Functional Group Model:
An Occupational Therapy Approach

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Abstract

The Functional Group Model, a theoretical approach to designing, leading, and assessing a group is presented. Constructs of the model and instruments used in the design and measurement of leader competencies, group processes, and member participation are included. Case examples are provided to illustrate implementation of the model in therapeutic, educational, and natural settings.

What is the FunctionalGroup Model?

What is the theoretical basis of the model? (theoretical assumptions)

The Functional Group Model (FGM; Schwartzberg, Howe, & Barnes, 2008), first introduced in 1986 (Howe & Schwartzberg, 1986), is a distinctive blend of theory and research evidence in the areas of: group dynamics (Bales, 1950; Benne & Sheats, 1970; Bennis & Shepard, 1956; Cartwright & Zander, 1968; Garland, Jones, & Kolodny, 1965; Lifton, 1961; Tuckman, 1965), effectance motivation (Barris, Kielhofner, & Hawkins, 1983; White, 1959; 1971), needs hierarchy (Maslow, 1970), purposeful activity (Fidler & Fidler, 1978; Reed, 1984), adaptation (Burke, 1983; King, 1978; Reed, 1984), and flow state (Csikszentmihalyi, 1975). Four unique action components drive the Functional Group Model (FGM): Purposeful, Self-Initiated, Spontaneous, and Group Centered. Group leadership according to the FGM allows for client-centered practice using a group approach to maximize group outcomes related to occupational performance and role competence.

Purposeful-action is the 'doing' that facilitates members' perception of the group as meaningful and congruent with their needs and goals. As a mechanism of facilitating group processes, purposeful-action helps group members get to know each other and learn what can be achieved at the level of the individual and the group as a whole. In the 'doing' of the group, purposeful-action enhances the meaning and understanding of the 'fit' of the individual within the group related to both task and social elements. Purposeful action through doing helps members see how their own areas for growth relate to the group's purpose and goals.

Self-initiated action is how members initiate being part of the group, through whatever means they are able. Members' self-initiated participation, verbal or non-verbal, represents their willingness and ability to engage in the opportunities offered within the group in order to improve their skills, self-understanding and quality of life. Members' active engagement in group tasks and the group process allows for self-discovery. Members learn, recover, or enhance strengths or skills needed to support health and participation in daily life (AOTA, 2008).

It is this spontaneous (here-and-now) action which brings forth experiential learning in a safe and supportive context. As the group develops, exploring member behaviors and reactions in the here-and-now, provides feedback or promotes insights about thoughts, feelings or actions detracting from or supporting participation in meaningful activities and interpersonal interactions. When

facilitated with care, spontaneous-action supports exploration of beliefs about self and others that impact intra - and interpersonal relationships. Spontaneous action offers members opportunities to experience choice, decision-making, risk-taking, as well as learn self-regulation and self-control.

Group-centered action emerges as group identity develops. Members' diverse worldviews and needs as a group are more openly addressed (e.g., cognitive, emotional, physical, social, spiritual). Group-centered action is further facilitated by changing or adapting the group's structure, environment, and goals as members come to realize their interdependence. Through collective moments of interaction, group-centered action increases maximal involvement of members in the group's process. Group-centered action helps build group cohesion. The group builds consensus through identifying and achieving a common purpose or goal. Participation in the group becomes a shared collective experience.

In the FGM, a group progresses through the stages of formation, development, and closure. Leader reasoning and strategies are informed by the four actions components of the FGM in accordance with the group's stage. (See Tables 1-3).

The formation stage is characterized by members' concerns and issues related to feelings of belonging and acceptance. The group's focus needs to be on individual and group goals. The group is highly dependent upon the leader, looking to the leader for direction and re-assurance.

Box 1 - Formation Stage

As a therapist working in acute inpatient psychiatry, I realize that my groups are often in the formation stage. I must quickly create an alliance with the members and explicitly ensure their sense of physical and emotional safety. My opening ritual to every group is to review group rules and goals. I structure the group choices in terms of group activities and social participation to reduce member anxiety and uncertainty.

The development stage is when the members' display a group identity or sense of ownership of the group. Members become more willing to share materials or personal information. The leader helps members explore group safety and seek or provide support, thus developing the group climate.

Box 2 - Development Stage

In a process group training experience, a student trainee states he feels affronted by the leader whom he feels is not listening to him, accusing the leader of being 'just like his mother', whom he describes as withholding needed care, financial support, and attention. The leader asks the group to share their perceptions of what just

Table 1
Group Issues and Membership Needs Related to Action: Formation Stage

Formation stage issues: Concern over belonging & acceptance; formation of individual & group goals; dependence on leader; testing leader style

Group members needs related to action:

Purposeful action provides:	**Self initiated action allows**	**Spontaneous action occurs via**	**Group centered action yields**
-Structured activity that includes all members and can provide successful outcomes -Guidance regarding expectations of members -Clear options and alternatives in goal selection -Accepting climate -Expression of respect for opinions and feelings of members	-Safety of polite social behavior -Avenues for expression of negative and positive feelings -Opportunity for safe risk-taking behavior -Group support and encouragement for member roles and goals	-Encouragement to express ideas feelings, & thoughts related to here-and-now -Opportunity to interact with leader and test degree of freedom and control -Members sharing perceptions and reactions about what is going on in group -Overt support and acceptance of diversity or difference	-Knowledge of group resources -Gradual sharing as members take initiative -Examination of group goals and exploration of norms suitable to achieving group goals -Emergence of group-centered decision making process -Developing consensus and awareness of group's own process -Establishing patterns of behavior/norms

Leader Actions & Skills Employed

-Discuss confidentiality
-Clarify individual and group goals; use of group contract; establishing group rules
-Strong leader involvement in task selection, analysis, and adaptation of task and interactions
-Leader encourages the exploration of member roles
-Structuring action for member comfort and growth
-Modeling:
    Genuineness and empathy
    Listening and responding
    Tolerance of ambiguity and tentativeness in planning
    Giving and receiving feedback
-Sharing rationale for leader action(s)
-Using concrete language
-Classifying themes
-Climate setting for supportive interpersonal relationships
-Leader input and support as needed

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Table 2
Group Issues and Membership Needs Related to Action: Development Stage

Development stage issues: Concern over acceptance and rejection emerge as the group as a whole and members experience change; testing the safety of the group; struggle between safety and involvement; control and power struggles (conflict) with leader and other members

Group members needs related to action

Purposeful action provides:	Self initiated action allows for:	Spontaneous (here-and-now) action occurs via	Group centered action yields
-Structured activity to include all members and provide successful outcomes -Guidance regarding expectations -Clear options and alternatives in goal selection -Accepting climate -Expressions of respect for opinions and feelings of members	-Support for exploratory behavior -Encouragement of task involvement and verbal expression -Opportunity to express positive and negative reactions and feelings -Accepting environment	-Expression of ideas, feelings, and thoughts related to the here- and-now -Opportunity to interact with leader and test degree of freedom and control -Member sharing of perceptions and reactions as to what is going on in group -Overt support and acceptance of diversity or difference	-Leadership emerging from group members -Sense of ownership as "our" group -Increased member-to-member interaction -Members looking less to leader for approval or needs to be met -Increased cohesiveness and support -Increased tolerance for limitations of group (time, materials, attention)

Leader actions & Skills Employed

-Reviewing confidentiality
-Continued clarification of individual and group goals; use of group contract; re-defining group rules
-Continued leader involvement in task analysis, selection, and adaptation; activity demands must match member abilities for task and social interaction
-Leader encouragement for members to assume group task & maintenance roles
-Gradual increase in expectations to level of member tolerance and growth
-Modeling:
    Genuineness and empathy
    Active listening
    Giving and receiving feedback
    Assurance that conflict can be worked through if not acted out or avoided
-Sharing process commentary as indicated
-Using concrete language; reframing potential hostility and anger as possibly related to disappointment with leader, frustration with limitations of group context, unmet needs, etc.
-Connecting themes
-Creating a climate or holding environment (Winnicott, 1958) that allows for supportive interpersonal relationships
-Leader input, support, and limit setting as needed

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Table 3
Group Issues and Membership Needs Related to Action: Closure Stage

Closure stage issues: Denial and avoidance, premature termination, anxiety and fear, depression and anger, sadness, raising new issues for discussion

Group members' needs or behaviors related to action:

Purposeful action	Self initiated action	Spontaneous action (here-and-now)	Group centered action
-More focus on maintenance roles, but less on task -Trust versus mistrust re-emerges as theme -Participation declines -More structure needed	-Power struggles emerge or re-emerge -Withdrawal from group -Regressive behavior(s) may be revisited or re-expressed as means to demonstrate uncertainty about future or ability to function without group (i.e., question if "ready" for group to end)	-Becoming more concerned about individual needs -Wish or appeal for group to continue may be expressed -May devalue importance of group and learning or growth that occurred (viewing work done as worthless) -Anger toward leader and/or other members (possibly to avoid sadness re: loss or anxiety about separation) -Feedback to other members provided with less intensity	-Review of group's history and process over course of sessions -Reminiscing re: member participation -Recognizing and/ or celebrating individual and group accomplishments -Group conflicts may predominate -Silences and inactivity may prevail -Unresolved issues may be raised

Leader Actions & Skills Employed

-Review terms of group contract regarding number of sessions and confidentiality
-Re-enforce group rules
-Structure process to facilitate member's addressing feelings about group ending/termination issues
-Modeling:
    Genuineness and empathy
    Listening and responding
    Acceptance and tolerance of ambiguity
    Giving and receiving feedback
-Classifying themes
-Use of metaphor or narrative in reviewing group stories and reminiscing about member participation
-Structuring activity to allow for "transitional object"
-Confrontation
-Reality testing
-Self-disclosure

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happened in terms of what they saw and felt. Members share their differing views, some indicating that they thought the leader was intervening to allow others in the group to be heard, another saying it could have seemed to him like the leader's redirection meant she didn't want to hear what he had to say. Through this process, the leader is able to assess and contain her countertransference reaction of feeling misunderstood and verbally accosted by him. The member's feelings led him to verbally attack the leader, who was able to serve as a 'lightning rod' or safe object for the member's anger. The leader's post-group reflection helps the leader identify that the member was feeling scapegoated and misunderstood by members of the group.

Group closure involves helping members recognize their participation and accomplishments. Issues related to closure may be related to feelings of sadness or a return of anxiety. Members may raise new concerns for discussion or regress in their behavior in the hope of avoiding the group's coming to a close.

Box 3 - Closure Stage

As leader, you get word that one of the members of your elder service agency group has died. In your group protocol, you have identified a group ritual to use when a member dies that consists of a symbolic joining together through a short poetry reading and time for open reminiscence of shared experiences with this member in the group. Initially during the group, there is a long period of silence. Some members ask to leave the group early and express frustration when reminded of the group contract to stay for the full session. As a leader, you role model by sharing a memory of when the deceased member first joined the group. Gradually others begin to share. As you indicate it is almost time for the group to close, a member begins to cry, stating, 'I didn't get a chance to say anything, why am I always overlooked?' As a leader, you re-assure the member that there is time for a brief remark and also reality test the member's perception of being overlooked, reminding them that you invited them to share and they declined, indicating that others should go first.

How is the Functional Group designed?

The Group Assessment Protocol and Plan (GAPP) is a format used to structure leader reasoning in terms of long and short term planning (See Figure A). Although each group session is approached with a dynamic, 'here-and-now' focus, the clients' needs, overarching group purpose, and long and short term group goals are outlined via this planning process. The GAPP provides a framework for developing groups that can address a variety of client populations.

Box 4 - Group Assessment Protocol and Plan

As an occupational therapist working with individuals with post-traumatic brain injury, the GAPP helps bring into focus the members' abilities, the activity demands, and the contextual elements of the setting to ensure that clients and groups are suitably matched in order to ensure success. I am able to plan for a quiet, distraction-free environment and to advocate for the needed leader to member ratios as well as a closed group format by clearly identifying what impact these variables have on group member functioning. Through articulating my rationale using the cognitive rehabilitative frame of reference as well as through the evidence-base supporting its use with the population, I am able to demonstrate to stakeholders that group outcomes can address the cognitive, social, and emotional needs of the members as well as improve members' daily functioning. Having group session plans enables me to focus my energy and attention on the needs of members by ensuring that I have all the necessary materials and an idea of the activity sequence prior to each session.

What tools are used to assess member functioning and group processes?

A sociogram (see Figure B) is a visual illustration of who communicates with whom in the group as well as the direction and frequency of the communication. Verbal communication is diagrammed with arrows to note the direction and frequency of member-to-leader, member-to-member, member-to-group as a whole, leader-to-member and leader-to-group as a whole verbal interactions. As an assessment tool, the sociogram helps the leader visually evaluate patterns in communication relative to group member participation.

Box 5 - Use of Sociogram

As a preschool group leader, it was evident in my sociogram that the children were directing all of their communication to me to get their needs met. Upon reflection, I wondered whether this was indicative of traumatic events of late that threatened their sense of security, thereby eliciting a stronger need for attachment to a parental or authority figure. In leading the next group session, I paid attention to the amount of group structure I was providing to ensure their sense of safety and to increase their peer-to-peer interactions.

The Member Role Checklist (see Figure C) provides a structured format for recording ways in which group members assume roles in the group. Roles can be task related, supportive of the social-emotional needs of the group, or indicative of the individual member's needs (Benne & Sheats, 1978). Individual roles often detract

from what is best for the group as a whole.

Box 6 – Member Roles within a Group

In a group for community dwelling elders, a member has a stroke (CVA) and is hospitalized. The member has asked the leader to tell the group that she has had a stroke and will be absent until further notice. When the announcement is made, one of the members responds by seeking detailed information about the person's condition (information seeker). One suggests making get well cards (initiator), another suggests that the group not talk about a member who is absent and proceeds to bring up her husband's illness (recognition seeker). Another voices support for the idea of making a card indicating that it would mean a lot to the missing member (encourager). One member remains silent but appears interested in hearing about the group member, nodding to the suggestion of making a card (follower). The leader indicates to the questioning member that, unfortunately, he has no other information to provide. He redirects the member who wants to talk about her husband's illness by saying the group can talk about how it is impacting her and try to provide support and suggestions. He brings out materials suitable for card making. Members begin to go through the card making materials, discussing other events in their lives since the group last met. Gradually the discussion revolves around member fears and challenges related to their own health and well-being. The member who initiated the card making asks the silent member if he is 'okay' (gatekeeper). He states that he is 'fine' but doesn't feel comfortable talking about such a personal subject as health. She responds by saying she will 'respect his privacy' (harmonizer/ compromiser). By the close of the session, three cards are completed. A member suggests they send one card a week to the absent member and begins circulating the three cards around the table for each person in the group to sign.

How is leader adherence and competence measured?

Self-report: Self-perceptions of competence

The Group Leader Self-Assessment (GLSA; Barnes, 2011) (see Figure D) helps group leaders identify their areas of strength and their skills in need of development related to common leader behaviors. Areas for self-assessment relate to themes in the research literature regarding effective groups and group leader behavior (Arnardottir, 2001; Burlingame, McClendon, & Alonso, 2011; Chapman et al., 2010; Chen & Rybak, 2004; Lieberman, Yalom, & Miles, 1973; Morran, Stockton, & Whittingham, 2004; Riva, Wachtel, & Lasky, 2004; Rubel & Kline, 2008; Yalom & Leczsz, 2005). The GLSA can be used to assess self-perceptions

of leader ability in the areas of:

- Conceptualizing a group based on theory (Page, Pietrzak, & Lewis, 2001)
- Developing optimal group structure (Page, Pietrzak, & Lewis, 2001)
- Building an atmosphere of support and caring (Lieberman, Yalom, & Miles, 1973; Yalom & Leczsz, 2005)
- Providing executive functions (Lieberman, Yalom, & Miles, 1973; Yalom & Leczsz, 2005)
- Regulating emotional stimulation (Lieberman, Yalom, & Miles, 1973; Yalom & Leczsz, 2005)
- Prompting meaning attribution (Lieberman, Yalom, & Miles, 1973; Yalom & Leczsz, 2005)
- Helping members relate to other members (Page, Pietrzak, & Lewis, 2001)
- Drawing out quiet members (Ormont, 1990; Page, Pietrzak, & Lewis, 2001)
- Encouraging expression of differences (Page, Pietrzak, & Lewis, 2001)
- Giving corrective feedback (Page, Pietrzak, & Lewis, 2001)

The GLSA can be used to detect change in leader self-perception over time and to identify professional goals related to increasing confidence and competency in common leader behaviors.

Box 7 – Group Leader Self-Assessment Pilot Study

A cohort of occupational therapy student trainees (n=12) were asked to complete the Group Leader Self-Assessment at the beginning and at the close of an experiential member and experiential leader training experience in group theory and practice. Students participated in a 12-week, 4 hour/week course consisting of a weekly process group, weekly community group co-leadership (8-10 weeks), weekly mentoring group, and reflective journals. Aggregate analysis of their pre-post scores using paired t-testing indicated that students showed a statistically significant positive change and moderate to very large effect sizes related to leadership functions of support/caring, emotional activation, executive functions, meaning attribution (Lieberman, Yalom, & Miles, 1973; Yalom & Leczsz, 2005), conceptualizing group according to theoretical constructs, drawing out the isolated group member (Ormont, 1990; Page, Pietrzak, & Lewis, 2001), and giving corrective feedback (Page, Pietrzak, & Lewis, 2001).

External rating of competence: Adherence

The Functional Group Model-Leader Adherence Checklist (FGM-LAC; Barnes & Schwartzberg, 2011, 2013) (see Figure E) is a rating scale

designed to measure leader adherence to the Functional Group Model action components and theoretical assumptions. It has been found to successfully identify the presence or absence of leader adherence through the use of external raters and leader self-report (Bansil et al., 2011).

Discussion

The FGM provides a systematic way of designing, planning, conducting, and evaluating a group in a variety of settings with diverse populations. The model is not prescriptive, although it provides key ingredients that can inform and enhance an occupational therapy group. The Functional Group Model aims to support leader reasoning in designing and planning groups through the use of the GAPP. Leader strategies are implemented according to the group's phase of development and FGM action components. The GLSA is used to help the leader assess their own leadership and self-perception of abilities. Leader compliance to the FGM is assessed following each session using the FGM-LAC.

When using the FGM, the leader combines research evidence about mechanisms of change and group therapy constructs with specific frames of reference unique to the population and setting. While the GLSA and FGM-LAC assessment tools are in varying stages of development, they have been used in various iterations for nearly 10 years with practical success. It is the combination of model specific and general group therapy principles that make this integrated practice interdisciplinary in scope. Its broad applicability to natural groups, therapeutic groups, and educational groups is both its strength and a challenge in providing evidence-based intervention.

Functional Group Model leader training incorporates a variety of skills and theoretical knowledge instilled through experiential learning, mentoring, and reflective practice. FGM group leaders are cultivated through group process training, field experiences as group leaders, and mentoring.

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Figure A
Group Assessment Protocol & Plan (GAPP)

Assessment of Group Members

General description of clients (age range, needs/problems, skills/strengths, environmental/contextual expectations for performance in roles and areas of occupation*):

Anticipated impact of client profile on group design, formation, and closure (i.e., group/member goals, session plan(s), leader-member role(s)):

Assessment of Group Context
General description of facility (physical environment, emotional climate, administrative structure, facility/program mission and objectives):

Assessment of Environmental Supports and Constraints (organizational culture/ norms, funding, materials, scheduling):

Prior/existing groups:

Anticipated impact of contextual variables on group design, formation, and closure (i.e., leadership, group/member goals, session plan(s), leader-member role(s)):

Motor, Cognitive, Self Regulation/Modulation (cognitive, emotional, sensory), Communication/social, Sensory-Perceptual
*Education/Work, Self-care (ADL/IADL), Play/Leisure, Social Participation, Sleep/rest (AOTA, 2008)

Group type:

Leadership:

    Leader Role:
    Co-leader(s) (if indicated):

Member criteria (age, minimum entrance criteria, terms of group contract):

Group Purpose

Areas of occupational performance:
☐ Activities of Daily Living (ADL)   ☐ Rest/Sleep   ☐ Education   ☐ Work
☐ Instrumental Activities of Daily Living (IADL)   ☐ Play/Leisure
☐ Social Participation

Performance skills:
☐ Motor & Praxis   ☐ Sensory-Perceptual   ☐ Emotional Regulation
☐ Cognitive   ☐ Communication/Social

Client factors:

☐ Values/Beliefs/Spirituality:
☐ Body Structures:
☐ Body Functions:

General Group Goals & Anticipated Outcome(s):

☐ Occupational Performance:
☐ Role competence:
☐ Adaptation:
☐ Health & Wellness:
☐ Quality of Life:
☐ Self Advocacy:
☐ Occupational Justice:

Rationale (theory base, Frames of Reference, evidence base):

Group Format (size, open vs. closed, duration, dosage):

Facilities/Materials:

Group Session Plan:

Specific goals for the group session:

Specific goals for individual members (if indicated):

Activity:

Materials & equipment needed:

Outline for session (proposed time sequence for activity content & process):

Leader(s) role:

Other information pertinent to this session:
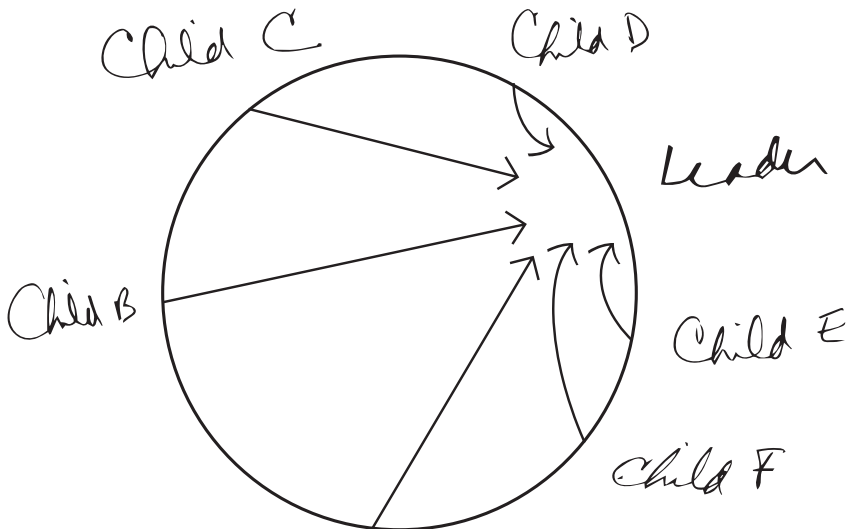
Figure B
Sociogram

Figure C
Group Member Roles*

Roles	Member Names								
TASK ROLES									
Initiator									
Information/Opinion Giver									
Information/Opinion Seeker									
Elaborator									
Coordinator									
Orienter									
Evaluator-critic									
Energizer									
Procedural Technician									
Recorder									
MAINTENANCE ROLES									
Encourager									
Harmonizer/Compromiser									
Gatekeeper									
Standard Setter									
Follower									
INDIVIDUAL ROLES									
Playboy									
Blocker									
Dominator									
Recognition Seeker									

(Benne & Sheats, 1978*)

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Figure D

Group Leader Self-Assessment (GLSA) (Barnes, 2011, 2013)

Directions: Please indicate your Group Leader abilities using the scale below:

1 = strongly disagree   2 = disagree   3 = slightly disagree   4 = slightly agree
5 = agree   6 = strongly agree

1. Conceptualize a group based on group theory _____

2. Provide (optimal) structure for sessions ____

3. Provide an atmosphere of support and caring (*please rate individual items*)

_____ support   _____ genuineness

_____ affection   _____ warmth

_____ praise   _____ acceptance

_____ protection   _____ concern

4. Provide executive functions[2] (*please rate individual items*)

_____ helping set productive norms, rules, goals   _____ managing time

_____ pacing   _____ stopping

_____ suggesting procedures   _____ interceding

5. Provide emotional stimulation (activation) via (*please rate individual items*)

_____ challenging   _____ confronting

_____ modeling personal risk-taking   _____ self-disclosure

6. Help members relate to other members _____

7. Draw out quiet members _____

8. Encourage expression of differences _____

9. Give corrective feedback _____

10. Prompt meaning attribution, helping members process meaning of experiences (*please rate individual items*)

_____ explaining   _____ clarifying

_____ providing a cognitive framework for change   _____ interpreting

_____ translating feelings & experiences into ideas

| *Total* |
| *Score* |

Four Leader Functions (Lieberman, Yalom, & Miles 1973; Yalom & Leszcz, 2005): Emotional Activation; Caring; Meaning Attribution; Executive Function (Items 3, 4, 5, 10). Adapted from: Group Leader Self-Efficacy Instrument (Page, Pietrzak, & Lewis, 2001) with permission, (Items 1, 2, 6, 7, 8, 9).

Figure E

Functional Group Model Leader Adherence Checklist (FGM-LAC) (Barnes & Schwartzberg, 2011, 2012)

Name _____ Session: _____ Activity: _____

Rate leader adherence using the scale below. Add comments to clarify rating.

Key: 1=Never   2=Rarely   3=Occasionally   4=Consistently

Item:	Rating	Comments:
Facilitated meaningful activities		
Activities offered choice		
Adjusted activity demand as needed to match member abilities related to task participation		
Adjusted activity demands as needed to match member abilities related to social participation		
Group structure supports positive member-member interaction		
Facilitates **purposeful action** - goal directed activity or meaningful occupations of members, or exploration of such, members realize needs/goals, discussion facilitates group process		
Facilitates **spontaneous action** - here-and- now actively participate in tasks and group process, effects interpersonal learning and growth (graded to level of abilities)		
Facilitates **self-initiated action** - individuals seek to be a part of group & develop ability to function		
Facilitates **group-centered action** - interdependent action, maximal involvement, interaction of leaders & members, working toward a common task/goal, members display individual & group identity		
Group activity allows for "flow state"[1]		
Group structure allows member to evaluate progress through doing & feedback in the here -and-now		
Group activity allows for nonhuman "transitional object" symbolic of human attachments		
Total Adherence Score		