

The Healthy Life Group for College Students

M A N U A L

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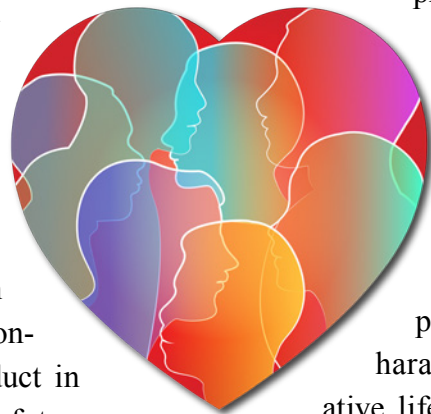
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Overview and Conceptual Background

Overview

This prevention program is designed to prevent intimate relationship physical, psychological, and sexual aggression. The program upon which the Healthy Life program is based, called “Strength at Home,” was originally developed and empirically validated in military veteran samples and has now been adapted for use with undergraduates or graduate students. The program draws on existing cognitive-behavioral interventions, specifically incorporating components of CBT for intimate partner violence perpetration (IPV; Murphy & Scott, 1996), anger management and assertiveness training (Grace, Niles, Quinn, & Taft, unpublished manual), and relationship-focused treatment of posttraumatic stress disorder (PTSD; Monson & Fredman, in press). The program is intended to promote healthy relationships and end aggression or misconduct in current relationships and prevent it in future relationships (which may include intimate partnerships or other peer relationships) by helping participants to develop effective conflict resolution skills, enhance intimacy and closeness in their relationships, and reduce the negative effects of stress. It is intended for undergraduates or graduate students who are in contact with Judicial Affairs because is suspected or confirmed that they have engaged in a form of interpersonal aggression that might be considered IPV, sexual violence (SV), stalking, or harassment.

The Healthy Life group is a 6-week program conducted in a group format. The program targets social information processing deficits that are associated with



interpersonal aggression. Several common themes that may underlie relationship difficulties are also targeted. These themes are discussed in the following section. It was designed to be highly sensitive to the fact that many aggressive individuals have histories of negative life events that negatively impact their relationships and behavior. The program is conducted in a supportive, nonconfrontational atmosphere, by two coleaders. It follows a closedgroup format involving weekly 90 minute meetings. Each meeting contains brief instructional material, group activities to discuss, learn, and practice new behaviors, and flexible time to solve ongoing problems, explore change efforts, and build group cohesion.

The first two meetings of *the Healthy Life group* provide psychoeducation on certain forms of interpersonal aggression (IPV, SV, stalking, harassment) and common reactions to negative life events. There is a focus on goal-setting, enhancing motivational readiness for change, and building a group cohesion and a positive facilitator-participant working alliance. The third meeting focuses on conflict management skills and learning to becoming assertive in a healthy way, rather than passive or aggressive. The remaining meetings all focus on communication skills: how one learned to communicate over the course of their lives, enhancing listening skills, and recognizing and expressing feelings more effectively and cuing in to the feelings and boundaries of others. Across all of the meetings, participants complete in-session practice exercises and are provided “practice assignments” to consolidate information learned.

The program was written with several goals in mind. First, we wanted to provide enough structure and group tasks to guide leaders who have little prior experience working with similar material. Second, we wanted to retain flexibility so that leaders have time and freedom to explore and expand upon important material that arises during meetings. Programmatic flexibility also allows facilitators to build a healthy and constructive atmosphere by dealing with conflicts within the meeting, engaging in problem-solving around current life difficulties, and addressing the needs of participants at different stages of the change process. Leaders are often able to weave program material into meeting discussions even if participants bring up situations that are not directly relevant to the weekly topic. Leaders should never dismiss participants concerns by saying “we will cover that in Week 5” or “that’s not the focus for today,” nor should they attempt to relate current concerns to the weekly session topic artificially. It is more helpful to clarify participants’ concerns, promote empathy, and engage in brief problem-solving.

Conceptual Background

The *Healthy Life* program is based on social information processing models of aggression, as well as the idea that SV, stalking and harassment may be caused by any of the following factors: disordered thinking, distorting relationships, opportunity/access to others, disinhibition, entitlement (i.e., power and control), and deviant sexual arousal. The program includes components from empirically validated interventions for inappropriate sexual behavior and relationship difficulties. In the subsections that follow, we discuss how social information processing is related to interpersonal aggression relevant to this program, factors that may contribute to social information processing deficits, and the relevance of core themes that may underlie relationship difficulties. The basic elements of the intervention include self-monitoring exercises, discussion of sexuality and sexual boundaries, assertiveness and conflict management techniques, and communication skills training. These components are used to combat the factors that can underlie SV, stalking, harassment, and social information processing difficulties. Through

this process, participants should experience reductions in and/or cessation of inappropriate sexual behavior and relationship conflict.

Stages of Social Information Processing:

Social information processing models have been used by researchers and clinicians to help explain IPV, SV and other forms of interpersonal violence perpetration (Ambrose & Gross, 2016; Crick & Dodge, 1994; Dodge & Crick, 1990). McFall (1982) developed an influential social information processing model that involves three sequential stages through which pieces of social information are transformed into behaviors. Similarly, Crick and Dodge (1994) put forth a five-stage social information processing model. In both models, the first step is to interpret a situation. In other words, one observes cues about a situation and decides what they mean. One person may see a friend laughing and interpret it as the person making fun of them, while another person may see a friend laughing and expect to be in on a funny joke with that person. Difficulties in the “encoding” and “mental representations” stages may be caused by inattention or distraction, as well as misinterpretation of social information. The second step is decision-making, which involves generating possible responses and evaluating which one is the best (based on what is expected in the situation, whether one is able to carry out that response, and potential costs and benefits of that response). The final step, the enactment stage, involves action, and monitoring the impact of the action. At each stage, other “transitory factors” like substance use, distorted thinking about sex and sexuality, or anger, can negatively impact information processing.

Risk Factors for Interpersonal Aggression Addressed in this Intervention:

Social information processing is one of the primary risk factors for interpersonal aggression addressed in this intervention. There are several other factors that should be considered when addressing IPV, SV, stalking or harassment, as well. These include post-traumatic stress disorder (PTSD) or reaction to negative life events, depression, alcohol use problems,

cognitive distortions about sex, sexuality, and gender roles based on past experiences, problematic exposure to or use of pornography, deviant sexual arousal, and traumatic brain injury (TBI). Each may have a negative impact on social information processing and/or risk for aggression. Although the literature has yet to fully examine the potentially complex inter-relationships among these different risk factors and associations with aggression, it appears likely that the presence of more than one of these risk factors may increase risk for some forms of violence in a multiplicative fashion (e.g., TBI disinhibits aggressive behavior among those with PTSD, depression, and/or alcohol use problems). It is also possible that people may be affected by certain executive functioning disorders, autism spectrum or attention deficit disorders, or cross-cultural issues (i.e., perceived and actual acculturation stress), that can influence friendship quality, social skills and social cueing (Bauminger & Kasari, 2000; Ogunsonya, Bamgbade, Thach, Sudhapalli, & Rascati, 2018; Ros & Graziano, 2018; van Schalkwyk et al., 2017).

[The Role of Core Themes in Interpersonal Aggression](#)

Past experiences can have a profound effect on the ways that individuals view the world. For example, trauma or negative life experiences can influence the processing of social information that underlie interpersonal aggression, as can other mental health problems and what individuals learn about healthy relationships as children and adolescents from their environments, media, and through direct experience.

Sexual aggression is often the result of “permission-giving thoughts,” or cognitive distortions, such as that no harm, or no lasting or serious harm, is done to others when sexual boundaries are not respected (Kettleborough & Merdian, 2017). Other causes of SV appear to stem from “an excessive concern with being admired, an inflated sense of entitlement, selectively low empathy, and a broadly exploitative approach to heterosexual relations” (Baumeister, Catanese, & Wallace, 2002).

Those who have perpetrated SV may create a narrative in their minds about what occurred that minimizes their own blame (Auburn & Lea, 2003). However, one puzzle in the field of sexual offending treatment is that a failure to take personal responsibility for the offense, and blaming external circumstances, is not correlated with future recidivism (Ware & Mann, 2012). In other words, participating in an intervention on one’s own terms can still have positive results.

When it comes to IPV, there may be other important core issues to consider. For example, trust in others is often disrupted following certain negative life experiences. A disruption in interpersonal trust may have been caused by someone who was supposed to be trustworthy. One example is a childhood sexual assault experience in which someone who they thought was trustworthy betrayed their trust and assaulted them. Following such a trauma, the person may feel like they cannot trust anyone, or that all people are out to hurt or betray them. Sometimes feelings of mistrust and betrayal can carry over into other relationships, and controlling behavior and aggression, or lack of respect for boundaries, may result.

Some who have experienced negative life events may harshly judge themselves whenever they make a mistake, or they unfairly blame themselves for what happened to them. Low self-esteem can lead to depression, insecurity in relationships, and aggression. Stress can also influence how one views other people, or “other-esteem.” Negative events involving other people may lead one to believe that others are not good or not to be respected. They may have generalized this belief to everyone (even those who do not deserve it), which may lead to problems with anger, withdrawal from social relationships, IPV, and other forms of interpersonal aggression.

Clinicians and researchers have long asserted that men’s violence toward women is influenced by beliefs related to power in relationships (e.g., Pence & Paymar, 1993). Those who have had prior life experiences that have created a profound sense of helplessness

and uncontrollability during the event(s), may develop feelings of powerlessness that continue long after the negative experience. Feelings of powerlessness can contribute to power struggles in relationships and ultimately may lead to IPV or SV perpetration (Schwartz, Waldo, & Daniel, 2005).

A final core issue or theme that may have particular relevance involves the expression of emotions. Those who engage in aggression often report that they were not taught to openly express feelings other than anger, and that “real men” do not express emotions underlying anger. They may have learned more action-oriented problem-solving to deal with difficult situations rather than more communication-based approaches that involve collaborative problem-solving.

[Summary](#)

It is clear that problems in the processing of social information are associated with interpersonal aggression. The Healthy Life program intervenes at the level of social information processing by increasing awareness of possible risk factors and themes for their interpersonal aggression through psychoeducation and self-monitoring, and by changing behaviors through the provision of conflict management techniques, boundary respect techniques, and communication training. Based on our experience with evidence-based programs from which we have drawn these techniques, it is expected that participants will experience reductions in and/or cessation of the behavior problems that brought them into contact with Judicial Affairs.

Process Considerations and Implementation Issues

As research and clinical knowledge demonstrates, the *process* of any group-based program is an important factor that influences its success. Information presented in this section should provide program leaders with strategies for facilitating group cohesion and a positive therapeutic alliance, troubleshooting typical issues in the meetings, and managing difficult situations that sometimes arise.

This program draws upon the fundamental principles and practices for experiential group work as specified by Yalom (1995).

Fundamental Tenets

- 1) Groups are particularly helpful for working on relationship problems because they allow individuals to see that they are not alone in the issues they face. A sense of shared experience can enhance perceptions of social support, which is particularly helpful in reducing interpersonal aggression-related behavior problems.
- 2) The group setting allows individuals to model positive relationship behaviors and to provide feedback on appropriate ways of handling difficult relationship issues.
- 3) Much of the therapeutic work happens in the here-and-now, through engaging in, and reflecting upon, group transactions.
- 4) Much of the benefit of the program derives from mutual support and change processes, including enhanced self-acceptance and acceptance of others, increased empathy from relating to other program members, and cooperative problem solving.

Therapeutic Factors

Following Yalom (1995), the group experience is thought to exert a therapeutic effect as a result of a number of primary factors. Detailed discussion of these factors is available in the original source work (Yalom, 1995). A brief discussion of some of the key issues follows:

1. Instillation of hope is very important, as many believe that there is no way to deal with relationship difficulties other than the way they are currently handling them. The leaders need to communicate hopefulness and optimism, at times explicitly, but more often implicitly, by reflecting participants' desire for things to change, by identifying strengths and positive relationship behaviors, and by nurturing a hopeful, change-oriented atmosphere.
2. Universality of experience, and group identification, is nearly inevitable. Initial identification with the group usually centers on the powerful recognition of similarities. Recognition of differences is also extremely important as individuals move toward a more differentiated view of their own unique relationship strengths and difficulties. The leaders will generally encourage initial identification, subsequent differentiation, and a sense of shared goals and purpose that transcends differences.
3. Imparting information occurs in many overt and subtle ways in the program. In addition to the structured material, participants may suggest to one another sources of information such as books, movies, etc. The leaders will impart information and help direct the group toward issues and topics that encourage personal growth and change.

4. Altruism in this context refers to participants providing one another with help and support. This is a powerful element in group that should be consistently modeled, noted, and encouraged by the leaders.

5. Socialization techniques. The group provides participants with the opportunity to receive feedback on their social skills. It also provides a safe place to try out new social behaviors. The group experience often helps participants to identify consistencies in their interpersonal behavior that may be causing them problems. Other participants, or the leaders, can recognize and help participants explore how certain "in-session" behaviors represent interpersonal problems experienced outside of the group. Some common interpersonal behaviors observed in meetings that often reflect problems outside are the tendency to appear uninterested in what others have to say, trouble expressing or stating feelings, misinterpreting other's intentions, mistrust of the leaders or other participants, "yes / butting" (eliciting, and then consistently rejecting, advice and suggestions), attempts to cut off discussion or change subjects when uncomfortable issues arise, interruptions, etc. All require the leaders to pay careful attention to interpersonal processes in the group.

6. Imitative behavior, or observational learning, is another powerful opportunity afforded by program participation. Almost every cohort of participants starts off with individuals who are at different stages. Individuals who are further along in thinking about and enacting changes in their lives will serve as role models for other participants. Leaders should be sure to identify the difference between situations in which an individual is serving as consistent advisor or expert in order to avoid working on their own problems, as opposed to situations in which someone is being a helpful role model for other participants. Focusing on strengths and successes when appropriate is also very important, as participants will be most likely to "imitate" or learn from others who are having success in changing their relationships.

7. Interpersonal learning is one of the central concepts of this approach, that ties together many of the other primary factors. The group provides a "social

microcosm" in which to learn more about emotions and interpersonal realities. This further involves the experience of being accepted and valued for who one is. The group experience places a premium on being honest with one's self and with other participants in order to facilitate interpersonal learning.

8. Group cohesiveness is the sense of togetherness and shared purpose that develops in a healthy group. It comes, not only from identification by participants with one another, but also from overcoming difficulties that inevitably result in getting along and working together. High levels of cohesiveness usually require that the group maintains some consistency in the focus and content of the work from week to week, in order to achieve a deeper level of experience and learning.

9. Catharsis, in this context, refers simply to the expression of emotion. Often this refers to emotions that have not been formerly expressed, or perhaps not even clearly labeled or experienced. Participants may be only partially aware, for example of deep shame related to their histories with negative life experiences (or traumas), yet the effects of this shame may be quite clear in their relationship problems. Expressing these feelings may provide a sort of dramatic relief, especially in the context of empathic understanding and acceptance by the group. Catharsis is most likely to be helpful when also accompanied by the opportunity to learn more about oneself and one's interpersonal behavior. Emotional expression, although somewhat helpful in itself, is most useful as a compass of interpersonal learning.

10. Existential factors refer to the sense of purpose or meaning in life, which cannot simply be conjured up or artificially derived. The sense of meaning is most likely to emerge from deep engagement with something outside of one's self. For some individuals, the program offers an opportunity to focus very deeply on others' pain, struggles, and joy in a way that may have been formerly unavailable in their everyday life. An important sense of meaning can result from these experiences, and may offer new possibilities for engagement in the social world outside of the program.

Leader Tasks and Techniques

In addition to covering structured program material, facilitators engage in important facilitation techniques, such as:

- 1 Role model gender equitable relationships, empathy and supportive listening; provide an optimistic and hopeful perspective on the ability to change.
- 2 Encourage self-disclosure.
- 3 Promote healthy relationship norms and interpersonal respect.
- 4 Make the meeting a safe place for exploration of personal and interpersonal problems.
- 5 Identify important group dynamics and intra-group conflicts that facilitate resolution of these issues (comment on process).

Other Tips for Facilitators

I. Reviewing practice assignments

- When reviewing practice assignments, always comment on the positive work participants have done before exploring problem areas or assignments completed incorrectly.
- When a participant comments on using a new skill, leaders may ask, *How is this different than what you've done in the past?* to highlight the different outcomes that arise from using new skills.

- If a participant expresses hesitance to try a new skill, leaders may ask, *How is your current style working for you?*
- If a participant reports on a situation in which they did not use their skills, facilitators may pose the question, *If you could do it over again, how would you do it differently?*
- Be sure participants do not have additional comments to make before moving on to another topic.
- Always address non-adherence with practice assignments. It may be important to troubleshoot difficulties in completing assignments.

II. Motivational issues

- 1 Remind participants that they are taking the time to come in to the meetings, so they may as well put their best foot forward. Ask participants if they can adopt a *let's wait and see* attitude throughout their participation in the program.
- 2 Be direct when participants exhibit behaviors that indicate questionable investment in the program.

III. Crisis situations

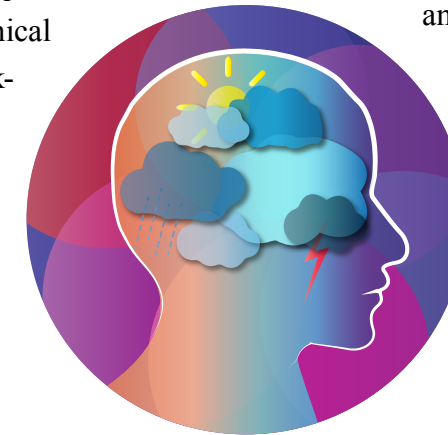
- 3 For individual crises, program leaders may make provisions to speak with individuals for 20-30 minute meetings to deal with emergent issues (e.g., new conduct code violations, suicidality, etc.) prior to or following meetings.

PART 3

Overview of the 6 Week Program Content

Meeting 1 Introduction and Welcoming

After initial introductions and discussion of the philosophy and goals for the program, the leaders lead a discussion of the “pros” and “cons” of relationship aggression. Leaders then give insight into the structure and expectations for the group, explain the importance of practice assignments, and answer questions about the program. The main clinical tasks are to begin establishing a working alliance with each participant, to address any questions about the program, to model and encourage healthy participant interactions, to facilitate motivation for behavior change, and to highlight personal responsibility for abusive behavior.



MEETING 2 Negative Life Events and Relationships

Note that “relationships” may be intimate partnerships, sexual relationships, or other peer relationships. Participants explore their beliefs about healthy and unhealthy relationships and their goals for the program. The discussion then shifts to psychoeducational material that focuses on understanding forms of unhealthy relationship behavior and the impact of past experiences on participants’ relationships. The main clinical tasks are to enhance motivation and educate participants regarding abuse, aggression and boundary violations, and for participants to gain insight into the effects of difficult prior events on their own relationships.

Meeting 3 Understanding the Roots of Your Communication Style and Assertiveness

After review of the self-monitoring practice assignment, participants engage in an exercise in which they write about and discuss how they learned their style of communicating emotions. Specifically, they discuss lessons learned as a child, in school, from peers, and in other settings. The primary clinical task of this material is to illustrate how people are often socialized not to express emotions other than feeling glad or happy; and to be passive or aggressive, not assertive.

This meeting continues with a discussion of how negative life events have affected participants’ relationships to further facilitate contemplation of behavior change and build upon psychoeducational material from Meeting 2. The discussion then shifts to a focus on expressing themselves assertively. This material is designed to assist participants in recognizing and understanding the importance of striving toward assertive expressions of anger and other emotions. The practice assignment focuses on self-monitoring the different components of emotional expression and further practicing healthy, assertive expression of emotions.

MEETING 4 Roots of Your Sexual Behavior

After review of the expression emotions practice assignment, participants engage in an exercise in which they write about and discuss how they learned about

sex and how they are expected to behave sexually. Specifically, they discuss lessons learned from media, as a child, from school, peers or adults. The primary clinical task is to illustrate that there are specific cultural expectations related to sexually behavior that people may internalize, or fail to internalize, early in life. The other clinical task is to illustrate that individuals may have experiences cornerstone events in their lives related to sex and sexuality that continue to influence their behavior, expectations about others' sexual behavior, and experiences of sex today. The practice assignment focuses on self-monitoring sexual thoughts, impulses, and cognitions, and practicing healthy self-talk related to sex and sexual behavior.

MEETING 5

Active Listening

Participants discuss aspects of good and bad communication, after which the discussion focuses specifically on active listening skills. Active listening is emphasized because they are the foundation of good communication is critical for de-escalating conflict

and enhancing intimacy in any type of relationship. Listening skills are particularly important when people have trouble reading social cues or with inappropriate sexual behavior, because improved listening skills can help stop distorted thinking and inappropriate reactions.

MEETING 6

Expressing Feelings

Participants review their sexual thoughts and behavior self-monitoring forms and the active listening practice assignment. Program material then focuses on how avoidance can lead to difficulties expressing emotions or managing sexual behavior. Strategies for expressing feelings are provided. Next, participants explore gains made in the program. They identify goals and strategies for future change along with barriers to change and strategies to overcome these barriers. Program leaders help participants develop a realistic appraisal of changes made and to help them identify areas needing continued attention and strategies for continuing this work after the program ends.

PART 4

Detailed Program Agenda

SESSION I

Introduction and Welcoming

Overview

After initial introductions and discussion of the philosophy and goals for the program, the leaders lead a discussion of what healthy vs. unhealthy relationships are like; with specific prompts about (a) friendships, (b) family relationships, (c) dating or sexual relationships, and (d) relationships with professors, employers, or other authority figures. Leaders then give insight into the structure and expectations for the group, explain the importance of practice assignments, and answer questions about the program. The main clinical tasks are to begin establishing a working alliance with each participant, to address any questions about the program, to model and encourage healthy participant interactions, to facilitate motivation for behavior change, and to highlight personal responsibility for abusive behavior.

I. HANDOUT

Description of the Program

Instructions:

- Facilitators introduce themselves, describing their backgrounds in working with other relevant populations or problems.
- Read the program description and answer any questions participants may have.
- Emphasize the importance of participants trying new things and working on changing their behavior.
- Confidentiality should be emphasized by letting participants know that there are no notes recorded

about participants' disclosures and everything is kept confidential, except for the specific limits of confidentially noted on the form. Emphasize that this is a safe place where participants can be open and honest.

II. Participant Introductions

Instructions:

- Ask participants for some basic pieces of information, including first name (and it may be a nickname if they prefer), current status at the university (i.e., graduated, undergraduate, graduate student), where they grew up (i.e., the U.S., another nation), current relationship situation and status (single, dating, living together, etc.), and what they hope to get out of the program.
- It is particularly helpful to reinforce expressions of a desire to change abusive, sexually inappropriate, or other relevant treatment elements (e.g., poor assertiveness or communication skills, deescalating difficult situations). To highlight the costs of abuse and benefits of ending abuse or sexually inappropriate behavior, emphasize the negative consequences that have resulted from incidents that they might mention (e.g., being suspended from school, being ostracized, relationship termination or separation, personal feelings of shame and guilt, negative perceptions of abuse by friends, relatives, or the community, etc.).
- Explain that individuals will feel comfortable disclosing personal information at different points in the process of the program and that the hope is that everyone will feel comfortable at some point.

- Validate and address any concerns about the program while working towards elucidating treatment goals.
- Model and encourage healthy interactions at all times.
- Tips: Avoid confrontation or undue pressure regarding self-disclosure. More open participants will model self-disclosure for more reticent participants. A safe atmosphere for self-disclosure can usually be developed within the first one to two meetings.

III. HANDOUT: Group Philosophy

- **Instructions:** Review each item with the group.
- Facilitators' main tasks are to explain that aggressive and sexually inappropriate behavior is learned and can be unlearned, to communicate that participants must make a firm commitment to manage themselves better if they are to benefit from the program, to emphasize the importance of taking personal responsibility for aggressive and inappropriate behavior, and to highlight the benefits of managing distorted thinking, anger, stress, loneliness and other feelings more effectively.

IV. GROUP EXERCISE: Pros and Cons of Aggressive and/or inappropriate Behavior

- **Rationale:** A useful motivational strategy early in interventions for aggressive behavior involves an open discussion of the factors that maintain the aggression as well as the costs of this aggression. This exercise is designed to facilitate motivation and tip the decisional balance in favor of behavior change for those in earlier stages of readiness.
- **Instructions:** Building on the idea from the PROGRAM PHILOSOPHY handout that aggression is a learned behavior that can be unlearned, facilitators lead a discussion in which participants are asked for examples of positives (“pros”) and negatives

(“cons”) that come from their aggressive behavior in their relationships.

- Introduce this exercise by asking participants how people learn to behave aggressively. Participants will typically indicate that they learn such behaviors from observing others, such as caregivers. Indicate that people also learn to be aggressive because it produces some desired effect; we get something out of it. Thus, it is important to think of the positives and negatives participants experience from aggression.
- List pros and cons on a chalk or poster board.
- Shortterm benefits of aggression are discussed, such as tension release, the communication of intense emotions, forced compliance with one's demands, and a sense of control. Help participants articulate the ephemeral and often illusory nature of these perceived benefits. For example, tension and anger may be temporarily suppressed by aggressive outbursts but often escalate in the long run. Partners usually become less responsive to the participants' feelings and concerns as abuse persists and escalates. Compliance in response to aggression is often limited and laden with resentment. The perceived loss of personal control and dignity from abuse usually outweighs the actual control gained over one's partner.
- Then elicit negative consequences of aggression, reminding participants of negative consequences discussed during the group introductions. Strive to list as many cons as possible.
- After lists of pros and cons are generated, point out that there are many more cons than pros and ask participants if there are more effective ways to meet the goals of the pros (e.g., “Are there more effective ways to reduce tension or express one's feelings?”). State that the program will provide them with more effective strategies than they are currently using.
- **Tips:** Participants often find it easier to generate negative consequences than the pros. It is important to directly state to participants that the pros are important to understand because these are factors that may keep the aggres-

sive behavior going.

- The facilitators' role is to create an atmosphere conducive to change. Facilitators refrain from direct challenges to rationalization and denial. Rather, they encourage participants to contemplate change in a supportive and nonthreatening atmosphere, striving to enhance their sense of selfdetermination.
- Rather than trying to convince participants to change, skilled facilitators will evoke motivational statements directly from the participants through careful questioning and reflective listening.

V. HANDOUT: Meeting Topics

- **Rationale:** The primary goal of this handout is to instill confidence in the program and to orient participants to the content of the meetings.
- **Instructions:** Briefly explain the program content, noting that individuals may find certain topics to be very personally relevant and other topics less so.
- Answer participant questions and begin allaying concerns about their participation.
- **Tip:** Encourage participants to be open-minded but do not assume that any particular program topic is relevant or helpful for everyone.

VI. HANDOUT: Program Expectations

- **Instructions:** Review the “Program Expectations” handout to ensure that all participants are clear on expectations regarding confidentiality, safety of participants, and respect towards other participants and leaders.
- Emphasize importance of attending all meetings.
- **Note:** If a participant's poor attendance becomes disruptive over the course of the meetings, facilitators may re-evaluate the case to determine if the participant should remain in the program.

This information should be communicated to the participant in a non-punitive way, emphasizing the importance of getting an adequate dose of the program in order to benefit.

VII. Practice Assignment

(I) Healthy Relationships and program Goals

- **Rationale:** For the first practice assignment, participants are asked to give personal definitions of healthy and unhealthy relationships and to generate their goals for the program. These tasks are designed to enhance motivation by having participants reflect on unhealthy aspects of their relationships and to set goals for moving towards healthy relationships that are free of abuse.
- **Instructions:** When introducing this practice assignment, emphasize the importance of practice assignments in general and the rationale for this week's assignment.
- Inform participants that practice assignments will be collected and reviewed each week and returned the following week so facilitators can give participants feedback and monitor their progress.

DESCRIPTION OF THE PROGRAM

You are beginning a 6-week group for people who have had one or more serious problems with another person that may include relationship conflict, sexually inappropriate behavior, stalking or harassment. The goal of this program is to help you to communicate with others in clear and direct ways and to manage your emotions and thoughts. During the next 6 weeks, you will learn techniques that have been shown to work.

You may find that some material you learn is more useful than other material. In order to find out what works best for you, it is important to try out as many different methods as you can in your daily life. Our goal is to give you more tools and options to work with so you can feel more in control of challenging events in your life. In the next 6 weeks, we will help

you to understand yourself better and to find ways to better deal with these problems in your relationships and your life in general.

Perhaps even more importantly, you will all help each other understand how to navigate challenging interpersonal issues, or challenging thoughts, and respond to them in healthy ways. What you get out of the program will depend in large part in what you put into it.

This is not an exposure-based program. By this, we mean that we will not go into detail about your childhood experiences. However, we will be discussing how your past or how your prior stressful experiences may lead to difficulties in thinking, decision-making or behavior today.

We value your experience and encourage you to tell us what is good and bad about this program so that we can better help others in the future. We welcome your feedback throughout the meetings.

Everything you share in this program is confidential, and what gets discussed in the room will stay in the room. As we discussed during the consent procedures, there are limits to this confidentiality. We do not enter any notes for the meetings and do not discuss what you say in the meetings to anyone outside of the participants without your consent. This is a safe place to speak openly about your feelings, thoughts, and behaviors.

PROGRAM PHILOSOPHY

Some simple principles summarize the program philosophy:

- 1 Many factors can contribute to conflict in relationships and to inappropriate behavior with others, including prior stressful experiences, distorted thinking, anger, poor communication, difficulties trusting others, low self-esteem, feelings of powerlessness, insecurity, anxiety, depression, ADHD and/or autism spectrum disorder or other mental health problems, compulsive or problematic pornography use, and substance abuse. All of these things can be addressed, and all of these conditions

can be managed without resorting to behavior that makes other people uncomfortable.

- 2 In order for you to get the most out of the program, you will need to make a firm commitment to change and to work on having better relationships.
- 3 You cannot change others, but you can change yourself. You will be asked to try new behaviors, ways of thinking, and ways of understanding yourself, and to practice them outside of these classes.
- 4 Many physical health and emotional health benefits can result from improving self-knowledge, self-talk, and communication skills.
- 5 Most inappropriate behaviors are learned behaviors. New, healthy ways of behaving can also be learned.

MEETING TOPICS

Meeting 1: Introduction and Welcoming

Meeting 2: Negative Life Events and Relationships

Meeting 3: Roots of Your Communication Style and Understanding Assertiveness

Meeting 4: Roots of Your Sexual Behavior

Meeting 5: Active Listening

Meeting 6: Expressing Feelings

PROGRAM EXPECTATIONS

- Each participant is to be treated with respect. Participants are expected to behave in ways that will not be respectful to others.
- All participants agree to respect the confidentiality of information they learn from others in the program. We refer to one another by first name to help ensure the privacy of participants.
- Participants agree not to talk about what is discussed in group outside of group; and not to try to figure out the identities of the other people who may have been involved in any incident that was referred to Judicial Affairs.

- Participants may leave the group when necessary. They take responsibility for telling others that they are leaving and that they will return before the end of the meeting so that others will not worry.
- All members are expected to attend meetings free of any substance or intoxicant that could impair their ability to function in the program. If group members are intoxicated, they will be asked to leave the group session. Medications should be taken as prescribed.
- No weapons of any kind will be allowed on the premises.
- Please turn off cell phones prior to the beginning of each meeting.
- Members are expected to attend all meetings and to call in advance if they cannot attend. The participants will be informed of any cancellations made.
- All participants will use respectful language when referring to individuals who may differ with respect to race, gender, and/or sexual orientation.
- Participants are expected to encourage and support

appropriate behavior and sincere efforts to change.

- Outside of the meetings, all participants are expected to practice new behaviors.

Practice Assignment- Meeting #1

HEALTHY RELATIONSHIPS AND PROGRAM GOALS

Practice assignments are an important part of this program. They can help you:

- practice new behaviors
- figure out ways to handle difficult situations
- pay attention to your efforts and progress

You will be given practice assignments at every meeting. The facilitators will collect them each week and will give them back to you the following week. They may provide suggestions or encouragement, but you won't be "graded." Please talk to the facilitators if you have trouble understanding or completing the practice assignments.

PART 1)
Healthy and Unhealthy Relationships

A) What is a healthy relationship?

Please give your definition of a healthy relationship with (a) friends, (b) family, (c) dating and sexual partners, (d) professors or supervisors.

A healthy relationship with a friend is: _____

A healthy relationship with family is: _____

A healthy relationship with a dating or sexual partner is: _____

A healthy relationship with professors or supervisors is: _____

B) What is an unhealthy relationship?

Please give your definition of an unhealthy relationship.

An unhealthy relationship is _____

PART 2)
Goals for Program

A) What are your goals for this program? What are some things that you would like to improve about yourself? (Things to improve about yourself should be things that will have an impact on others in your life, too).

MEETING 2:
Negative Life Events and Relationships

Overview

Participants explore their beliefs about healthy and unhealthy relationships and their goals for the program. The discussion then shifts to psychoeducational material that focuses on understanding forms of interpersonal aggression and the impact of past experiences on how they think, feel and behave. The main clinical tasks are to enhance motivation and educate participants regarding inappropriate or aggressive, and for participants to gain insight into the effects of prior life events on their own thought patterns and behavior.

Meeting Plan

Today we're going to talk about some of the things that you like about your past and present relationships and some of the things you want to work on or change. After going over definitions of different forms of relationship aggression, we're going to talk about negative life events and how they affect relationships.

I. Introductions

■ **Instructions:** Facilitators request that all participants re-introduce themselves.

II. Practice Assignment:
HEALTHY RELATIONSHIPS AND PROGRAM GOALS

■ **Rationale:** This assignment should facilitate further contemplation of, and planning for, behavior change.

■ This assignment is designed to enhance motivation by having participants reflect on unhealthy aspects of their relationships and to set goals for moving towards healthy relationships.

■ **Instructions:** Review each item with the participants. Encourage them to give personal definitions of healthy and unhealthy relationships and to generate goals for their participation in the program. During the discussion, facilitate focus on behaviors that the participants can change rather than focus on trying to change their partners.

- Touch base with each participant regardless of whether or not they completed the practice assignment.

- If participants did not complete the practice assignment, troubleshoot difficulties in completing the assignment and attempt to problem-solve lack of compliance.

III. Handout: FORMS OF AGGRESSION

- **Rationale:** This topic builds on the healthy relationships practice assignment. It is important to emphasize that abusive behavior represents the extreme end of unhealthy relationship behavior. Facilitators provide definitions of abuse that will be frequently used during the meetings.
- **Instructions:** Introduce this handout by indicating that these are examples of behaviors that occur in unhealthy relationships.
- Point out that psychological abuse can be as damaging, or more damaging, than other types of abuse. Also mention that research shows that psychological abuse early in a relationship is a strong predictor of the development of physical abuse.
- Emphasize that though trauma is related to anger, each person is responsible for their own behavior and refraining from abuse.
- Ask participants to commit to remaining non-abusive during the program by signing the bottom of the form. Emphasize that participants will work together to support each other's efforts.
- **Tip:** Participants may disclose or acknowledge forms of abuse that they have engaged in when reviewing this handout. This discussion should be encouraged and explored in the context of this handout. However, facilitators should refrain from making directive attempts at eliciting disclosures regarding abusive behavior from specific individuals.

IV. Handout: COMMON REACTIONS TO STRESS AND TRAUMA

- **Rationale:** Many students have experienced stress or trauma that may contribute to their anger and relationship problems. An important clinical task of this exercise is to provide psychoeducation regarding the link between stress, trauma, and relationship problems, and to normalize the impacts of stress and trauma.
- **Instructions:** Review the handout and ask participants to provide examples to illustrate the material.
- After reviewing the handout, ensure that participants understand that the intervention is designed to target problems in those who may have been exposed to stress and trauma. For example:
 - *These problems are really common among those who have experienced stress and trauma. The good news is that you're going to learn strategies that have been shown to be helpful in dealing with these issues. For example, we will focus on how your thought patterns may have been influenced by prior events, and how this contributes to the problems you may be experiencing now.*
- **Tip:** Facilitators should be aware that focusing on the consequences of negative life events can be upsetting to some members. Leaders may need to reassure participants that this is a normal reaction, and it is an important part of the change process. It is important to understand the symptoms or problems one may be experiencing in order to change them.
- Participants may indicate that they have not experienced events that would be considered traumatic. When this occurs, facilitators should emphasize that other stressful events and experiences can have an impact on relationship difficulties.

V. Handout: STRESSFUL LIFE EVENTS AND ALTERNATIVE THOUGHTS

- **Rationale:** This handout focuses on how prior negative life events may cause us to misinterpret our relationship partners and others and respond inappropriately. This material is based on the social information processing model of aggression, as well trauma-informed intervention that discuss “core themes” that may underlie trauma reactions and abusive behavior.
- **Instructions:** Review handout while attempting to elicit group member examples highlighting handout material.
- **Tips:** During discussions of anger enhancing thoughts, it is often helpful to identify such attributions about the partner's intentions and to review alternative interpretations of her behavior.
- Group members often respond well to the “don't assume” rule in which they are instructed to try not to make any assumptions about what the partner thinks and feels and instead to try asking.
- Another version of this is the “assume good intentions” rule in which they are encouraged to make a cognitive shift from always assuming that the partner has negative intentions (and looking for evidence to support this belief) to assuming that the partner has good intentions (and looking for evidence to support this belief).
- The main clinical goal is simply to help group members understand that their thoughts and beliefs about the partner are not the final “truth” but are only one of many possible ways to view her behavior and intentions. This can help some group members considerably as they begin considering alternative ways to view the partner's behavior.

VI. Practice Assignments (I) LIFE EVENT IMPACT QUESTIONS

- **Rationale:** This practice assignment is designed to increase awareness of how trauma or previous life events may contribute to abuse and relationship adjustment difficulties.
- **Instructions:** Provide participants an assignment in which they write about the impact that trauma or other negative life events has had on their relationships.
- Inform participants that this practice assignment will help them understand the intervention components that may be particularly important for their specific issues.
- Encourage the participants to start the assignment as soon as possible so that they have enough time to write thoughtfully. Ask them to pick a time and place where they have as much privacy as possible.

FORMS OF ABUSE

Within adult relationships, there are several forms of abuse:

- 1) **Physical Abuse** includes all forms of physical aggression. Pushing, grabbing, shoving, slapping, throwing things at the other person, punching, kicking, and holding the other person down are all examples of physical abuse.
- 2) **Psychological Abuse** can be less obvious than physical abuse, but is often even more harmful than physical abuse. Research shows that psychological abuse early in relationships often escalates to physical abuse later in relationships. Psychological abuse can take on several forms:

A) Behaviors that make the other person afraid.

Examples include threats to harm the other person or their reputation, threats to harm one's self, threats to harm friends or relatives, intimidating looks or gestures, destruction of objects or personal belongings, driving recklessly to frighten the other person, aggression toward walls, doors, furniture, etc.

B) Behaviors that attack the partner's self-esteem.

Examples include put downs, calling the other person stupid, crazy, ugly, or worthless, forcing the other person to do humiliating things, treating the other person like a child, etc.

C) Behaviors that limit the other person's basic rights and freedoms.

Examples include trying to stop the other person from going places, trying to stop the other person from seeing certain friends or family members, trying to stop the other person from getting a job or going to school, acting like the other person is a servant, etc.

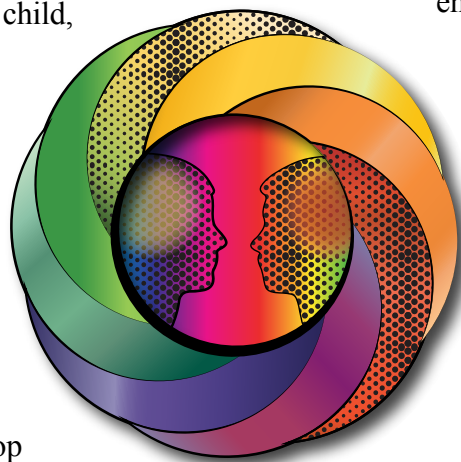
D) Behaviors intended to punish the other person or make him/her feel insecure in the relationship.

Examples include refusing to have any discussion of a problem or relationship issue, withholding affection to get back at the other person, refusing to acknowledge a problem that the other person feels is important, leaving and angrily refusing to tell the other person where you are going, etc.

3) Sexual Abuse can include unwanted sexual contact, pressuring and coercing the other person for sex, using intimidation, threats, or force to make the other person have sex or to make the other person perform unwanted sex acts, etc.

Ways We See the World Can be Affected by Many Things

Stressful life events, such as experiencing or witnessing abuse during childhood, can change how one sees the world. Other things can influence how we see the world, too, including depression, anxiety, too little sleep, not eating enough or properly, watching a lot of pornography, or conditions such as ADHD and autism spectrum disorder. This handout describes how the way that we see the world can be affected by **experiencing trauma or stressful life events**:



1) People who have been through traumatic experiences or even very difficult experiences may have unwanted thoughts of them or re-experience the event(s) repeatedly. Others may sometimes think that the person is not paying attention to what he/she is saying, when in fact the person is distracted with these memories.

2) Some people have flashbacks, or vivid images that feel as if the event is occurring again. Nightmares are also common. This occurs because the experience may be so shocking and so different from everyday experiences that they cannot fit it into what they know about the world. So to understand what happened, their mind keeps bringing the memory back, as if to better digest it and fit it in.

3) Increased arousal (not just sexual arousal) includes feeling jumpy, being easily startled, and having trouble concentrating or sleeping. The person may see the world as filled with danger, so their bodies are on constant alert. These reactions are due to the fight or flight response, which causes our bodies to pump out extra adrenaline.

4) Continuous arousal can lead to impatience and irritability, especially if the person is not getting enough sleep or the right nutrition.

5) Avoidance of reminders of the event is a way of managing pain by trying to push away difficult thoughts and feelings. This can lead to **emotional numbness**, in which people find it difficult to have and express feelings. Emotional numbness is especially difficult for relationships, because emotions help couples feel close to one another.

6) Depression is also a common reaction to stressful events. It can include feeling sad and hopeless, and crying more often. The person may lose interest in people and activities they used to enjoy.

7) Selfimage and views of others often become more negative after a stressful event. Many people see themselves as more negative overall. It is also common to feel that others cannot be trusted. Relationships become tense when trust decreases. People who experience stressful events may try to have **complete control** in relationships and have a tough time letting the other person have any control. This leads to controlling behavior.

8) On the other hand, some exposed to stressful events may feel completely helpless. They become **overly passive** and easily give in to the demands of others because they feel like they have no control over their lives. They keep their feelings to themselves and may become resentful of others who do not understand what they are going through.

If you're experiencing these problems, there are effective treatments available. While stressful events can contribute to relationship problems, we are ultimately responsible for our behavior.

PRIOR LIFE EVENTS AND ALTERNATIVE THOUGHTS

The way that we see the world and the thoughts that we have can be influenced by stressful events from our past, from our mental state, how we first learned about sex, intoxication, feelings of entitlement that we may or may not know we have, and other factors.

For many of those who have been exposed to stressful life events, they had to be extremely alert at all times and be on the lookout for possible danger. Those who experience these events learn to see threats that others can't see. They may also be more likely to incorrectly see other people's intentions as negative. For example, if someone cuts you them off on the highway, they may assume that the person did it on purpose when that may not in fact be the case.

These kinds of errors or biases in thinking can cause problems in relationships as well. Those who experience negative life events may assume that their partner is being hostile when it may not necessarily be the case. Thoughts such as, "She's just trying to manipulate me", "He's just trying to push my buttons", "They are trying to make me jealous", or "She's trying to control me" are common among clients who have experienced negative life events.

Some people have received direct and indirect messages about sex that can influence how they see themselves and other people. For example, if they have learned that sex is "dirty," or that sex is only for married people, they may consciously or unconsciously believe that their own sexual desires are wrong or bad, or what other people who want to have sex outside of marriage are wrong, bad or deserve it if bad things happen to them. Thoughts called "cognitive distortions" may also occur based on what we see in movies, TV shows, or pornography. For example, "Sending someone a dick pic is funny," "Usually it's slutty people who deserve it who end up getting raped," or "Spying on someone doesn't really hurt anybody, it's not like physically assaulting them," are common among clients who have cognitive distortions about sexual behavior.

For some who experience negative life events, difficulties with trust, intimacy, self-esteem, or power and control may develop and can also impact how one interprets relationship situations.

For example, if one has experienced betrayal in a past relationship, they may have difficulties trusting new people and may make false assumptions that their partner is "cheating" on them or trying

to harm them in some way, or that the other person is trying to “screw them over.” This may also make it difficult for the individual to let others get too close to them and hinders intimacy for fear of leaving themselves vulnerable.

How does one unlearn these alternative thoughts (or cognitive distortions)?

- The first step is to recognize your ways of thinking about situations and search for other possibilities.

- One strategy is to not assume that you know what others are thinking. It is helpful to ask instead of guess.

- Another strategy is to slow down before you act, and test out your ideas on another person you trust, such as a therapist or good friend. (Example: “Do you think I should post this comment on Twitter?” “Is it a good idea to go to this party?”)

Practice Assignment- Session #2

LIFE EVENT IMPACT QUESTIONS

This assignment asks you to write about how life events have affected your relationships. Please bring this with you to your next meeting.

1) How have prior life events affected how you think about sex and intimacy?

2) How have prior life events affected your ability to trust others?

3) How have prior life events affected intimacy with others?

4) How have prior life events affected your self-esteem?

5) How have prior life events affected power and control issues with others?

6) What has been the most difficult consequence of stressful life events for you that you have had to deal with?

7) What else do you notice or realize about yourself that could be relevant?

MEETING 3: Assertiveness

Meeting Plan

Last week we began to focus on anger. Today we’re going to go over your practice assignment to help you understand your anger better and to respond assertively when angry. This week we will also begin to cover material on communication by looking at how you may have learned to express your anger. Having an awareness of how your current form of anger expression developed can be helpful in guiding you towards more constructive ways of expressing your feelings.

I. Practice Assignment: ANGER ANALYSIS FORMS

- **Instructions:** Ask each participant to share their responses on the Anger Analysis Forms.
- Help participants further elaborate their Anger Analysis Forms, filling in details about the thoughts, bodily sensations, and other emotions that accompany anger reactions, and categorizing their responses to these situations.
- Reiterate the importance of selfawareness in the change process, looking for examples in which participants’ awareness of early signs of anger allowed

them (or could allow them) to cope effectively with a potentially difficult situation.

- Help the participants point out instances of passive, aggressive, and assertive responses to anger provoking situations.
- Troubleshooting may need to be done with participants who did not fully understand the assignment or who did not complete the assignment for various reasons.
- If a participant did not complete this assignment, it is often helpful to have him log a situation that occurred over the previous week in group. Facilitators indicate that participants will continue to log at least one situation per week.

II. Handout: ROOTS OF YOUR COMMUNICATION STYLE

- **Rationale:** It is important for participants to understand how they may have learned to express anger and other emotions in order to begin to develop new communication patterns.
- **Instructions:** Explain that this exercise can help develop an awareness of how participants have learned to communicate their feelings so they can begin to unlearn problematic ways of expressing themselves.
- Give everyone 5 minutes to think about their answers to each item and write them down.
- Review each item and process together.
- **Tips:** A number of themes are commonly discussed in this exercise. For example, male participants often discuss how they were taught that “real men” do not talk about their feelings, and they do not discuss negative feelings. These are important areas for discussion because in order to unlearn dysfunctional

(passive and aggressive) communication styles, participants must first understand how they initially developed them.

- Facilitators may indicate that it is not surprising that participants may experience difficulty in expressing feelings since they were never taught how to do so. This makes working on assertiveness skills particularly important.

III. Group Exercise: Relaxation Training

- **Instructions:** Introduce new relaxation strategy to cope with stress, anger (e.g., during Time Outs), and other negative emotions.
- Hand out the **ANGER METER** and ask group members to think about a recent anger provoking situation for 1-2 minutes. Then ask group members to rate their level of anger on a scale of 1-10. These ratings will be compared with ratings obtained after the relaxation exercise to demonstrate the reduction in anger achieved when doing the exercise.
- Conduct the relaxing imagery exercise using the script included in this manual. The room should be made as comfortable as possible.
- After completion of the relaxation exercise, group members are again administered an **ANGER METER**.
- Group discussion then focuses on the following questions:
 - What are the differences between the two Anger Meters?
 - Was their anger rating higher or lower the second time?
 - Were they able to reduce their anger arousal via the relaxation exercise? If not, why not?

IV. Practice Assignment (I) ANGER ANALYSIS FORMS

- **Instructions:** Reiterate the importance of self-awareness in the change process.
- Encourage participants to document instances of passive, aggressive, and assertive responses to anger provoking situations.

Overview

This meeting begins with a discussion of the practice assignment focusing on understanding how life events have affected participants to further facilitate contemplation of behavior change and build upon psychoeducational material from Meeting 2. The discussion then shifts to a focus on assertiveness. This material is designed to assist participants in striving toward assertive expressions of emotions.

Meeting Plan

Today we're going to talk more about how prior life events have affected you and how you think. Then we're going to focus more specifically on different ways of expressing emotions and to begin to work on better communication.

I. Practice Assignment: LIFE EVENT IMPACT QUESTIONS

- **Rationale:** The primary task of this assignment is to review material covered in Meeting 2 focusing on the impacts of life events on you.
- **Instructions:** Review each participant's answers to each item with the group.
- Ask participants how life events have affected them and their relationships and what the most difficult consequences have been.
- Check in with participants to see if they have completed the practice assignment.

- Continue to monitor and troubleshoot lack of adherence and avoidance of program material.
- **Tips:** Trust in others is often disrupted following events that felt like a betrayal. A trauma may have been caused by someone who was supposed to be trustworthy, or a trauma may have occurred because other people made poor decisions or mistakes. When traumatized individuals talk about “trust,” they often talk about it on an all-or-nothing basis (e.g., person A is trustworthy; person B is not). Sometimes they have such strong distrust that they feel unable to trust their own relationship partners or family members, even when these people have done nothing to betray the trust. These strong feelings of distrust are important to discuss because they can lead to controlling or abusive behavior.
- When problems with intimacy are raised in group, participants should be reminded about the impact of emotional numbing symptoms. In addition to facilitating more positive views on intimacy, facilitators should highlight the importance of engaging in positive activities with their partner to increase their sense of intimacy. Communication and emotional expression skills covered in later meetings will also serve to enhance intimacy.
- Those who report stressful or traumatic life events often have low self-esteem because they harshly judge themselves when they make a mistake, or they unfairly blame themselves for what happened to them. Low self-esteem can lead to insecurity in relationships and abusive behavior. Facilitators should note that bad things happen to everyone from time to time, and acceptance of this helps participants let go of blaming themselves for events that they did not cause.
- Those experiencing stressful or traumatic events may try to have complete control in relationships and have a tough time letting the other person have any control. As a result, controlling behaviors and abuse may develop. On the other hand, others feel

completely helpless. They might become overly passive in relationships and easily give in to the demands of others because they feel like they have no control over their lives. They keep their feelings to themselves and may become resentful of others who do not understand what they are going through. It should be emphasized that healthy relationships involve sharing power and control. Relationships in which one person has all the power tend to be abusive.

II. Group Exercise: What is being assertive?

- **Rationale:** The primary task of this exercise is to provide psychoeducation about expressing emotions with healthy assertiveness.
- **Instructions:** Ask participants to give their definitions of being assertive, particularly with regard to anger.
- After discussing participants' assertiveness definitions, describe the anger response, covering the following points:
 - The anger response includes thoughts, feelings, and physical reactions.
 - These three components are inter-related. Give examples (e.g., driving and someone cuts you off on the road; perceptions of the person's intentions, physiological arousal, and anger are all inter-related and feed off each other).
 - The more aware that one is of each part of the anger response, the more easily one can implement anger reduction strategies before they feel too far out of control with anger.
 - The anger response is a survival response that when experienced and communicated in an appropriate way can be very useful and healthy. So the goal is not to eliminate anger completely but manage it better.
 - Anger as an emotion is not the same thing as aggression as a behavior. Aggression that can result

from anger is problematic; whereas, anger in and of itself is a protective and healthy response.

- Feelings of anger can be important emotional feedback that gets us to pay attention to the people/places or things that are bothering us.
- People who experience and healthily express anger have fewer health problems.

III. Handout:

3 TYPES OF ANGER EXPRESSION

- **Rationale:** It is important to discuss distinctions in anger expression relatively early in the meeting sequence to assist participants in discriminating appropriate versus inappropriate responses to anger provoking situations.
- Participants are introduced to the concept of "assertiveness" and the distinction between expressing anger assertively, passively, or aggressively.
- Both men and women learn to keep their emotions in and are not taught how to expression them assertively. Men may be particularly likely to have been socialized to express their feelings more aggressively.
- It is common for participants to "stuff" their anger for fear that they will respond aggressively, or do or say something that they will regret. This may lead to pent up anger which may result in aggressive outbursts. Aggressive outbursts undermine the effort to address legitimate grievances or problems.
- With every act of aggression, it becomes more difficult to discuss problems and less likely that the problems will be resolved. Thus, assertiveness training is particularly important for this population.
- **Instructions:** Review the handout with participants and ask for examples of each form of anger expression.

- Highlight that assertiveness does not mean giving in to others. It involves expressing one's emotions in a way that is not abusive but still gets one's needs met.
- Assertiveness involves mutual respect for the rights and feelings of one's self and one's partner. Aggressive responses violate the other person's right to be treated with respect and convey a serious lack of concern for the other person's feelings. Passive responses, on the other hand, fail to respect one's own rights and feelings. The challenge for participants is to find the "middle way" responses that are respectful of both one's own feelings and rights and the partner's feelings and rights.
- A very common cycle is as follows: 1) respond passively to relationship issues by avoiding or failing to deal with problems that arise ("stuffing" angry or hurt feelings); 2) build up resentments and a list of grievances; and 3) "blow up" with an aggressive response (cold or angry outburst) that expresses built up resentments and bad feelings.
- **Tips:** It is helpful to make the point that openly discussing problems and issues in relationships can lead to a greater understanding and intimacy, AND it might lead to improvements in recovery from trauma.
- Some participants may feel vulnerable communicating in an assertive manner. It will be important to gently challenge participants by asking them how well their current style of anger expression works for them and suggest that the long term benefits of assertive communication are likely to outweigh the short term discomfort.
- Encourage the use of "I" statements in assertive responding because many participants will make "You statements" (e.g., "You make me so frustrated, mad, etc.") without realizing it.
- Some participants may contend that it "doesn't work" to use assertive responses because they

cannot control others' responses. Remind participants that there are very few situations (e.g., prison) where it is more effective to use aggressive or passive responses to conflict. There are often short term benefits but long term problems associated with aggressive and/or passive responses to conflict.

- Remind participants that it takes time and dedicated practice to change patterns of behavior.

IV. Group Exercise: Relaxation Training

- **Rationale:** Oftentimes discussing prior stressful experiences and anger can bring on feelings of stress or anger. Conducting a relaxation exercise provides a great opportunity for an in vivo demonstration of the benefits of relaxation with respect to lowering stress and/or anger arousal.
- **Instructions:** Introduce relaxation techniques as a strategy to cope with stress, anger (e.g., during Time Outs), and other negative emotions.
- Review the fight or flight response. Explain that this physiological reaction is a natural response to threat and stress, and people suffering from stressful life events have an overactive fight-flight response. The relaxation strategies covered in this session are designed to counter these physiological aspects of anxiety and anger.
 - *There are two goals for this exercise: 1) increase your awareness of how your thoughts are related to your physical experience of anger and stress, and 2) show you how relaxation exercises can help you cope with stress and defuse your anger responses. Over the past few weeks, you have been learning about your **early warning system** that helps you recognize when you're getting angry. Now that you're noticing these early signs, you can catch your anger or notice your stress increasing and use relaxation to help you reduce your anger before it gets out of control. By doing this, you're defusing anger by distracting your-*

self from thoughts that might increase your stress or anger and by slowing down your body's physical reactions and interrupting the fight/flight response. Let's practice.

- Hand out the **ANGER METER** and ask group members to think about a recent anger provoking situation for 1-2 minutes. Then ask group members to rate their level of anger on a scale of 1-10. These ratings will be compared with ratings obtained after the relaxation exercise to demonstrate the reduction in anger achieved when doing the exercise.
- Conduct the relaxing imagery exercise using the script included in this manual. The room should be made as comfortable as possible.
- After completion of the relaxation exercise, group members are again administered an **ANGER METER**.
- Group discussion then focuses on the following questions:
 - What are the differences between the two Anger Meters?
 - Was their anger rating higher or lower the second time?
 - Were they able to reduce their anger arousal via the relaxation exercise? If not, why not?
- After completing this exercise, provide all group members with handout containing suggested relaxation apps to assist group members in their cool down efforts.



V. Practice Assignments

(I) ANGER ANALYSIS FORMS

- **Rationale:** Selfmonitoring of anger can provide helpful information about the frequency, intensity, situational parameters, and other features of a problematic behavior pattern, which in turn can be used to alter the behavior.
- The first page of the Anger Analysis Forms is designed to enhance individuals' personal awareness of the anger response, including the situational, cognitive, and bodily/emotional components of anger. Enhanced awareness can be helpful in participants' attempts to perform alternative behaviors like Time Out. The earlier in the anger sequence that individuals can "tune in," the more likely they are to successfully manage a difficult situation.

■ This self-monitoring may also provide a clear picture of the cognitive and interpersonal themes in the participants' anger problems. Most individuals become intensely angry in response to a few specific themes that are in turn linked to problematic selfconceptions. For example, an individual might become very hurt and angry at the slightest sign of rejection, even imagined rejection, from the partner. This theme of rejection and abandonment might be linked to self-esteem problems that may have resulted from trauma. Often, other potentially relevant core themes of trust, intimacy, and power and control were covered earlier in the material for this meeting.

- The second page of this form assists participants in analyzing the strategies that they currently use when confronted with anger-provoking situations. It allows participants to indicate how they responded assertively and the areas that need more work (e.g., passive and aggressive responses).
- **Instructions:** Explain to participants that in order to manage their anger more effectively, they need to become more aware of their anger response and how they respond to anger-provoking situations.
- Review the items under each anger style to ensure that participants understand them. Empha-

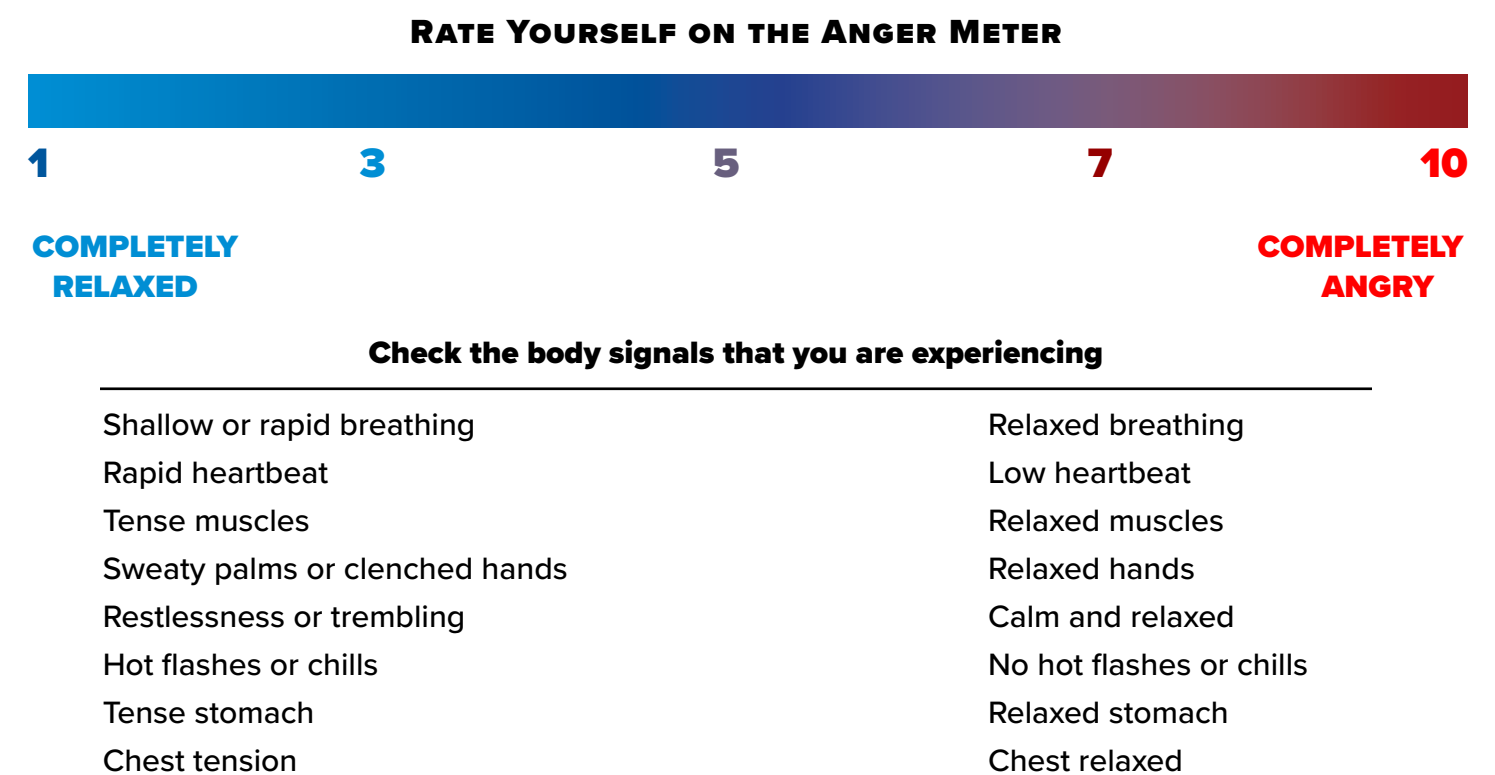
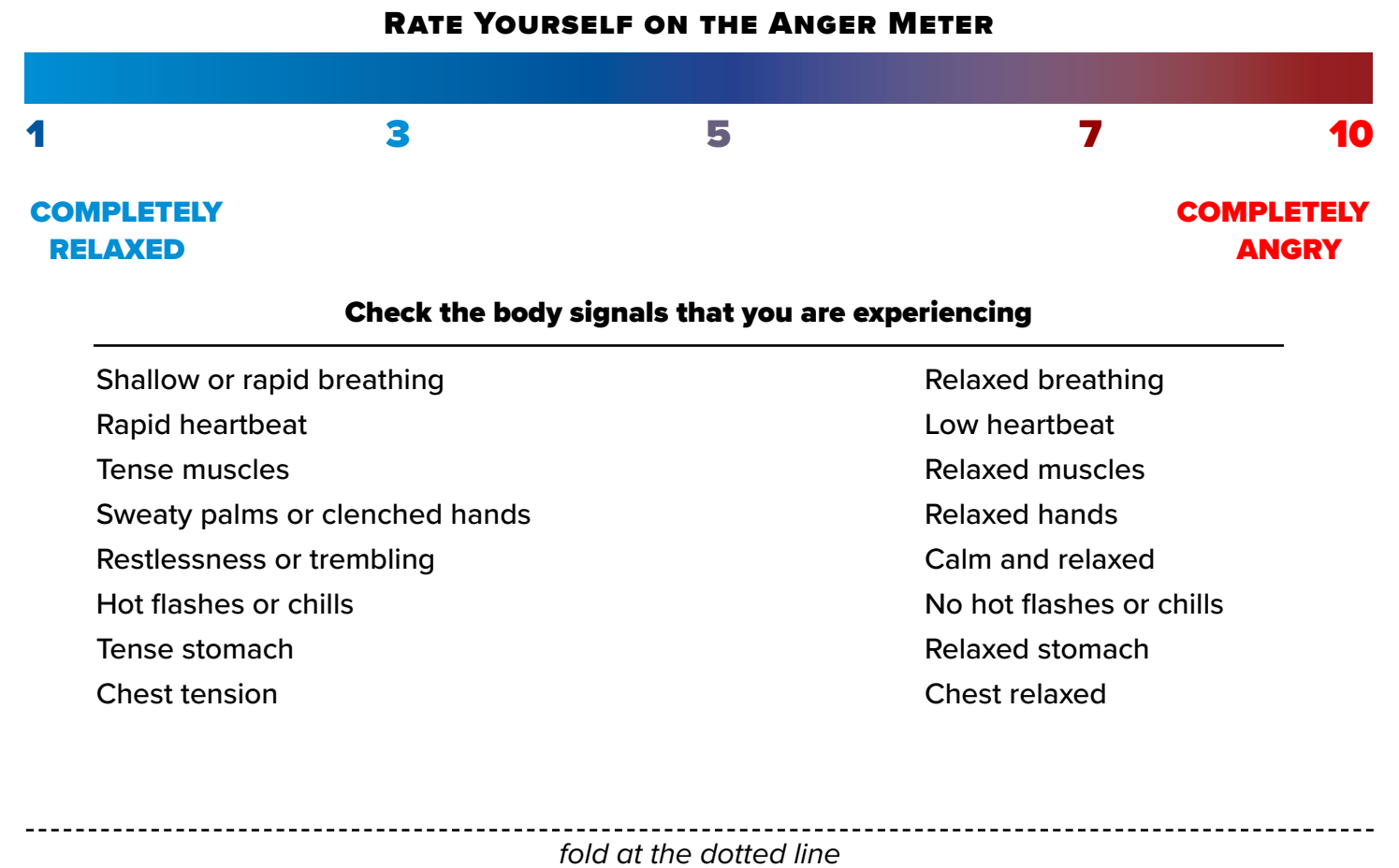
size the importance of including effective "cooling down behaviors" in their arsenal of anger management strategies.

- If time permits, participants should each complete the Anger Analysis Forms in the meeting, and these can be reviewed in group.
- **Tip:** Some participants may not currently be with a partner and may complain that this assignment does not apply. They should be instructed to log other angry situations at work, school, or in daily life and to log difficult or abusive interactions from the past.

3 TYPES OF ANGER EXPRESSION

AGGRESSIVE ANGER	PASSIVE ANGER	**ASSERTIVE ANGER**
<ul style="list-style-type: none"> ● Goal is <i>domination</i> and <i>control</i> ● Can be physical or verbal/emotional ● Includes blaming, name-calling, using put-downs, threatening, getting loud ● Puts the other person on the defensive so they want to fight back ● Frightens other people so they don't want to deal with you or listen to you ● Can have many <u>negative consequences</u>: loss of trust and closeness, loss of relationships, people refusing to interact with you or help you, legal trouble, health problems 	<ul style="list-style-type: none"> ● Goal is to <i>avoid conflict</i> ● Anger is turned inward; thoughts and feelings are not expressed ● Anger is “stuffed down” but can still build up inside ● No solution can be achieved because feelings and needs are not communicated ● Needs are not met ● Anger can “explode” into aggressive anger when it builds up and isn't expressed ● <u>Negative physical consequences</u>: upset stomach, headaches, muscle tension 	<ul style="list-style-type: none"> ● Goal is to <i>resolve conflict</i> and <i>increase understanding</i> ● Communication of thoughts, needs, and/or feelings is direct and clear ● Anger expressed clearly without blaming, threatening, or raising your voice ● Involves listening to the other person's perspective ● Involves taking responsibility for one's actions ● Includes setting limits and making suggestions for compromise and ways to solve the conflict ● Reduces negative consequences and increases chances of <i>ending</i> the conflict and getting needs met ● Improves relationships

ANGER METER



RELAXATION EXERCISE



Breathing:
In for 5,
hold for 5,
out for 5

Practice Assignment ANGER ANALYSIS FORMS

Briefly describe a recent anger situation.

What were your physical reactions during this anger episode? (Please circle or add your own).

muscles tight teeth clenched blood rushing rapid breathing sweating
heart racing adrenaline rush headache stomach pain trembling

Add your own _____

What were your feelings during this anger episode? (Please circle or add your own).

mad disgusted rageful jealous ashamed hurt
sad glad depressed embarrassed lonely frustrated
scared irritable anxious humiliated guilty horrified

Add your own _____

What were your thoughts during this anger episode? (Please circle or add your own).

“If I don’t stuff my anger, I’ll blow up.”
“S/he is trying to push my buttons.”
“I’ll show her/him who they are dealing with.”
“S/he is not listening to me, and I need to make him/her understand my side.”
“S/he is not on my side.”
“I’m going to get my way no matter what.”

Add your own _____

How did you respond to this situation? Check off your behaviors.

ASSERTIVE:

- Asked clarifying questions instead of making accusations
- Communicated your needs without demeaning or being sarcastic to the other person
- Expressed your feelings about the issue
- Took a Time-Out
- Used "I" statements (e.g., "I am upset" instead of "You make me upset")
- Used polite language (e.g., no swearing or insults)
- Approached problem with a constructive attitude and tone
- Set limits (e.g., explain that you will not tolerate certain behaviors)
- Suggested a compromise to a disagreement
- Controlled your display of anger despite the other person's reaction

Add your own _____

AGGRESSIVE:

- Made verbal threats
- Used inflammatory language (e.g., swearing and/or insults)
- Raised voice or used a sarcastic/demeaning tone
- Glared at or "stared down" the other person
- Broke or threw something
- Became physically aggressive

Add your own _____

PASSIVE:

- Did not communicate your thoughts and feelings
- Withdrew or walked away in an attempt to avoid addressing the problem
- Dwelled on feelings of anger and defeat without attempting to solve the problem
- Used a form of negative distraction (e.g., drinking or other substance, risky behaviors)
- Used sarcasm

Add your own _____

COOLING DOWN BEHAVIORS:

- Worked off your anger through physical activity or exercise
- Spoke to a friend or professional
- Used positive distraction (e.g., favorite hobby or activity)
- Created a soothing environment (e.g., put on music, took a warm bath)
- Treated yourself to something special (e.g., a nice lunch, a massage)
- Wrote down your feelings
- Did a deep breathing or relaxation exercise

Add your own _____

MEETING 5: Active Listening

Overview

Participants discuss aspects of good and bad communication, after which the discussion focuses specifically on active listening skills. Active listening is emphasized because they are the foundation of good communication and are critical for the de-escalating conflict and enhancing intimacy. Listening skills are particularly important when significant trauma symptoms are present in one or both members of the couple because information processing abilities are often compromised by emotional arousal.

Meeting Plan

Last week we looked at the roots of your sexual style. Today we're going to go over listening skills to help you work on communicating what you want, and emotions, more effectively.

I. Practice Assignment: SEXUAL IMPULSE LOG

- **Instructions:** Ask each participant to share their responses on the homework.
- Reiterate the importance of selfawareness in the change process.

II. Handout: GOOD COMMUNICATION DOS AND DON'TS

- **Instructions:** Ask participants to take a few minutes to write answers to the first three items on the handout: “Good communication is ___”, “Bad communication is ___”, and “The most important communication problem in my relationship is (or was) ___”.
- Encourage participants to provide personal examples of their own good and bad communication.

- Leaders may write out a list on a poster board to summarize the group’s ideas. Highlight common themes.
- Discuss the importance of good verbal and nonverbal communication and begin to emphasize the importance of listening skills.
- **Tips:** Leaders guide participants to recognize that good communication usually involves an exchange of ideas or information, clear expression of feelings, and a sense of understanding.
- Leaders point out that in bad communication information is often not exchanged because it is held back or ignored, feelings are expressed indirectly or in an intimidating or hurtful fashion, and people feel frustrated and lonely.
- If participants do not generate this, leaders remind them that “I” statements are preferable to “you” statements.

III. Handout: ACTIVE LISTENING

- **Rationale:** When people think about communication, they often think more about how they get their point across than how they show they are listening. Learning to be a better listener is actually the most efficient way to improve communication.
- Active listening is important because it helps one’s partner feel listened to. There is a large difference between hearing what someone says and actually listening to them.
- **Instructions:** Review the **ACTIVE LISTENING** handout and emphasize the following:
 - Active listening does not mean losing the argument or giving in to one’s partner. It simply means making an effort to understand their partner’s feelings.

- Listening is a difficult skill that takes practice.
- Understanding another point of view does not equal agreement, i.e., you can understand someone and still disagree with them.

IV. Group Exercise: ACTIVE LISTENING ROLE-PLAY

- **Instructions:** Ask the group for volunteers to participate in an active listening role-play either with one of the facilitators or another participant.
- Ask other participants to provide feedback and then process the role-play with the group.
- **Tips:** Some participants may indicate that active listening feels awkward or unnatural. Leaders should reassure them that it is normal for this to feel awkward at first, but it becomes more natural with regular practice, and partners usually have a very positive reaction to active listening.

- Monitor participants’ use of “yes, but...” statements, as this pattern of communication can undermine active listening skills.
- Often participants will report having a difficult time listening without trying to come up with their own response. One suggestion may be to approach listening with CURIOSITY – tell members to be as curious as possible about what the other partner is trying to communicate.

V. Practice Assignments

(I) ACTIVE Listening PRACTICE

- **Rationale:** This assignment will provide additional practice using these skills.
- **Instructions:** Participants should practice active listening skills learned in this session with their partner or others throughout the week.

GOOD COMMUNICATION

Most people agree that good communication is an important part of healthy relationships. Communication means different things to different people. What does it mean to you?

Good communication is:

Bad communication is:

The most important communication problem in my present life is (or, if none now, then most recently):

Here are some other ideas about good and bad communication that come from research studies and therapists who work with couples.

Good communication can help you:

- 1) understand the other person's feelings and desires
- 2) express your own feelings and desires
- 3) develop closeness, trust, and mutual support
- 4) solve problems with loved ones

Bad communication can:

- 1) erode trust and closeness
- 2) leave people feeling disrespected, resentful, hurt, and angry
- 3) lead to many unresolved problems
- 4) lead to struggles for power and control

When you thought about bad communication, did you think about things that the other person does? Did you think of any things that you do? Many of us expect other people to change first. Waiting for the other person to change will never work. You can change communication in your relationships by working on it yourself.

We will be talking about both verbal and nonverbal communication in this program. While things you say are important, your body language and other nonverbal ways of expressing yourself (e.g., facial expression) can be equally important.

Communication can also be broken up into speaking and listening. As we will discuss in the next exercise, showing your partner that you are listening to her is the most important communication skill that you can learn.

ACTIVE LISTENING

The use of active listening skills is the most effective way to make people feel that you understand their message. During conversations, especially heated ones, most of us concentrate on getting our point across. We think about whether the other person understands us. To improve listening skills, however, we need a different mindset. In an active listening mindset, understanding the other person's feelings takes priority. The goal is to hear the other person out without imposing your own feelings or opinions. Once the other person feels that you understand what they are saying, then it will be much easier for you to communicate your own feelings and opinions.

Paraphrasing, clarifying through questions, and validating are the three main elements of active listening.

(1) Paraphrasing

"Paraphrase" means to put something in your own words. Good listeners often paraphrase what the other person has said in order to find out if they understand. Example phrases to start paraphrasing are:

"What I hear you saying is ..."

"So you feel ..."

"So what you want is ..."

It is very important to keep a listening mindset while paraphrasing. Remember that paraphrasing is a skill to help you understand what the other person is saying or feeling. Almost nobody says things exactly the way they want to on the first try. Therefore, other people will often clarify themselves after you paraphrase what they have said. If you lose the listening mindset, you will be tempted to twist the other person's words to get your own point across. This is not active listening; it is an indirect attempt to express your own feelings. Remember that you will get a chance to express your feelings more directly after the other person feels understood.

(2) Clarifying Through Questions

Once you adopt an active listening mindset, you will realize that there are many things you don't understand about most other people's thoughts and feelings. The simplest approach is to ask, without judging or accusing, what that person feels (caveat: ask courteously if a Professor, Dean, law enforcement, authority, etc. as it can come across the wrong way). When you have a question in mind, ask yourself whether the question is designed to prove your point or whether it is an honest attempt to understand the other person. If the question is genuine, then the other person is likely to answer in a way that will help you understand. If the question is a disguised attempt to prove a point, then the other person may respond defensively.

(3) Validating

The highest level of active listening is when you understand what the other person feels and why they have these feelings. We call this validation – being able to understand why other people think, feel, or act the way they do. Validation occurs when you can honestly say "I see why you feel that way." This is the goal of active listening.

ROLE PLAYS

(1) You have a legitimate excuse for having turned in an assignment late and missed a class, but the professor will not give you a break and offer an extension. This means that you will fail the class. You have decided to talk to the professor. You are very angry and frustrated that she is being so unreasonable.

(2) You have been doing your roommate's dishes for two months without telling him how much it bothers you. You figured that he would eventually notice and maybe sometimes do yours, or even apologize. Now he seems to just expect you will do his dishes. You have decided to talk to your roommate because you realize that your feelings of resentment are mounting to the point you want to move out over this.

(3) Your partner says that you don't spend enough time with them. They want you to be at home with them at least 3 evenings a week. You can't promise that because you are working for the local radio station and have to accept whatever prime slots they give you, which are usually night/evening. On top of that, you've just joined a competitive roller derby team that practices 4 nights a week and weekends. You don't want to lose the relationship, and you wish that your partner would just back off. Have a conversation about it.

(4) The Dean of your university is telling you that you that you have violated a campus rule about fire hazards by having a hot plate in your dormitory room and that you will now face suspension. The university has suffered major fire-related incidents in the past and takes fire violations very, very seriously. You didn't realize that the rule carried such consequences, or even that you were necessarily breaking a rule, as you didn't have an open flame and so many other people also have hot plates. You aren't sure why you, personally, are being made an example of about this. The Dean seems unmovable about the sanction and you are more than angry—you feel enraged and at the end of your rope. Now the Dean wants to meet about it.

Practice Assignment ACTIVE LISTENING PRACTICE

The purpose of this assignment is to give you practice in active listening. Please make a point of using active listening with your partner or someone else at least 2-3 times over the next week. Choose topics that matter to you but don't choose topics that will likely lead to an argument. It is best to practice these skills under low stress situations first before you practice with more difficult situations. Choose one of those practices to write about for this assignment.

Remember, ACTIVE LISTENING consists of three parts:

- (1) Paraphrasing: Repeat back to the person your understanding of what they said.**
- (2) Clarifying through Questions: Ask what the other person feels without judging or accusing.**
- (3) Validation: Show you understand why the other person thinks, feels, or acts the way they do.**

What was the situation or topic for which you used active listening?

What did you like about how you used active listening?

What would you do differently next time?

MEETING 6: Expressing Feelings

Participants review their communication self-monitoring forms and the active listening practice assignment. Program material then focuses on how avoidance can lead to difficulties expressing emotions in relationships. Strategies for expressing feelings are provided. Emotional expression skills are important for enhancing intimacy and understanding in relationships. Next, participants explore gains made in the group. They identify goals and strategies for future change along with barriers to change and strategies to overcome these barriers. Program leaders help participants develop a realistic appraisal of changes made and to help them identify areas needing continued attention and strategies for continuing this work after the program ends.

I. Review Practice Assignment: ACTIVE LISTENING PRACTICE

- **Rationale:** To provide additional practice in using these skills.
- **Instructions:** Review the concept of active listening (i.e., paraphrasing, clarifying through questions, and validating).
- Encourage participants to give examples of active listening.
- Remind participants to avoid “yes, but...” statements.

II. Handout: IDENTIFYING FEELINGS

- **Rationale:** The **Identifying Feelings** handout is presented to help participants expand their emotional language.
- **Instructions:** Discuss the relevance of emotional numbing, identifying feelings, and expressing feelings.

- In order to help you figure out how you feel, we will be discussing emotions today. There seems to be some primary emotions, or feelings, which include Mad, Sad, Scared, Disgusted, and Glad. These primary feelings exist on a continuum from a lower level to a higher level (give examples from handout). The intensity of feelings can also range across people and different situations.
- Often people find it easier to express anger than other feelings, even if other feelings are underlying their anger.
- You can also take the primary feelings and combine them to create other feelings (give examples from handout)
- Ask participants which emotions they feel most frequently and which emotions they may have difficulty talking about.

III. Handout: EXPRESSING FEELINGS

- **Rationale:** This handout emphasizes the importance of openly expressing feelings in combating avoidance.
- **Instructions:** Initiate a group discussion related to the content and questions posed in this handout.
- It is important to emphasize the possible dangers of avoiding emotional expression; this may damage relationships and exacerbate/prolong PTSD and other trauma-related problems.

IV. Handout: TIPS FOR EXPRESSING FEELINGS

- **Rationale:** As a result of emotional numbing, individuals may have difficulty expressing both positive and negative emotions, particularly at the relationship-level, which affects intimacy.
- Sharing feelings is one way that couples feel intimate and close to each other. Being honest

about feeling hurt or afraid may require being more vulnerable than expressing happiness or anger.

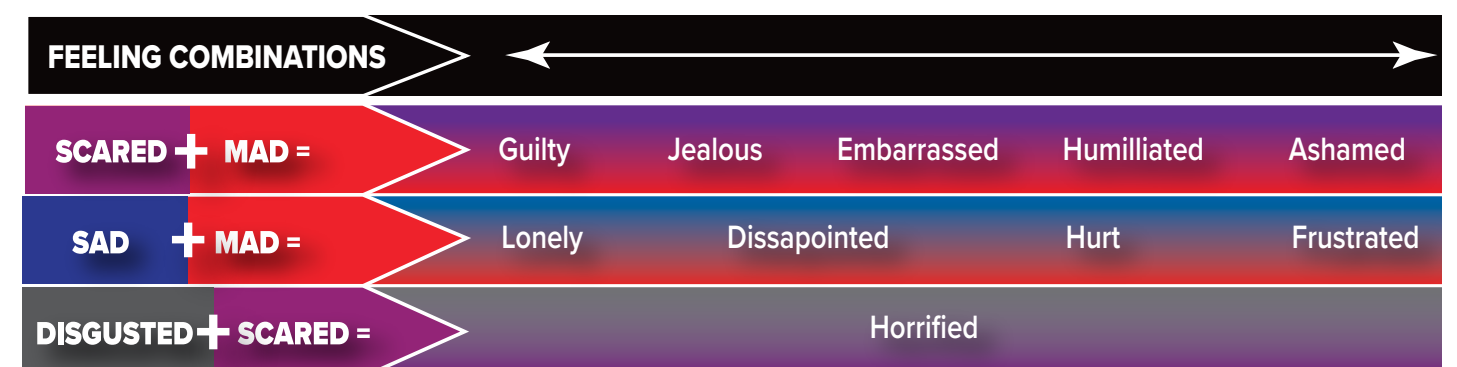
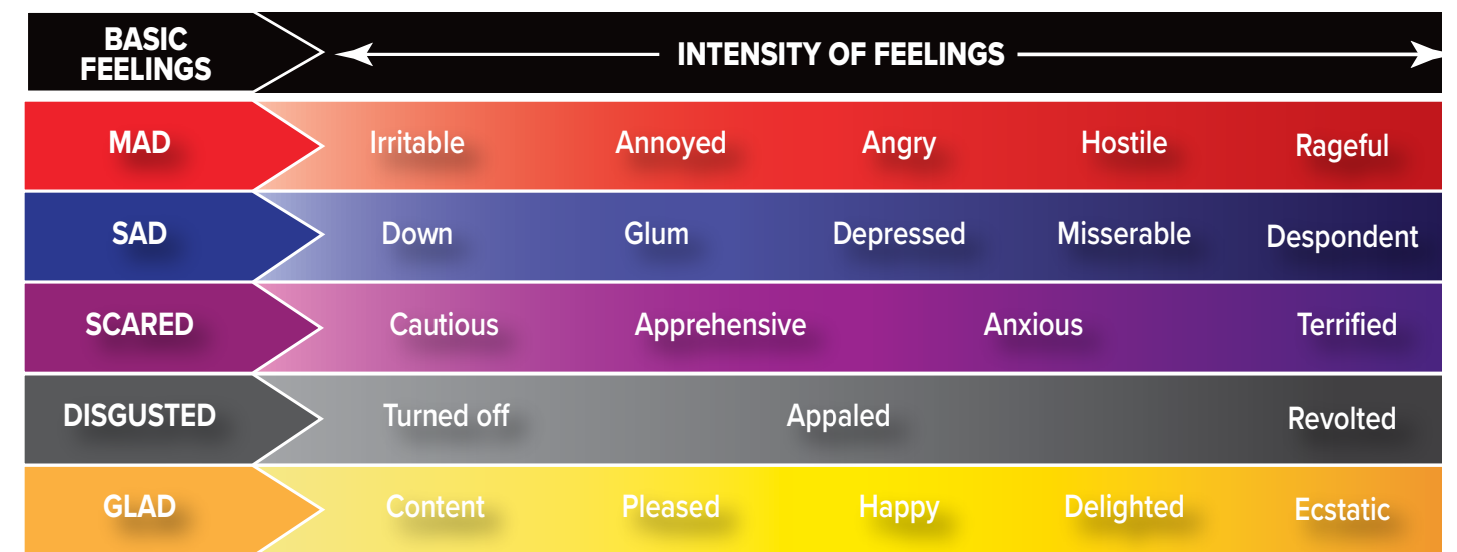
- **Instructions:** Review the handout and elicit examples/feedback from the group.

V. Group Exercise: CONTINUING THE CHANGE PROCESS

- **Rationale:** This exercise focuses on plans to continue work after the end of group.
- **Instructions:** Troubleshooting, encouragement, coaching, and further information are often needed at this point. For example, some group members would like to enter couples’ or individual therapy as

part of their continued work after treatment. These individuals may not know how to find a therapist or ask his partner to participate.

- Encourage realistic and honest appraisals of progress made by participants for themselves and other program participants, and be clear about potential future risks.
- Provide specific information and address questions about continuing the change process after the end of the group. Some group members may benefit from self-help books, self-help groups such as Alcoholics or Gamblers Anonymous, relationship enhancement seminars, or from information or referrals to other local resources.



EXPRESSING FEELINGS

Feelings are the glue that holds any type of relationship together. Expressing your feelings builds intimacy and trust. A really important thing to know is that these feelings DO NOT have to be only positive. It seems that the SHARING of feelings is more important than the TYPE of feelings shared.

Some individuals, especially if they have been exposed to trauma or have had negative prior experiences in relationships, often avoid expressing their feelings. When you avoid expressing your feelings, you are likely to feel more disconnected from the other person, and problems may not get better. When you directly deal with feelings, you are better able to make sense of them.

- Can you think of a time that you or another person shared a feeling (not necessarily positive) with one another and it made you feel closer to them?
- What ways do you avoid expressing feelings?
- What do you fear might happen if you shared more in your relationships?

TIPS FOR SHARING FEELINGS

- 1) *Practice identifying your real feelings.* Some feelings tend to overpower other feelings. For example, anger often hides embarrassment, fear, or hurt. It takes practice to get at the root of how you feel. Practice asking yourself “what am I really feeling?” This question will help you think through what is most important to communicate to your partner.

- 2) *Use “I” statements.* The way that you phrase things is important in expressing feelings. Phrases such as “I feel ...”, or “I would like...” are much more effective than phrases such as “You make me feel ...”, “You never ...”, or “You always ...”.
- 3) *Be non-judgmental.* Remember that there are no right or wrong feelings. It is important to not judge how the other person feels.
- 4) *Remember to listen.* It can be easy to go into “fix it” mode when the other person is expressing distress or concern. The other person may want your attention and understanding rather than suggestions about how to fix the problem. Remember the importance of active listening. Ask if the other person wants to hear your ideas about how to fix the problem. Be understanding if the other person just wants to vent.

Handout- Session #6 CONTINUING THE CHANGE PROCESS

Although 6 weeks may seem like a long time, it is a very short time to make major changes in your life. Hopefully, this program has helped you to think about where you could make some changes that could be useful. The rest is up to you. The purpose of this assignment is to help you think about what you have learned from the group, the changes you have made, and what issues you think you need to work on after the group has ended.

What parts of the group did you find helpful?

What are some of the things you have learned about yourself and your relationships with others as a result of the group?

What would you like to continue working on after group is over?

How do you plan to continue working on these things? Will you seek out additional help after the group is over?

What might get in the way of you continuing to make positive changes? How will you address these potential problems?
