**EFFECTS OF PROSOCIAL TO IMPROVE GROUP FUNCTIONING AMONG DEVELOPMENTAL SUPPORT AGENCIES’ MANAGEMENT TEAMS DURING CORONAVIRUS**

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**Objective:** The Coronavirus pandemic has led to increased stress on management teams within developmental support agencies (DSA) as they determine how to best provide support to adults with developmental disabilities safely. These challenging and unprecedented times have demonstrated the importance of group cohesion and psychological flexibility (e.g., tolerance for ambiguity, emotional regulation, and problem-solving) to facilitate continued quality care. The purpose of this study was to determine if the *Prosocial* process can be implemented to improve group cohesion within the management teams. *Prosocial* is a process-based intervention used to improve psychological flexibility and group functioning rooted in contextual behavioural science (Atkins et al., 2019). It incorporates Ostrom’s core design principles to evaluate group functioning and Acceptance and Commitment Training to facilitate change (Atkins et al., 2019).

**Method:** A quasi-experimental (waitlist-control) design was used to examine the effects of *Prosocial* on improving group functioning across management teams. The *Prosocial* process included the virtual delivery of four sessions to two DSA management teams (n1=12, n2=7). We collected data on group functioning and social validity through direct observation and questionnaires. We also conducted direct observations of group engagement, functioning, and progress toward goals during bi-weekly management meetings. Questionnaires assessing the impact of Coronavirus, group functioning, individual and group well-being, and psychological disagreements were distributed before, during, and after the *Prosocial* process. We also obtained agency level service provision data and feedback on the *Prosocial* process from participants as indicators of social validity.

**Results:** Preliminary analyses indicated progress toward group goal achievement. Improvements in group collaboration and functioning were identified through a content analysis of open-ended survey questions. Participants reported an increased frequency of comments related to their commitment to goals and group connection and a decrease in group compartmentalization following the implementation of *Prosocial.* We found no significant improvements in the group functioning rating scores among the DSA management teams. Following the implementation of the *Prosocial* process, service provision data from the agencies, specifically the administration of chemical restraints, medical administration errors, and client and staff incident reports, showed slight reductions in occurrences.

**Discussion/Conclusion:**  To the authors’ knowledge, this study was the first examination of the *Prosocial* process conducted with management teams in the developmental service sector. Results of this study will be used to inform the implementation of *Prosocial* in both agencies on a larger scale.

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