (2) the social workers' practice wisdom led them to believe that if the

students' provided their opinion about which group intervention they were most interested in attending, then the students would be more likely to participate in the group. Based on this rationale, the principal agreed to have the students complete a survey.

Next, the social workers developed a survey that included the three topics and a space requesting students to suggest other topics. The social workers administered the survey to all students attending school on one day by going to each classroom. The social workers explained to the students the reason for the survey—to gather their opinions on possible group topics—and how to complete the survey. While administering the survey, several students asked if participation in the group was required upon completing the survey. The social workers informed the students that they would not be required to participate. Also, the social workers stated that the students' responses were anonymous and, at a later date, the social workers would ask students to volunteer if they wanted to participate. The students reported interest in an anger management group. Girls expressed interest in a girls-only group. Both were provided; however, this article focuses only on the anger management group.

In sum, the social workers used the four cornerstones of EBP as a guide for choosing the type of intervention to provide and for their selection of group topics. The social workers were able to find common ground with their clients (school staff and students) and identified the clients' unique concerns, to which they tailored their intervention. By applying the EBP processes in this way, the social workers were able to understand and accommodate the clients' values—that is, their expectations, concerns and preferences—to the best of their abilities (Gilgun, 2005).

SELECTION OF GROUP MEMBERS

Once it was determined that an anger management group intervention would be provided, the social workers assessed the clients' perspectives while incorporating their personal beliefs, clinical expertise, and known research to select group members, which is also consistent with the social work with groups planning model (Kurland, 1978; Malekoff, 2014; Northen & Kurland, 2001). They gained insight from their clients by reaching out to the school staff to discuss recruitment strategies. Based on their recommendation, the social workers went to each classroom to request students to make a self-referral to the group. All interested students completed a semistructured interview lasting 30 minutes with one social worker during which time the students reported information about their mental health and reason(s) for participation. After the interviews with the students, the social workers shared a list of individuals who volunteered to participate with the guidance counselor (the principal was unavailable because of scheduling constraints).

The social workers selected group members based on their level of need, motivation, and the staff members' input—a method consistent with the *Standards of Social Work Practice with Groups* (Association for the Advancement of Social Work with Groups, 2006). In addition to the staff's recommendation and the students' self-selection, the social workers used personal views and assessment of the needs of the students to decide whom to include. In particular, the school staff described one student as the most in-need of the group but also "immature." Because he was seen as "immature," the school staff recommended that he not be included in the group but stated that the choice to include him was ultimately the decision of the social workers. Based on their clinical expertise in working with individuals with behavioral challenges, the social workers believed that having only one student in the group who could be potentially challenging would not disrupt the group and that the student could benefit from learning from the more "mature" members of the group.

In selecting the racial, ethnic, and gender composition of the group members, the social workers followed EBP by utilizing information from research, their practice wisdom, and personal views, all the while keeping their clients' needs in mind. Consistent with the average size of groups conducted in schools (Garrett, 2004), the social workers selected a total of six students to participate in the group. The choice to have a heterogeneous or homogenous group was complex. From the research perspective, the evidence is mixed. For example, one study showed that diversity improved group interaction and efficiency (Earley & Mosakowski, 2000), whereas another showed the diversity to have negative effects on social integration and communication (Williams & O'Reilly, 1998). Another study made a distinction between the type of diversity and found racial diversity to be positively correlated with emotional conflict whereas age diversity is negatively correlated with emotional conflict (Pelled, Eisenhardt, & Xin, 1999). Further, studies have also shown that heterogeneous groups might have a negative impact on adolescents (Kaminer, 2005).

However, from a personal perspective, the social workers thought heterogeneity would be ideal. One of the leaders was a multiracial female and the other was a Black female, and they knew from their personal experiences that being the only one from a racial group could decrease the group members' ability to participate in the group because they could feel discomfort or undue pressure. The social workers decided to put more emphasis on their personal views based on their past experiences and created racially- and gendered-heterogeneous groups. Participants consisted of four males and two females, who were between ages 15 and 18. Two identified as African American (both males) and the rest as Latino (including two females). By using the four cornerstones in combination, the social workers were able to reach a decision on group composition.

Besides considering the client's needs, EBP also involves the "conscientious, explicit, and judicious application of best research evidence to (. . .) interventions whose purposes may be therapeutic, rehabilitative, or preventative" (Gilgun, 2005, p. 52). Therefore, to further personalize the group to the client's needs, the social workers gathered relevant research related to alternative high school students. Research has shown that students who attend alternative high schools tend to have more issues with drug use and legal problems than students attending traditional schools (Grunbaum, Lowry, & Kann, 2001; Lehr, Tan, & Ysseldyke, 2009). As indicated by research, among the group members, two endorsed recreational drug use and three reported past and/or current legal problems. Additionally, the group members had mental health disorders, which are also consistent with research (Foley & Pang, 2006). For example, 50 alternative school directors and principals reported that approximately 50% of their students had such disorders (Foley & Pang, 2006). Also supported by research (Grunbaum et al., 2001), one male student was a parent and expecting another child and another male was expecting the birth of his first child.

CURRICULUM DEVELOPMENT

In accordance with the EBP process, the social workers conducted research on anger management to develop a curriculum for the group that considered the clients' needs and the available research. The planning for the curriculum is discussed below; however, it is important to note that though the social workers established a curriculum for the intervention, they planned to also remain flexible and responsive to the group members' needs. The social workers conducted extensive research, as evidence of efficacy is the premise of evidence-based group work (Macgowan, 2008).

The social workers first developed a clear purpose statement: for group members to learn how to use anger as a tool for change. The purpose was based on Fein's (1993), five-stage plan for dealing with anger. The stages are as follows: (1) maintaining emotional safety, (2) experiencing and coping with intense emotions, (3) understanding the objectives of anger, (4) becoming objective and realistic about anger, and (5) using it to accomplish goals.

Once the purpose of the group was clearly defined, the social workers integrated the research to generate a plan for the first phase of the intervention. Namely, consistent with the *Standards for Social Work Practice with Groups* (Association for the Advancement of Social Work with Groups, 2006), the social workers decided that the first phase would begin with a discussion with the group members on the purpose of the group and the social worker's role as facilitator, as well as assist the group in establishing consensus around ground rules including responsibilities as group members. They

also planned to provide psychoeducation on cognitive and behavioral components of anger. This approach has been supported by research that shows that such interventions were associated with decreased self-report of aggression as well as reported improvement of oppositional behaviors (e.g., Kellner & Bry, 1999; Murrphy, 2012). The decision behind the goal setting activity, though research based (McWhirter, & Page, 1999), also stemmed from the social workers' personal views that having a concrete goal to work toward would help students be invested in their own improvement. Therefore, the plan for this initial phase was first to have students identify personal goals for the intervention. This step was conducted by directing students to answer questions such as, what does anger management mean to them, what do they want out of these meetings, and how will they know when they have achieved their goals.

Additionally, consistent with the purpose of the intervention, the social workers planned to facilitate dialogue among group members on the notion that anger is a tool used to communicate and motivate other individuals (Fein, 1993). Furthermore, they planned to aid group members to identify triggers, calming techniques, and safe items and places (Davis, Eshelman, & McKay, 1995). Thus, the social workers planned to have sessions focused on how the students used anger to transmit messages to others. Following the information provided by Fein (1993), the students would then explore this notion and identify alternative solutions to conveying the same message.

The social workers also planned to focus the first stage of the intervention on helping students learn and practice-specific behavioral strategies to help them to manage anger (Davis et al., 1995). In particular, the social workers planned for the students to learn relaxation techniques such as breathing and creating a safe place. The idea was for them to interweave the calming techniques with the concept of "anger as a tool," to develop personalized coping techniques as suggested by Fein (1993).

Additionally, based on their personal view and research (Lochman, Barry, & Pardini, 2003), the social workers decided that cultivating group cohesion should start from the beginning of the intervention. To accomplish this task, the social workers planned to have the group members share their problems and successes with one another as well as review their progress toward their goals. The rationale for placing emphasis on cultivating group cohesion was based, in part, on previous research that has shown that students who attend alternative high schools are often self-reliant and use avoidant coping strategies (May & Copeland, 1998), both of which may result in anger management issues.

The social workers planned, for the second phase of the intervention, to focus on using the techniques that were introduced in the first phase, to work toward individual goals. Further, they planned to discuss the issue of forgiveness. This choice was made because research has shown that forgiveness can assist with anger management (Davis et al., 1995). According to

Davis et al. (1995), the process of forgiveness and the resulting change in perspective makes is an important therapeutic tool for dealing with anger. Therefore, the social workers planned to integrate a process of forgiveness into the intervention as another means to achieve the goal of anger management. By introducing the concepts of forgiveness and anger as a tool, and by educating the students on the impacts of anger and forgiveness on the body, the social workers sought to teach the students to cognitively counteract their anger.

The social workers planned for the final phase of the intervention to focus on the lessons students learned and how the group affected all group participants. From their personal views, the social workers planned to provide each student with a calming stone to use as a safe object when they feel angry, to emphasize the foundational beginning phase topic. Further, the idea behind the stone was to provide the students with a transitional object, which has been suggested by some as a way to provide individuals with support after treatment concludes (Arthern & Madill, 1999).

IMPLEMENTING AND REFINING CURRICULUM COMPONENTS

While implementing the intervention, the social workers remained flexible by using a mixture of practice wisdom, personal views, and client perspective to adjust their curriculum as needed. In the beginning phase, the social workers used their practice wisdom to facilitate group discussion on ground rules while modelling desired behaviors (e.g., active listening and talking respectfully to group members and each other). As part of the discussion, group members discussed cultivating a safe and trusting environment, issues of attendance, and confidentiality. The social workers allowed group participants to reach a final decision on each topic because of their personal view (i.e., doing so would engage students and promote their commitment to the intervention). Further, to foster group cohesion in this phase, the social workers asked group members to share with each other their experiences with anger. Also, the social workers asked group members to share any techniques that they used to help them manage their anger.

In the middle phase, the social workers assisted the group members in progressing toward their individual goals and further promoted group cohesion by encouraging members to share how they handled issues with anger that occurred between group meetings (Steinberg, 2004). The group members engaged in role-playing and monitoring their goals while also providing mutual aid (Steinberg, 2004). Further, group members assisted group members with using problem-solving techniques (Northen & Kurland, 2001). For example, one member was angry with his employer because of the lack of hours he was receiving. He stated that he had become very angry with his boss and that he wanted his boss to understand that he was upset. He

was able to use the group session to problem solve solutions and reported that he was able to use the tools discussed in the group, in particular, taking a deep breath to help him calm down and talking respectfully with his employer.

Also during this phase, the youngest member of the group (the member described as immature by school staff) became disengaged and pretended to be asleep during one group meeting. From their personal views, the social workers' decided to let group members vote democratically for what steps to take to deal with this behavior. The social workers viewed this experience as an opportunity for group members to feel empowered in the group process. A group vote was taken, and it was decided that he should be removed from the group for one session. When the student returned to the group, he acted within the ground rules and participated actively. During a later session, he volunteered to share his experiences using deep breathing and walking away from a physical altercation as anger management techniques. He also reported feeling very proud of himself and excited to tell the group of his actions.

During the final phase, the social workers encouraged an open dialog in discussing what lessons they had learned from the group and how the group affected them. The social workers asked students to consider how they changed, what they found helpful, and how the program can improve. The group members also discussed their growth and change over the course of the group intervention.

In sum, the social workers flexibly used their personal views, client perspective, and their practice wisdom during the implementation of an EBP group; they adjusted their plans according to the response from the group. They encouraged group cohesion and facilitated conversation, allowing students the freedom to direct the flow of conversation. For example, the topic of forgiveness ended prematurely when student input lulled, so the social workers moved on to a different topic.

ASSESSMENT AND REFLECTION

Consistent with EBP (Sackett et al., 2000), the social workers assessed group members' and the principal's views on the intervention (the guidance counselor was not available due to time constraints). Because of the small sample size and single-group design, the social workers used qualitative methods to assess the participants' experience with the group rather than to evaluate the effectiveness of it. The social workers did not have a budget for audio recorders or to hire a transcriptionist, they therefore used field notes to record data. Although limitations with this method exist (Padgett, 1998), it served as the most feasible method available within the social worker's financial constraints and the given sample size. The social workers hand-coded

the data and used conventional content analysis to analyze the data (Hsieh & Shannon, 2005) as well as memoing (Padgett, 1998). The social workers collected data throughout the process of providing the EBP, with the majority of the data collected during the final group session.

In general, the students reported that they felt better able to manage their anger because of their experience with the group. They found that being able to rely on group members to help them problem solve was helpful. They also reported that interweaving the concept of “anger is a tool” with calming techniques was beneficial (Fein, 1993). Several students inquired as to whether the social workers would return the next year to facilitate a group intervention, expressing their interest in continuing participation. They further recommended that the social workers provide more group sessions.

Although the group members and principal’s assessment of the group is informative, several limitations exist. First, the small sample size limits the ability to generalize the results (Padgett, 1998). Further, the social workers completed the assessment, and it is possible that group members felt uncomfortable with sharing negative views about the group because the social workers’ presence (Royse, Thyer, & Padgett, 2009). Third, the social workers collected a limited amount of qualitative data and were unable to use methods, such as triangulation, to increase the confidence of the findings from the assessment. Fourth, when selecting the group topics, the social workers relied primarily on the principal’s perspective. Therefore, the student voice was minimized when selected the topics. Focus groups with students may have revealed a preference for students to discuss past life stressor or possible traumas. Nonetheless, this article helps fill a gap in the literature as few have described using EBP in group work with alternative schools.

In addition to the group members and principals’ perspective, the social workers also reflected on their experience with using the EBP process. Because the social workers did not have previous experience with conducting a group intervention at an alternative high school, they found the four cornerstones of EBP to be a helpful approach to providing clinical care. They also found that by remaining flexible and using the four cornerstones, they could assess clients’ needs and provide care within a framework that was responsive to those needs. Their experience also helped them gain additional practice wisdom to use in other clinical settings.

CONCLUSION

This article demonstrated how the EBP process could be implemented in a group intervention using four cornerstones: research, clinical experience, personal views, and client’s perspective (Gilgun, 2005). Social workers can use these four cornerstones to provide an EBP anger management group

that is personalized and flexible. Moreover, the ability to use cornerstones in any combination or order allows the process of providing an EBP to flow naturally and adjust quickly to real world changes.

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