Effects of Prosocial to Improve Group Functioning Among Developmental Support Agencies' Brock Brock

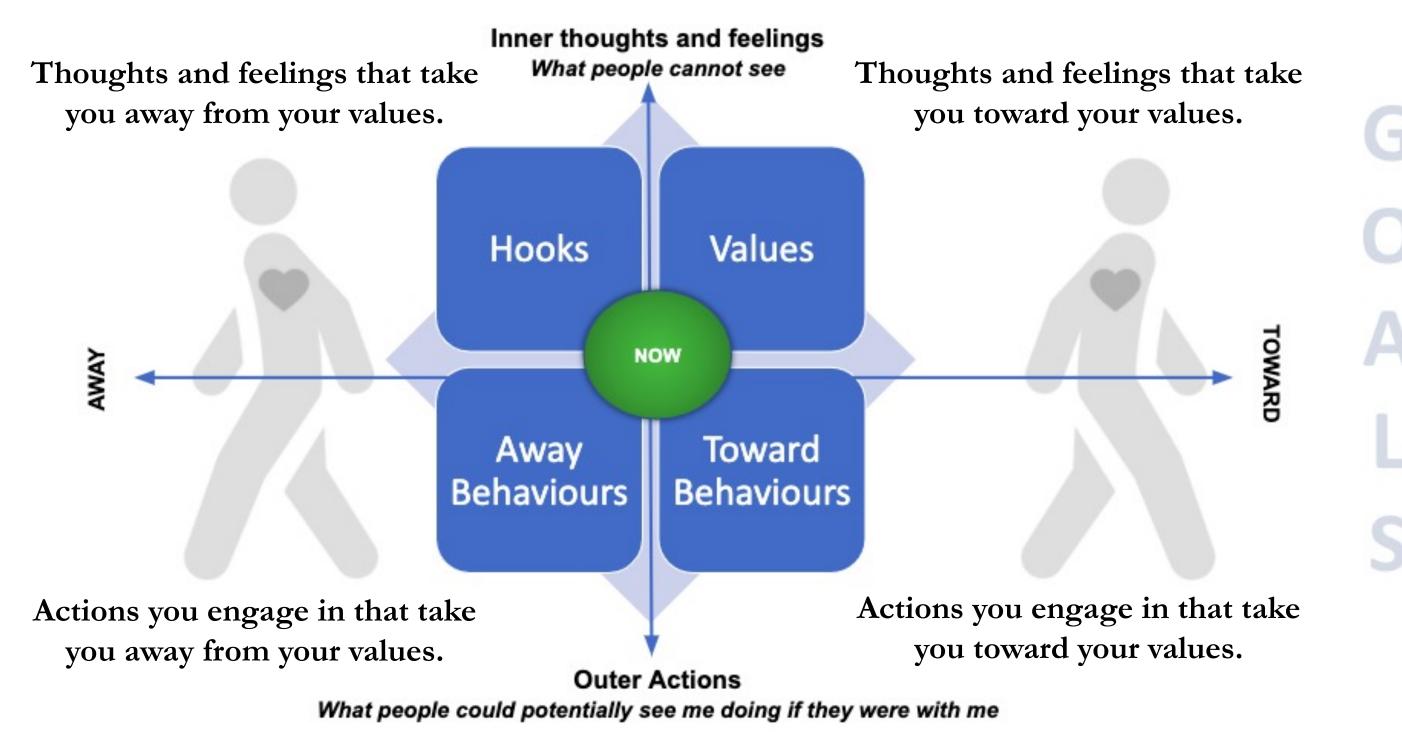
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Background

- Acceptance and Commitment Training (ACT) techniques have increased happiness and decreased the use of physical restraints in adults with intellectual and developmental disabilities (IDD) ^{1, 2}
- Research is limited on applying mindfulness-based techniques to increase psychological well-being and resilience of direct support agency (DSA) workers who experience high stress levels ¹
- COVID-19 increased uncertainty and compounded stress and anxiety, as managers work to provide quality care and maintain client safety
- Increasing psychological well-being is important to improve quality of care and positive outcomes for the adults they support ¹
- Prosocial can enhance group functioning by teaching the balance of individual interests while accommodating groups interests and values ³

Prosocial Process

- Prosocial is an evidenced-informed intervention rooted in contextual behavioural science, incorporating ACT and Ostrom's Core Design Principles (CDP) ³
- Prosocial aims to improve group functioning and foster psychological flexibility working to achieve a shared group goal ³
- The ACT matrix helps to improve perspective taking and trust among group members to help them achieve their goals ³



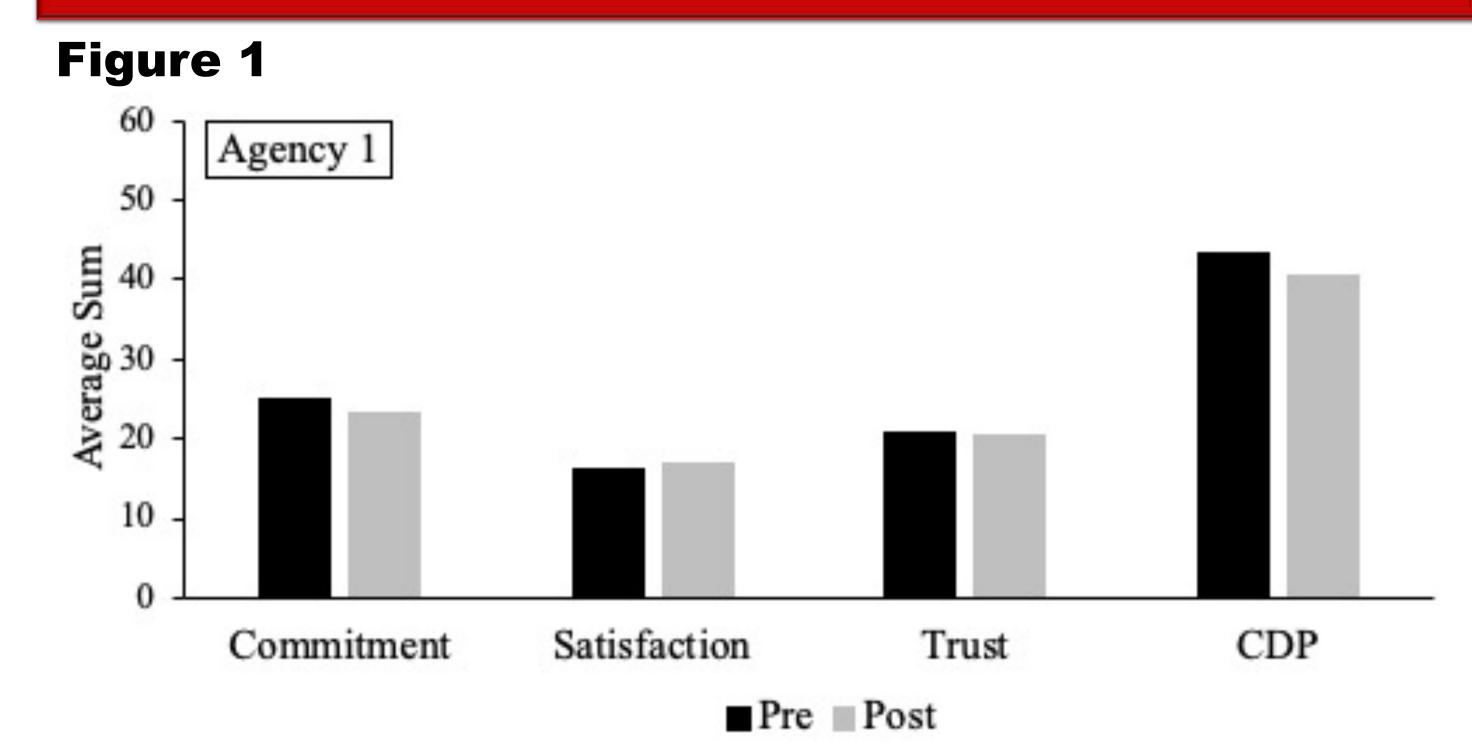
Core Design Principles

- 1. Strong group identity and purpose
- 2. Fair distribution of cost and benefits
- 3. Inclusive decision making
- 4. Peer-based monitoring agreed-upon behaviours
- 5. Graduated responding to increase helpful and decrease unhelpful behaviours
- 6. Fast and fair conflict resolution
- 7. Authority to self-govern (1-6)
- 8. Appropriate relations with other groups

Purpose

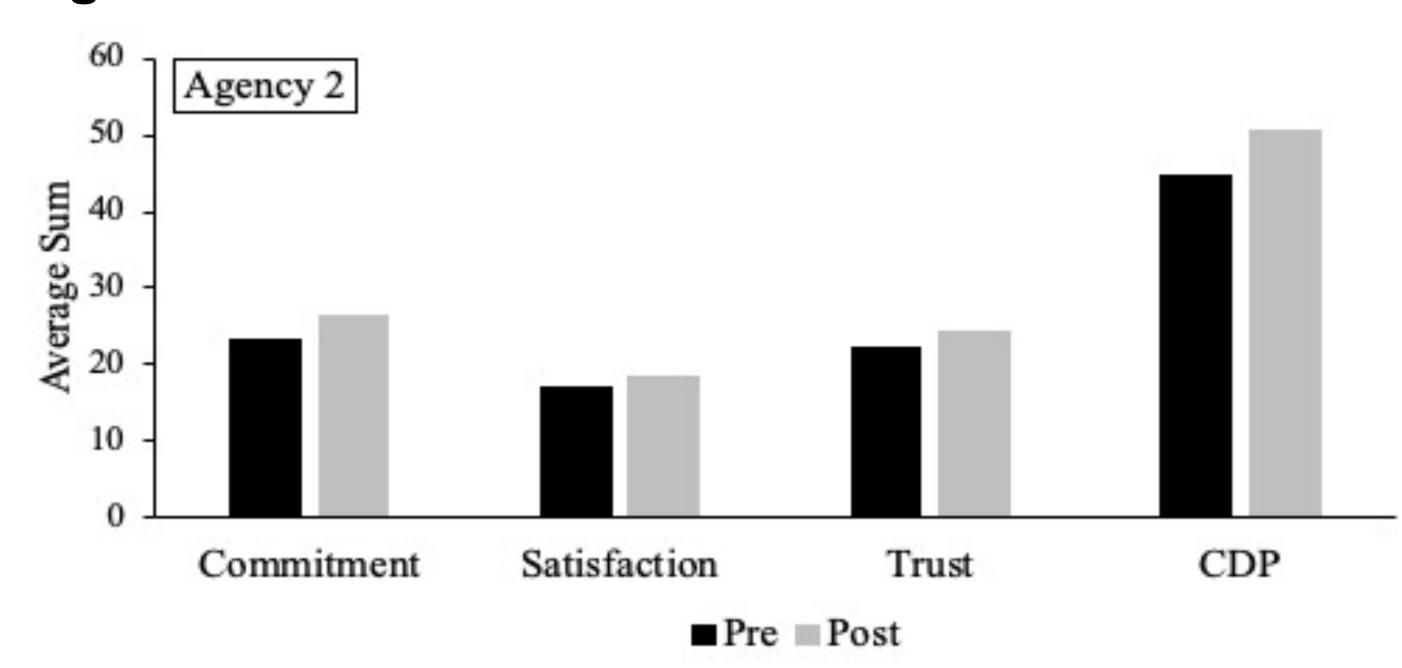
This study examined the effects of the Prosocial process on improving group cohesion and group functioning among two DSA management teams during the COVID-19 pandemic.

Results



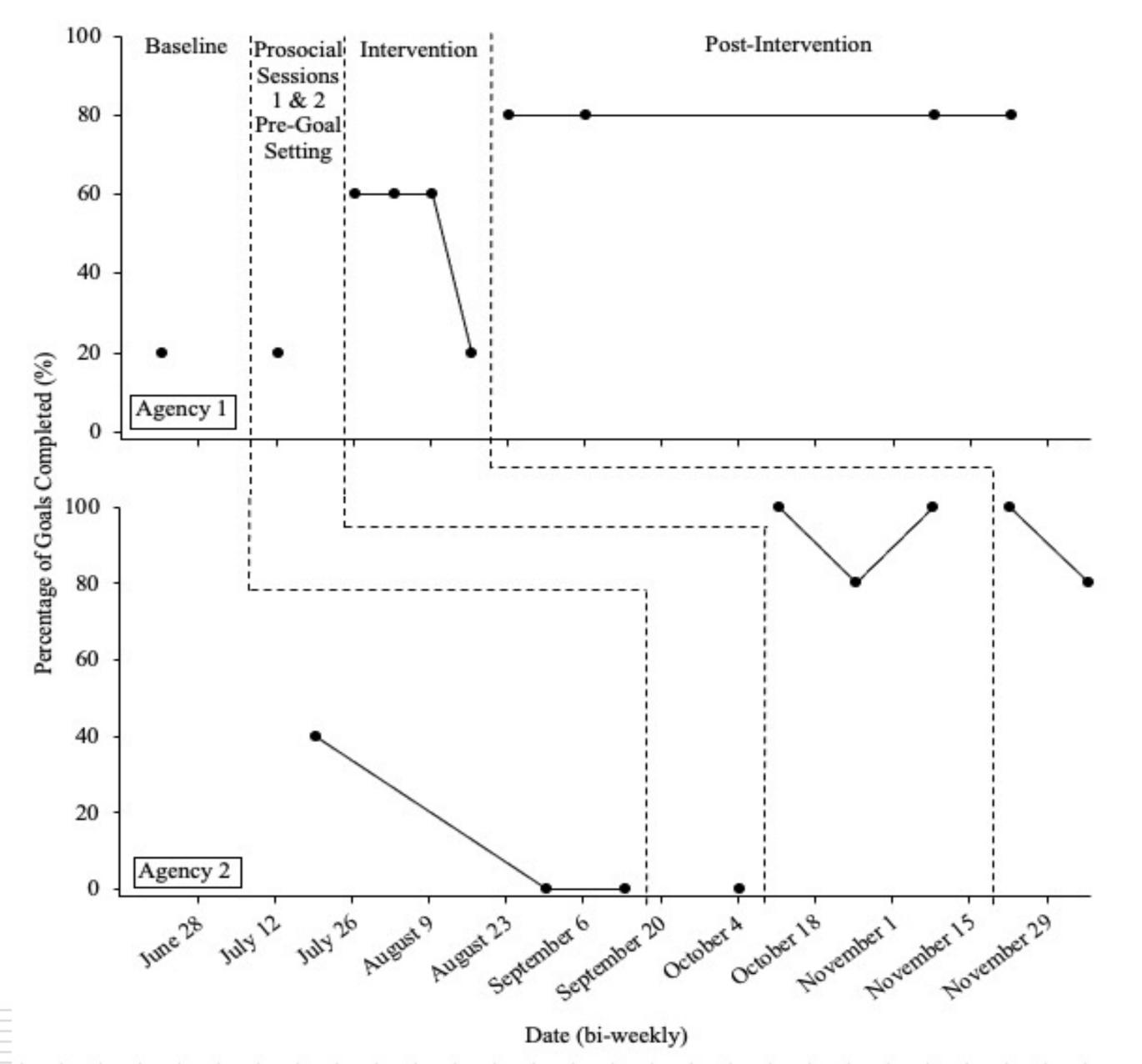
Note. Scores rated on a 7-point scale (1 = strongly disagree; 5 = strongly agree)

Figure 2



Note. Scores rated on a 7-point scale (1 = strongly disagree; 5 = strongly agree)

Figure 3



Measurement

Participants: Two DSA management teams including senior management, program managers, and coordinators ($n_1 = 12$, $n_2 = 7$). **Procedure:**

Prosocial Steps

- 1. Initial measurement and evaluation of group interactions
- 2. Complete individual matrix
- 3. Complete group matrix
- 4. Use the core design principles to consider team interactions
- 5. Create a plan of action
- 6. Final measurement and evaluation of group interactions

Data collection:

- Prosocial CPD Survey³ (scale & open-ended questions)
- Direct observations of group-developed goals during management meetings (see Figure 3). Goals included increasing meeting engagement, improving team connectivity, and addressing unhelpful behaviours.

Results

- No significant reported improvements on group well-being, although slight improvements were reported for Agency 2 (see Figure 1 and 2)
- Increase in percent of group goal completion was observed in both agencies during the Prosocial process (see Figure 3)
- Individual well-being measures indicate an improvement in psychological flexibility and compassion with a reduction in stress and burnout
- At follow-up, individual & group benefits and continued use of Prosocial were rated on average a 4; a lot and 5; extremely respectively

Discussion

- Non-significant group well-being changes could be a result of small sample size, bias in self-report, minimal variance in scale & limited time between measurement
- Direct observation results suggest the Prosocial process may improve group cohesion and functioning in accordance with the group's goals
- A reported strength at follow-up was improved team morale and support, with technological difficulties during meetings and virtual delivery were noted as limitations.
- Goal completion could be improved through incorporating collaborative goal revision for consistently underachieved group goals into Prosocial
- Next steps: implement Prosocial on a larger scale using champions from both DSA's to inform the impact Prosocial has on group functioning

Funding

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References

¹Noone, S. J., & Hastings, R. P. (2011). Values and psychological acceptance as correlates of burnout in support staff working with adults with intellectual disabilities. *Journal of Mental Health Research in Intellectual Disabilities*, 4(2), 79–89. https://doi.org/10.1080/19315864.2011.582230
²Singh, N. N., Lancioni, G. E., Karazsia, B. T., Myers, R. E., Winton, A. S. W., Latham, L. L., & Nugent, K. (2015). Effects of training staff in MBPBS on the use of physical restraints, staff stress and turnover, staff and peer injuries, and cost effectiveness in developmental disabilities. *Mindfulness*, 6(4), 926–937. https://doi.org/10.1007/s12671-014-0369-0

³Atkins, P. W. B., Wilson, D. S., & Hayes, S. C. (2019). Prosocial: Using evolutionary science to build productive, equitable, and collaborative groups. New

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