The Orientation Group PSOT's Approach to Welcoming and Further Resourcing Clients

Melba J. Nicholson Sullivan, Ph.D. Bellevue/NYU Program for Survivors of Torture (PSOT)

Learning Objectives

- To describe a manualized group treatment model for survivors of torture
- 2. To begin designing a group session unique to your clients' needs and program's resources
- To identify the benefits of PSOT's group work in healing from torture
- 4. To share group intervention strategies with peers

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Overview

- Overview of PSOT
- Orientation Group Description
- Benefits and challenges of group
- Homework
- Question and Answer

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Large Group Exercise: Experiences of Group Work

- Think of a group you have participated in (e.g. psychotherapy, religious, parenting, support, class)
- Did the group serve a function for you that could not have been met if you were on your own or with only one other
- · What role/function(s) did you serve in the group?
- What was your withdrawal from the group like?
- What is your most fond memory of the group?

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The Program

History

- Setting
- Personnel
- Strengths
- Limitations

The Clients

- Demographics
- Functioning
- Strengths and Resources
- Utilization of the Program
- In the context of NYC
- Barriers to Care

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PSOT Orientation Group: Structure

- · 4-session, weekly psychoeducation support
- 1.5-2 hour long sessions
- · Semi-structured manualized framework
- · Co-leadership (often cross discipline) with supervision by licensed clinician
- Orients clients to program services and personnel, and to their own bio-psycho-social health
- Led in a single language (with use of live or telephonic interpretation if needed)
- Didactic and experiential components each session
- Guest speakers

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PSOT Orientation Group: Membership

- Adult clients
- Recently admitted to the program
- History of torture, significant human rights abuses, or exposure to wartime trauma
- Presenting needs:
 - loss of community, isolation
 - disruptive trauma symptoms
 - difficulty navigating NYC and its systems,
 - confusion about the asylum process and their rights as immigrants

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PSOT Orientation Group: Goals

- Increase knowledge of trauma and common traumatic reactions
- · Strengthen coping strategies
- Provide mutual support among participants
- Further triage participants' needs and refer
- Increase knowledge of program services and community resources and how to access them

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PSOT Orientation Group: Approach

Framework

- Warm and welcoming
- Safety and respect
- Confidentiality
- Empowerment
- Value cultural perspectives and experiences
- Strengths-based

Objectives

- Psychoeducation about trauma
- Cognitive-behavioral coping strategies
- Foster community and connection
- Triage and screen
- Review PSOT services

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4 Elements Bracelet



Earth: Grounding/safety in the present moment

Wind: Calming Breath

Water: Relaxation and Control

Fire: Hopeful Imagination

Rationale: External and internal stress triggers have a cumulative effect.

Goal: To reduce and prevent stress and promote ability to stay in "window of tolerance."

Plan: Wear a 4 elements bracelet on wrist and every time it is noticed perform brief self-calming exercises

Session by Session

PSOT Orientation Group: Session 1

- · Member and leader introductions
- Rules and expectations
- Introduction to the program and hospital
- · 4 elements bracelet
- 2 coping strategies: Earth-grounding and

Wind-deep breathing

· Homework: skills practice

PSOT Orientation Group: Session 2



- Review homework
- Discuss trauma, posttraumatic stress disorder (PTSD), and depression
- Presentation: de-mystifying psychopharmacology Introduce thoughts-emotions-behavior-physical sensations paradigm
- 2 coping strategies: thoughts & emotions tracking, pleasant event scheduling
- Homework: skills practice

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PSOT Orientation Group: Session 3

- Review homework
- Presentation: immigration and asylum process overview
- Process reactions to the immigration discussion
- 2 coping strategies: Water-calm and control, progressive muscle relaxation
- · Homework: skills practice

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PSOT Orientation Group: Session 4



Coping strategies: Fire-vision board, hope and imagination

- Review homework
- Review information from previous sessions
- Process reactions to group coming to an end
- Present future services at and outside of PSOT: ongoing group therapist, social services provider
- After group, facilitators make service recommendations for each client and facilitate engagement

PSOT Orientation Group: Client

Benefits

- Reducing Isolation
- Normalization of experiences "I'm not the only one"
- · Breaking the Silence
- Healing through community
- · Culturally syntonic community support
- · Recipient and giver

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PSOT Orientation Group: Client

Challenges

- Fear of being with others who are unknown
- · Fear of what they might have to say
- Fear of what others will talk about
- High avoidance to manage other trauma symptoms
- · Lack of familiarity with group therapy
- Hard to imagine effectiveness of coping skills

PSOT Orientation Group: Facilitator

Benefits

- Semi-structured; time-limited
- Resource-wise
- Review/learn basic coping skills and CBT principles
- Increased confidence in working with clients in all services
- Supports management of workplace stress

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PSOT Orientation Group: Facilitator

Challenges

- Working with an interpreter
- · Managing timeliness
- Time management
- · Process vs. content
- · Navigating Co-facilitator and supervisor relationships
- Difference in linguistic skills

YOUR Homework from Orientation Group

· Join staff from your own organization and: begin to design a 5th session OR

begin to design your own multi-session group treatment model

- To run for your own clients (e.g. treatment centers)
- To offer to another program (e.g. if you have an expertise but
- don't provide services to groups of clients)

 To be modeled off of PSOT's group or to address entirely different needs of your population
- Next Steps: Write down group model or session proposal and the date when you will meet with colleagues to finish
- Incorporate 1 or more of the bracelet exercises into your teaching, workday, or clinical practice

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