

JOB SEARCH INTERVENTION

Employment counseling clients who have accepted the fact that they don't have a job may present themselves in one of two ways. Either they may be ready to engage actively in job search activities or they may lack the confidence to move directly into job search. The counselor can help clients who are ready for job search by assisting them in evaluating strategies, developing specific action plans, and practicing skills necessary to effect their implementation. Those clients lacking in confidence may be helped by the provision of more extended counselor support in identifying their marketable skills and may have to be challenged regarding their views of the labor market prior to moving into more active oriented activities. The goal at the end of these job search interventions is for the client to activate a constructive job search.

BURNOUT INTERVENTION

Clients who have initiated a job search and who have implemented their action plans can be faced with either a job offer or rejection. If a client is rejected, the "rejection shock" phenomenon could require a counselor to provide support to the client in dealing with the feelings associated with the rejection. The goal again is to work toward an action plan that would involve a renewed job search. However, if this cycle of job search/rejection is repeated, the job search activities may stagnate. Motivation to develop new strategies may diminish, and the client may begin exhibiting signs of frustration. This may ultimately result in a feeling of general apathy. Throughout these rejection cycles it is important that the counselor listen to the client's feelings and challenge the client to reformulate the plan. It is during this time that counselor support becomes critical, and, ironically, it is also a time when a client would be most likely to drop out of counseling. During these stages

it would be important for the counselor to (a) validate the client's feelings, (b) suggest activities which may help strengthen the client's self-concept, and (c) perhaps suggest new approaches for handling the job search.

SUMMARY

The dynamics of unemployment that we have presented encompass both job loss and job search. In the model, reaction to job loss was described in terms of the stages of grief suggested by Kübler-Ross (1969). The job search component was outlined using a model of burnout proposed by Edelwich and Brodsky (1980). Taken together, the descriptions reflect an integrated approach to understanding the unemployment process. This understanding can be used as one of the bases for formulating counseling strategies with unemployed people.

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There is increasing awareness of and concern and services for abused and neglected children and their families. The subpopulation of abused children who are now adults, however, is generally neglected. This article describes a group treatment program for grown-up abused children and analyzes the ways in which the effects of abuse influence group process and the experience of a group process assists abuse victims.

Group Treatment for Grown-up Abused Children

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During the past two decades in the United States, great strides have been made in the awareness of and concern for abused and neglected children. As a result, a number of services and programs have been developed for the abusive family as a unit and for the children and the abusive parents separately (Bacon,

1977; Center for Women's Policy Studies, 1980¹). It is becoming apparent, however, that services are not readily available for a subpopulation of abused children, namely grown-up abused children who are not yet parents. Al-Anon is a notable exception that is designed mainly for individuals who were raised in alcoholic families. Also, groups are now forming for adults who were victims of sexual abuse as children (Courtois & Watts, 1982; Forward & Buck, 1978; Meiselman, 1978; Tsai & Wagner, 1978).

Child abuse is defined as a situation

in which a child is suffering from serious physical injury inflicted upon him by other than accidental means, is suffering harm by reason of neglect, malnutrition or sexual

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abuse; is going without necessary and basic physical care; or is growing up under conditions which threaten his physical and emotional survival. (Kempe, Silverman, Steele, Droegemueller, & Silver, 1962, pp. 558-559)

Each individual responds uniquely to the circumstances of his or her abuse experience, the response being based on factors such as the type of abuse, its severity and duration, the individual's personality, his or her support system, and so on. Nevertheless, certain psychological reactions such as low self-esteem, self-blame, unresolved anger and an inability to trust others are common to any type of abuse when victims are viewed and studied as a group (Helfer, 1978). Other reactions may relate directly to the type of abuse (e.g., problems with sexuality or sexual functioning resulting from sexual abuse).

This article will report on a group approach to providing treatment for abused children who are now adults but who are not yet parents or, if parents, are now abusive towards their children. The report is based on the experience of three groups that were conducted at an urban state university. We will outline the following: common themes and issues emerging from these groups, the impact of abuse dynamics as played out in a group setting, the efficacy of group treatment and recommended approaches, and strategies in conducting such a group.

FORMATION OF GROUPS

The members of the groups under discussion were victims of many types of abuse (physical, psychological, sexual, neglect) respectively, alone, or in combination. They were self-referred college students (age range 19-45). Their abusive pasts (and for some, presents) continued to impinge on their ability to live their lives effectively. A common emotion of these students was their sense of alienation and aloneness, which they attributed to their abuse experience. Each felt that he or she was the only one to have had such experiences and to suffer continuing aftereffects. The helping professional to whom they disclosed their experiences, a campus minister and a social service professor, thought that a group meeting would allow these students the opportunity to talk to others who had similar experiences. A group was seen as having the potential of breaking the isolation and getting the participants to engage in self-help activities. When the group idea was raised with these students, they were eager to join.

The development of these groups took place in two stages, the first sharing stories and identifying common experiences and emotions among members and the second focusing on present concerns and their resolution. The first stage involved sharing not only the horror stories of violent or neglectful families but also stories of unresponsive helpers such as teachers, counselors, ministers, and physicians. Common beliefs, interpersonal relationship problems, and coping methods (defense systems) were also shared. These included beliefs that members had somehow caused and deserved the treatment they received and that their experience was unique. All found it difficult to trust others or to get close to them, and, as a result, they were often afraid and withdrawn socially. Some members fluctuated between a compulsive need to excel (as a means of proving themselves worthwhile) and a simultaneous fear of gaining the recognition that often accompanies success. In their previous experience recognition often led to ridicule or abuse. In this stage a sense of group identity and attachment developed very quickly. The great feeling of relief at finding persons with similar backgrounds, and reactions to that background, resulted in an immediate bond between members.

As the sense of group moved into the second stage, members began helping one another work on issues in their day-to-day lives that their past abuse made especially problematic. Issues such as confusion and fear related to interpersonal relations, dating and marriage relationships, academic achievement,

and adult-to-adult relationships with parents were frequent topics. The resolution of frightfully overwhelming, and sometimes paralyzing, anger was a constant source of struggle.

It was in this stage of the group formation that most of the difficulties developed. Frequently individual members suffered severe personal crises that not only affected their ability to function but also the ability of the whole group. Often one person's crisis would initiate a similar reaction in another member or would trigger inappropriate defense mechanisms because of similarities between the present experience and past abuse situations, for example, anger of any kind would trigger fear and avoidance. Thus it was often difficult for members to assist one another because they were incapacitated by their desire to avoid the painful or fear-producing emotion involved, because they became involved in their own needs, or because of their own lack of skills in responding to others or being responded to. These crises also were very time consuming and often did not allow adequate "air time" for all the members. These factors often affected the ability of a group to become a working group that accepted responsibility for its own life and the welfare of its members. As a result, the group leaders sometimes became involved in what was essentially one-to-one therapy or in providing the primary emotional support and assistance for those in crisis. Maintenance functions as well as task and process functions often became suspended during these crises.

It became increasingly clear that structures and boundaries were essential for the functioning of this kind of group. Chaos has been a way of life for most abuse victims. Structure and consistent procedures are unfamiliar and even uncomfortable for them. In the groups most members were resistant to an imposed structure (i.e., specific beginning and ending procedures, time limits for each person, even homework exercises for between sessions), but in the end they acknowledged that more was accomplished when a structure was in place.

Because many members function at low levels interpersonally, are in periodic crisis, and often revert to defenses (withdrawal and avoidance) that worked for them in their families but that are ineffective in groups, members must be taught feedback techniques, must be helped to state their observations about group behavior, and must be made to take a more active role in responding to one another. The leaders must constantly refuse the roles of "answer person" or "rescuer" for the group, replacing them with the roles of observer and process manager.

Despite the difficulties inherent with these groups, members were remarkably loyal to each other, were faithful about attending, and were motivated to change. The rapport that developed early in the groups remained throughout. Many issues were unresolved at the end of the groups, which met for from 6 to 9 months; yet signs of learning and improvement for each member were apparent, such as improved self-concept and self-confidence, giving and receiving of feedback, and support and responding to others.

EFFECTS OF ABUSE ON GROUP PROCESS

The remainder of this article will be an elaboration of issues arising from being abused and their impact on group process and of recommendations for leading such a group. These groups have many unique characteristics as does every group; however, the authors believe that process and personal issues that came up are likely to surface in other groups of this sort. The dynamics and aftereffects of childhood abuse become enmeshed with the group process and warrant special leader preparation and consideration.

Although a group experience can be important, valid, and even necessary for child abuse victims, there are problems inherent in bringing such persons together. Their abuse experience can create dynamics that negatively affect group proc-

ess. As noted in our groups, abuse victims tend to form immediate group identification and attachment once their experience has been shared and they have discovered others like themselves. This can be attributed to the fact that members exhibit great sensitivity to and understanding of another person's moods and needs. Although this ability to empathize with another contributes greatly to early group cohesion, it also had a negative impact because this skill has actually been learned as a defense mechanism. This ability to read another's moods was necessary to avoid triggering violent outbursts. Therefore, these very effective empathy skills are developed to avoid contact rather than initiate it. Great fear of closeness and trust is really the ruling emotion. As a group, they tend to be very defensive and many are lacking interpersonal skills. They are extremely sensitive to criticism of any sort and are afraid of criticizing or offending others. Often times, the former was accompanied by verbal or physical assault; the latter could trigger abuse. The fear and defensiveness are counteracted by neediness. We found these individuals desperate for love and attention and highly motivated to "find a way out" because their emotional pain is so great. What results in a group setting is a tug of war of sorts: members wanting closeness, understanding, and relief while running away from it and being too scared, insistent, or inexperienced to get their needs satisfied.

Group leaders need to understand the present behavior in its past context in order to assist the individuals to understand and work through it. Defense mechanisms once used as psychological survivor skills are often in evidence. Group members can benefit from learning that although these behaviors were adaptive when used as protection, they are maladaptive out of context. New skills need to be learned. For example, in our groups, co-leaders had to work long and hard to make the feedback process work effectively. Any kind of feedback may be viewed as negative criticism. Members avoid hearing it because of the expected pain. They avoid giving it because of fear of retaliation, instead employing indirect, often passive-aggressive means. The value of feedback needs careful discussion along with instruction and practice in giving and receiving gentle, direct feedback. Other issues that are brought into the group and can negatively affect the group process are the following: intense anger, often unacknowledged and expressed indirectly; self-contempt or self-hatred, which abused children often feel and which may be projected to other group members because of their similar backgrounds or to leaders because of their similarities (in sex or authority) to their parents; lack of control, helplessness and powerlessness that may be expressed in self-defeating behaviors and defeatist attitudes both inside and outside of the group; survivor skills such as repression, detachment, denial, and avoidance, which make it difficult to address and work on problem issues; and ambivalence about the parents and family that may get played out with the co-leaders and group members and that may, at times, confound progress.

VALUE OF GROUP PROCESS

Despite the difficulties inherent in this type of treatment, groups can be very useful. The group setting is one that demands interpersonal interaction, the giving and receiving of feedback and the establishment of trust and closeness. It provides opportunities for members to express needs and have them filled and to share fears and have them assuaged. It is also an arena in which past and present anger can be expressed without fear of retaliation and without fear of losing control. In short the setting provides a means of confronting the isolation common to abuse victims; it also provides a forum in which victims can learn and experiment with basic social skills and feedback and it can be adapted for different settings and groups. We recommend a group size of six members maximum

to allow adequate "air time" for each member and for processing behavior.

SKILLS NEEDED BY GROUP LEADERS

The experience of these groups has taught us that leaders must have knowledge in the dynamics of abuse as well as knowledge, training, and experience in group dynamics. As discussed previously, the repercussions of an abusive family setting (i.e., defensiveness, low self-esteem, role confusion, fear of closeness, lack of trust) are unconsciously carried over into the group setting. Typical group process can easily be subverted. Herbruck (n.d.) has noted that maintenance functions are the most difficult for these types of groups to perform. She recommends that the group begin with a tight structure to minimize ambiguity and to focus members on certain tasks and behaviors. For example, group exercises to focus on feelings and to practice sharing and responding are very useful. Other elements of structure such as the establishment of ground rules for behavior, attendance and participation, discussion of group and individual goals and expectations, and the establishment of specific meeting times and locations are similarly important. The leaders must be prepared to actively process the group and comment on what is taking place. This behavior serves as a model for group members who as the group develops should be encouraged to similarly share their observations and reactions.

Lest these comments seem overly cautionary, it should be said in conclusion that the leaders of these groups and the various participants are unanimous in recommending such an experience for other adults who were abused as children. There seem to be few opportunities available for former abuse victims to deal with the effects of their past unless they become parents and find themselves continuing the cycle in their own families. (In fact, we are aware of a group of former abuse victims in a major metropolitan area that have been unable to find professionals willing to work as therapists with their group.) It is important that the growing awareness of child abuse and its extent both in numbers and effects not stop at the age of legality but that a variety of treatment programs be considered for the former abuse victims. These programs, while oriented to the personal growth of the members, may also in the long run be preventative of future individual dysfunction, marital breakdowns, and the continuation of the child abuse cycle.

¹Included in the April, May, and June 1980 issues of *Response to Violence in the Family* was a listing of programs that provide services for men who batter. Many of these programs provide services for the entire family and not only the abusive male.

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