

Group Therapy Skills Self-Assessment

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SOCW-617: Advanced Clinical Practice

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April 25, 2021

Segment One: Transcriptions, Comments and Corrections

Getting Started

Clinician:

“okay hi guys um my name is Susan and I want to welcome all of you to the group on PTSD um this is going to be a 12-week group session and this is our first session um and we're going to meet every friday at 630. I want to commend all of you for being here this is a really big step in our progress for our lives and dealing with our PTSD. Um I want to just go ahead and get started with getting a little bit acquainted with each other doing some introductions. Like I said my name is Susan and I'm going to be your therapist and your facilitator for this group um if you notice in the bottom left corner of your zoom screens you're going to have a number next to your name. Those are just gonna help us a little bit make it a little bit easier for when we're answering questions and going around we're gonna start with one the first time and go all the way to four so if you want to just introduce yourself tell us your name, what you prefer to be called. where you're from and what you hope to get out of this group in the next 12 weeks.”

Clients:

“Um yes my name is Liz....”

Comment: I can improve here by limiting the number of times I say ‘um.’ I also found myself to be a little too repetitive with my introduction. My saying “guys,” was could be considered sexist as well, and should have been stated differently.

Correction: “Hello everyone, my name is Susan, I will be your therapist and facilitator for these group meetings. I want to welcome you all to this 12-week group therapy session on PTSD. We will meet every Friday at 6:30 pm for the next 11 weeks. I want to commend you all for taking this first step, it can be the hardest part when dealing with any type of mental health problem. You should all feel very proud, as I am of you for just showing up. I want to get started by doing some introduction, you will notice in the left bottom corner of your screens there is a number assigned to you. We will be using these to make it a little bit easier to follow the order of who is speaking throughout our meetings. We will start with 1 and work our way to 4. If you could state you name, or what you prefer to be called, where you are from and what you are hoping to gain from this group experience over the next 12 weeks.”

Purpose and Focus

Clinician:

“I did mention earlier that we're going to really focus on triggers and what triggers for PTSD are. We're going to do a couple different exercises um I would really like to start out by just saying triggers are different for everyone. They can be a smell. they could be a sound they could be a thought, um it could be something you see, it could be something you hear. It's it's very very personalized when it comes to our own personal trauma and this is why I wanted to start with this um it is very difficult to move forward on how to help ourselves kind of desensitize to our triggers if we're not able to identify them first.”

Client:

“Um I mean I can go first okay...”

Comment: I didn't say... “The purpose of this group is...” I rather spoke about it in my introduction and went into more detail about specifics regarding the topic.

Correction: “The purpose of these group sessions is to dive into the thoughts, feelings, and beliefs encompassing our PTSD and how that affects our lives individually. An important aspect of understanding and moving through our PTSD is to understand triggers, what they are and how they affect us personally. Triggers are different for everyone and can be visual, scent, physical, or even auditory....”

Demonstration of Rounds

Clinician: “We're gonna start with one the first time and go all the way to four so if you want to just introduce yourself tell us your name, what you prefer to be called. where you're from and what you hope to get out of this group in the next 12 weeks.”

Client: “Um yes my name is Liz I'm from Alabama and what I hope to get out of this group is just honestly um just some healthy coping skills and just helping identifying triggers um so that I'm not so caught off guard by them.

Clinician: “Okay that's really um that's really a great thing to be able to do is identify your triggers list um and that's actually something that we're gonna start working on today. Um so I really appreciate you sharing and it's great to meet you. Number two?”

Client: My name is Joshuwa Shelton um but I I go by Josh that's fine. Um I am from North Carolina, great state it's pretty awesome actually. I don't know who's all been to North Carolina, has anybody been? No?...”

Clinician: “okay, well we can definitely talk about that further um throughout the sessions and kind of get a hold on that better for you, thank you so much Josh it's great to meet you.”

Client: “My name is Samir and that's what I normally go by. I am from Michigan...”

Clinician: “Thank you Josh or I'm sorry Samir thank you very much um that is uh definitely something that we're going to be working on over our next 11 sessions after today. Um and I hope that you know we're able to get there for you to get yourself a little bit more comfortable um is great to meet you Samir number four what about you?”

Client: “Yeah my name is Hannah. I'm from Tennessee...”

Comment: I did a good job using the number system, I chose to do this because of the Telehealth system we are using to ensure everyone spoke. I called Samir, Josh by accident and this is a huge mistake as a professional.

Correction: “We will start with 1 and work our way to 4. If you could state you name, or what you prefer to be called, where you are from and what you are hoping to gain from this group

experience over the next 12 weeks.” [1 answer] “Liz, it is so great to meet you and I’m glad you are here with us. Being able to identify triggers is something that we will go into depth on later in this session as well as later sessions. I hope we are able to help you out with that throughout our meetings, thank you for sharing.” [2 answer] “We will most certainly be talking about that in future sessions Josh. I hope we can get a better hold on that for you, thanks so much for sharing.” [3 answer] “Thank you Samir, that is something we will be working on as well over the next 11 sessions. I hope that we are able to get you where you hope to be and a little bit more comfortable as well.” [4 answer] “Hannah, it’s so great to meet you, I appreciate you sharing, and we will certainly work on some desensitization skills over our session, thank you for sharing.”

Exercises and Yalom

Clinician: [Exercise 1] “I did mention earlier that we're going to really focus on triggers and what triggers for PTSD are. We're going to do a couple different exercises um I would really like to start out by just saying triggers are different for everyone. They can be a smell. they could be a sound they could be a thought, um it could be something you see, it could be something you hear. It's it's very very personalized when it comes to our own personal trauma and this is why I wanted to start with this um it is very difficult to move forward on how to help ourselves kind of desensitize to our triggers if we're not able to identify them first. So that being said our first exercise I want to go around the room and talk about um an experience that we've had over the last you know looking back over the last two or three weeks something that you've gone through that has set you into a PTSD episode. Um that's given you some really strong emotions and those really strong triggers. So what I want you to do is explain what happened like just the situation of what happened and really focus on what you were feeling in that moment. Do we have a volunteer that would like to start first or do you want me to just pick a number?”

Client: “Um I mean I can go first okay yeah okay um so I guess what I I normally get triggered when I’m driving but especially the interstate. So that was definitely a recent moment where I became triggered and um yeah it was it. Did you say what was the other part of the question what were you feeling in that situation? Um well I was feeling fear mostly but I mean I could also feel myself like I was sweating my heart was racing um and I just kind of almost felt frozen and then like there was no exit um yeah.”

Clinician: “Okay so you were frozen um, you kind of cut out a little bit for me. Did you say that you werer kind of feeling scared and fearful in that moment? [head non] okay yeah um I think that that is um something that's really hard to deal with especially when that fear is so strong um that it is kind of paralyzing. Um what were you able to do in that moment to kind of bring yourself back and kind of get going again because driving on the interstate can be something that's really dangerous you know if we do freeze up.”

Client: “Yeah definitely and what I try to do is I just try to kind of like focus. I try to focus just on my breathing and what I can control. Um and just try to like block out the the thoughts and

the fear and that sort of thing and yeah. But sometimes I'll just like picture like being in a car accident that's why I'm fearful of it anyway...

Comment: I did a good job checking in with this client, asking deeper questions. As she opened up more, I was able to understand why driving is a PTSD trigger for her. I believe I was empathetic and asked questions that were hard to answer, but also helped her self-identify her coping mechanisms and triggers.

Correction: "Now that we are a bit more acquainted with each other, I'd like to dive right into our first exercise. I want you all to know that throughout these sessions, we are going to talk about some hard topics. Looking within ourselves, to understand our PTSD better. This first exercise is really focused on our triggers and how to identify the feelings and emotions we have that make them so hard to deal with. I want to go around the room and have everyone share an experience from the last few weeks that was a triggering situation for them. If you could really try to identify those emotions that you felt during the situation. Do we have anyone who'd like to go first, or we can use the number system as well."

Clinician: [Exercise 2] "So Liz mentioned earlier this deep breathing that she does to kind of calm herself down when she was driving and this is actually a really important exercise that research has shown to work. That it can lower your heart rate it can instantaneously kind of just make you feel much more relaxed. It doesn't work for everyone but it is something that's super easy to do and I want to make sure everyone knows how to properly do it so you can try to incorporate this into your lives in the future. So if everyone would just sit up as straight as you possibly could we're going to do this together. I want you to close your eyes and we're going to inhale through our nose for five seconds, hold our breath for five seconds, and then we're going to exhale through our mouths for 10 seconds. I know that seems like a long time just trust me here so let's breathe in...three four five hold three four five and exhale...we're going to do it one more time breathe in... hold...and exhale...and when you're ready just kind of slowly open your eyes back up and come back to group. Okay so I do want to hear feedback from everyone. This is something that can help people some people. It, it doesn't work for everyone but I want to hear your feedback and I want to do another emotional check-in just because we went from talking about some really hard stuff to doing an exercise that research has shown is proven to work. So Samir let's start with you. Um how are you feeling now that we've kind of taken that few minutes to kind of reset the same scale as your uh zero to ten?"

Client: "Um a little bit better I think I'm down to a five good I'm not sure if I can get lower yet um it's still this is still pretty um intense situation, but it helped a little bit yeah."

Comment: I believe that this exercise was a great choice to use after talking about a heavy, vulnerable topic such as personal triggers. One client was very triggered during the previous exercise so starting with him to share feedback seemed like the right choice. I did an emotional check in here to make sure that all of my clients were handling the more difficult content well.

Correction: "As Liz mention earlier, she does deep breathing to help herself calm down. Research has shown that deep breathing is a great technique to use when we feel anxious or overwhelmed and the results can be instantaneous. It lowers cortisol levels, as some of you may

know cortisol is directly linked to stress-related illnesses such as heart disease, heart attack and stroke. Individuals with PTSD have been known to have higher cortisol levels, so this exercise is something we can do to be proactive about our health and wellbeing. We will do this exercise together as a group. If we could all close our eyes and sit as straight up as possible, as though a string is attached to your spine and you are being pulled up. We will inhale for 5 seconds through our nose, hold our breath for 5 seconds and then exhale for 10 seconds through our mouths. So let's inhale, 2, 3, 4, 5. Hold, 2, 3, 4, 5 and exhale, 2, 3, 4, 5. In.... hold.... out.... And one more time [wait 20 seconds]. Now when you're ready slowly open your eyes and come back to the group. I want to hear from everyone on how you feel. Let's start with number 4 and work our way down with an emotional temperature check on that same scale: 1 being no anxiety, completely relaxed and 10 being the most anxious you've ever felt. I also want to hear what your thoughts on the deep breathing are please, number 4 how are you doing?

Clinician: [Yalom - Universality] "I'm really glad to hear that. Yeah just kind of lengthening it out kind of makes it a little bit easier to remember that 5 5 10. It's just kind of like a little jingle to make it easier um and it kind of just helps you focus. So, I'm really glad that this helped everyone in their own way whether it's small or large"

Comment: I think I could have done a bit more to show that everyone's responses were connected rather than just saying, "it helped everyone in their own way."

Correction: "I'm so glad this this exercise had such strong results for each of you. This type of deep breathing exercise, especially after such a vulnerable moment talking about our triggers, really connects all of us and allows us, as a group, to slow down and just take a pause. Whether it helped you a small amount or a large amount, this is a coping skill we can all use from here on out during a PTSD triggering moment or even if we are just feeling a little overwhelmed."

Problem Situation

Client: "My name is Joshuwa Shelton um but I I go by Josh that's fine. Um I am from North Carolina, great state it's pretty awesome actually. I don't know who's all been to North Carolina. Has anybody been? No?"

Clinician: "Yeah I used to live in North Carolina."

Client: "Oh sweet, well it's a pretty fantastic state. I mean Asheville is one of the most beautiful places in probably the country. It's fantastic a lot of people retire there, it's a great state you want to send your parents somewhere you know –"

Clinician: "–Yes and what are you hoping to get out of this Josh?"

Comment: This was a great way to affirm what the client was saying, listening to him and stating I had previously lived there. When he kept going on about North Carolina, I interrupted and asked the question he was supposed to be answering again to get him back on track.

Correction: "North Carolina seems like a wonderful place Josh, what is it again that you are hoping to get out of our sessions over these next 12 weeks?"

Closing

Clinician: “Our meeting is coming to an end and I do want to just kind of go over what we did today. We got to know each other, we all had our introductions and we went over our expectations for our group. We set our group rules together because this is not my group this is our group and we're here for each other and to better ourselves. So, I think that was really important. We kind of talked about how important it is to be able to identify our triggers and we went ahead and were vulnerable with each other and talked about some of those triggers today. And again I really appreciate it, that um that initial kind of rip the band-aid off feeling. It's not comfortable but it's definitely something that is going to be beneficial for everyone throughout these sessions so I really commend you for being so vulnerable today. We did our temperature emotional checks and we had some serious um some serious changes which I'm super glad to hear. And I hope that you guys are feeling good about that as well, that's a big step. We did our deep breathing exercise and I think that's about it. Did I miss anything? No? Okay does anyone have any questions or any concerns before we end the meeting today? No? Okay, well I just want to remind you again we're going to have this meeting every week on Fridays at 6 30. It's going to be the same zoom link every time and I look forward to seeing you guys next week thank you so much guys.”

Comment: I believe I did a very good wrap up of our meeting, I was sure to ask if I missed anything to make sure that the clients were paying attention. I asked about concerns or questions to involve them in the closing process more as well. I did say “guys” again, and I need to get away from this and use non-gendering terms.

Correction: “Well everyone, our time is coming to an end soon. I want to just do a recap of what we were able to accomplish today together. We started out by getting acquainted and talking about our individual expectations. We made group rules together to ensure everyone feels safe and respected in our meetings. We looked at some hard moments by discussing our personal triggers, and I want to thank you all again for being so vulnerable and willing to share, I know it wasn't easy. We did an emotional temperature check, along with a deep breathing exercise that seemed to help everyone greatly. I believe that is everything, can anyone think of anything I missed? Okay good. I want to remind you all that this meeting will be every Friday at 6:30 pm, same zoom link, for the next 11 weeks. Does anyone have any questions or concerns before we leave? Awesome, well it was so great to meet with you today and I look forward to seeing you next Friday, have a great weekend everyone!”

Segment Two: Reflections & Issues

Cultural Issues

I did not have any cultural issues appear outright in our meeting. I think due to having a very southern member, and a middle eastern member, that racial bias could come up at some point, but not necessarily. If this did surface during a meeting, I would address the issue first with the individual who felt hurt or offended, to ensure they wanted me to address the issue with

the other individual and to make sure they were feeling safe after the incident. I would contact the individual who was hurtful and let them know that we cannot tolerate any time of racial or hurtful comments in our meetings, and if this behavior continued, they would no longer be welcome in the group for safety of all members. I think that in order to increase the cultural competence of my skill delivery, I could speak with supervisors and mentors about how to address these issues in the future and make it known at the beginning of group sessions that there is a zero-tolerance policy on hate speech and behavior.

Ethical Issues

Due to our meetings being co-ed, there could be some romantic or sexual harassment issues that come forth. If this were to surface, I would address both parties for assessment of safety and explain there is a zero-tolerance policy on this type of speech and behavior. During my group session, I made sure to address confidentiality during the beginning of our meeting for the safety and well-being of all members. I ensured that all members agreed with this confidentiality policy before continuing. I think I handled this well and added to the group rules that they are fluid, meaning if something comes up later, we could possibly add to our rules to keep everyone safe and respected.

Social Justice Issues

I did not have any social justice issues come up during our meeting. I think a social justice issue that could come up is racism and oppression, as we are a predominately Caucasian group with one middle eastern member. If this came up, I would speak to the entire group to make the group aware that there is a zero-tolerance policy on any type of racism or hate. Regarding larger system interventions for social justice with my group, I could possibly identify if any of my groups' members PTSD was affected by any type of social justice issue and address those with the group if needed.

Reflection

Over this semester, I believe I have found my niche of social work practice. I improved my skills delivery with every practice and every video. I demonstrated my role as an advanced autonomy practitioner through this video by incorporating my own personality more into the delivery rather than just the technical skills. I believe through more practice, and earning my clinical licensure, along with continuing education courses, I can improve my skills as a therapist and am eager to do so. I hope to find a job after completion of my LMSW that will allow me to grow as a therapist and improve these skills even further.

While using telehealth over this semester as our means for providing group therapy, I realized that glitches happen and that is alright. We kept moving along, addressed the issues as they came and did not have too many difficulties overall. Due to the nature of our meetings, I had my group practice respect for other members by muting ourselves when not speaking. When members were speaking and their internet glitched or went out, I circled back if they were able to reconnect to allow them time to share. Overall, this was a great course, and I grew a lot as a professional social work practitioner.