Circle of Hope
A Guide for Conducting Psychoeducational Support Groups

WASHINGTON COALITION OF SEXUAL ASSAULT PROGRAMS
A GUIDE FOR CONDUCTING PSYCHOEDUCATIONAL SUPPORT GROUPS

WCSAP
END SEXUAL VIOLENCE IN OUR COMMUNITIES
Mission
The Mission of the Washington Coalition of Sexual Assault Programs is to unite agencies engaged in the elimination of sexual violence through education, advocacy, victim services and social change.

Our Philosophy
WCSAP supports the rights of people to have access to quality information, advocacy, crisis intervention, treatment, education, and prevention services. We support the right of a victim to make choices about reporting, prosecution, pregnancy, future safety, and other issues raised by the experience.

WCSAP functions through member programs to exchange information, training, and expertise. Programs serve victims, the general public, friends, family, and all those whose lives have been affected by sexual assault.

WCSAP is committed to service all individuals regardless of race, gender identity, religion, age, ethnic background, social, economic status, sexual orientation, marital status, physical, or mental status. WCSAP recognizes the importance of working on racism, homophobia, able-bodyism, and other issues of oppression in order to make services accessible to all individuals.

The Washington Coalition of Sexual Assault Programs (WCSAP) views sexual assault as a means of power, control, and manipulation of others and as a social phenomenon which adversely affects adults and children. WCSAP supports efforts to create an atmosphere of non-violence through social change. We are committed to empowering survivors and eliminating sexual assault.

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INTRODUCTION

A particularly successful method of working with survivors of sexual assault and trauma is by bringing survivors together in groups. Groups are an effective tool in providing support, validation, connection, healing, empathy, and giving hope. At the core of all sexual assault is disempowerment and disconnection. To assist in recovery, empowerment and connection is key. It is amazing to witness the transformation that many survivors make because of these groups... because they realize they aren’t alone, because they realize that people care, because they learn that it wasn’t their fault, and yes, because through connection and validation there is hope. Often times the relationships and sense of connection that members develop between each other may be some of the most positive and supportive relationships in their lives. Because these groups can have such a profound impact on survivors of sexual assault, it is therefore vital that as advocates we possess both the skills and knowledge to effectively facilitate groups. Hence, the purpose of this manual; to provide a roadmap of sorts, to navigate through the world of psychoeducational support groups.

It is important to note that this manual is considered a basic guide and has been written with beginner facilitators in mind and offers the reader some practical guidance and recommendations for both the facilitation and design of psychoeducational support groups. Much of the information presented here has been gathered from existing research and literature as it pertains to groups, from the OCVA support group standards, as well as from the experiences of those who assisted with the writing of this manual. It is recognized that those who have been doing this work for awhile
bring their own expertise and we therefore encourage you to pair your own wisdom and experience with the information presented here.

Traditionally there are three categories of groups – self-help groups, psychoeducational support groups and therapy groups. This manual is specifically geared toward working in the arena of conducting psychoeducational support groups for sexual assault survivors as these are the types of groups that the Office of Crime Victim Advocacy funds local sexual assault programs to implement in the State of Washington.

This manual is divided into three sections. The first section outlines some theoretical frameworks and guidelines specific to psychoeducational support groups, such as definitions and characteristics of these groups, as well as some effective facilitator fundamentals. The second section or our “how to” section offers some practical applications on how to set up groups, pitfalls and solutions, and other recommendations. The third section or the appendix will offer samples of helpful tools to use.

As you work to provide the most effective services to your clients, we hope that you find this information useful and relevant.
THEORETICAL FRAMEWORK

SECTION 1
SO, WHY FACILITATE PSYCHOEDUCATIONAL SUPPORT GROUPS?

PSYCHOEDUCATIONAL SUPPORT GROUPS HAVE THE FOLLOWING BENEFITS:

- They help to enlarge the social network of members.
- They decrease isolation and a sense of alienation.
- They allow members to meet others with the same problem.
- They help members develop a sense of community.
- They provide factual information and enable participants to learn new coping strategies.
- They teach participants to learn to cope with public attitudes, myths and facts surrounding sexual assault and hopefully learn to understand it was not their fault.
- They provide safety, empathy, validation, and much needed support.
- They can restore a member’s spirit of hope and self-confidence.
- They increase self-awareness.
- They help victims take responsibility for their own lives.
- They help members move away from a victim identification into a survivor identification.
SO, WHAT IS A PSYCHOEDUCATIONAL SUPPORT GROUP ANYWAY?

CHARACTERISTICS OF SELF-HELP, PSYCHOEDUCATIONAL SUPPORT GROUPS AND THERAPY GROUPS

A good place to begin our exploration of psychoeducational support groups is to have a solid understanding of what they are. Although there are other types, traditionally there are three categories of groups: self-help, psychoeducational support and therapy groups.

As a facilitator, you may have some uncertainty in understanding the differences between self-help, psychoeducational support, or psychotherapy groups. When defining these three types of groups, it is easier to view them as falling along some sort of continuum. Self-help groups would be seen as falling on one end of the continuum, therapy groups can be viewed as falling on the other end of the continuum, with psychoeducational support groups falling somewhere in the middle.
CHARACTERISTICS OF SELF-HELP GROUPS

The primary focus of self-help groups, such as groups like Alcoholics Anonymous, is to help members gain support in changing some aspect of themselves. These groups are comprised of members who share a similar problem or life experience, are often “drop-in” in nature, are facilitated by the members themselves, and are usually on-going and open-ended. The major difference between this type of group and psychoeducational support groups is the focus on producing personal change (inherent to self-help groups) versus providing support, information and education, an inherent focus of psychoeducational support groups. Although self-help groups educate and support, these are not considered to be their primary goals.

CHARACTERISTICS OF PSYCHOEDUCATIONAL SUPPORT GROUPS

Using a broad based definition, psychoeducational support groups focus on providing emotional support and information to persons with a common problem, such as a survivor of sexual assault. These groups are most often led by a trained facilitator who is connected to a particular organization, like a sexual assault program. Unlike self-help groups, the primary focus of these groups is to provide education and support, and increase knowledge and coping skills, rather than to attempt to change some aspect of the person. While it is hoped that those who attend psychoeducational support groups learn information to increase their functioning in the world, attempting to change the person is not their primary goal.

It is important to note that “psychoeducational support groups are not therapy groups, and as such, leaders should not offer therapeutic interventions such as exploration of intense feelings, interpretations of unconscious material, encouragement to examine interpersonal relationships, etc.” Facilitators should remember that [psychoeducational support group] are more social than therapeutic in nature; they are a place to belong, not a treatment to undergo.

Psychoeducational support groups also differ from self-help groups in that they are facilitated through the use of a structured curriculum or agenda, with topics often being pre-determined by the facilitator, and sometimes with the assistance of group members, rather than being solely conducted by the members themselves.

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2Ibid
3Ibid., 32
OCVA SERVICE STANDARDS FOR SUPPORT GROUPS LENS

In the State of Washington, the Office of Crime Victims Advocacy provides funds for sexual assault programs to conduct support groups. The research that has been reviewed and set forth within this manual is consistent with the OCVA Service Standards for Support Groups such as:

PRE-SCREENING

Psychoeducational groups are best run as closed groups and are directed to a specific population such as a survivor of sexual assault. Closed groups are groups in which members have been pre-screened prior to the start of the group, and are not open to other individuals during the span of the group cycle. Closed groups differ from “drop-in” groups as they are not open to anyone at any time. Because of the closed nature of these groups, pre-screening of potential participants is therefore necessary. 
(We will discuss pre-screening in more detail in our “how to” section). Pre-screening helps to assess a participant’s goals and objectives for being in the group, helps assess potential issues that the participant may be bringing with them to the group, helps select members that are compatible with each other, helps to ensure that those who are selected are considered a good group fit, and ensures that being in the group is indeed, the best program fit for the participant.

Since pre-screening is an inherent element when conducting psychoeducational support groups, running drop-in groups, particularly for sexual assault survivors, is not considered to be the optimal choice. Although drop-in groups have their place, to regain a sense of empowerment and reconnection, sexual assault survivors need a sense of safety, trust, and boundaries. If the group is open to anyone at anytime, safety, trust and boundaries may be compromised.
Another issue inherent to pre-screening and conducting psychoeducational support groups is identifying the population you are serving and determining membership criteria. Research indicates that groups function best when members have similar issues or life experiences, like sexual assault. Therefore, mixing populations within the same group is not conducive to running effective groups. For example, it would not be considered good practice to have adult victims of sexual assault and non-offending parents of child victims in the same group. Each population has a unique set of needs and issues and when determining your curriculum for that population, those unique needs and issues need to be taken into consideration. Having mixed populations may also hamper a sense of safety, trust and boundaries. According to Linda Farris Kurtz, “Psychoeducational support groups depend on having members with similar problems or the same concern. Lacking this kind of homogeneity, the group cannot be cohesive, establish its program or extend its knowledge among members. Having the same focal concern is the essence of psychoeducational support groups; and as such, this must be the first criteria for membership.”

4Ibid., 95
PLANNED BEGINNING AND END DATE

To stay true to their nature, psychoeducational groups must be time-limited and therefore cannot be ongoing. Having a planned ending date gives the members hope that things can change, and that this does in fact, have an ending. We want our group members to “graduate,” otherwise they run the risk of becoming stuck. Groups that extend past their planned end date may run the risk of losing its focus on sexual assault and can transition into groups that focus on daily living skills or other type of group.
CHARACTERISTICS OF PSYCHOTHERAPY GROUPS

Using a broad based definition, the goal of therapy groups is to fundamentally change behavior and seek some kind of shift in action. Psychotherapy groups seek to produce individual growth and change through the relationships that the members establish between themselves and the therapist. “Using therapeutic interventions, therapists encourage and interpret the “here and now” events among members to produce insight and change. Members pay for the professional’s services. In therapy groups, the group provides a microcosm of society in which members examine dysfunctional ways of relating to the world.”

OCVA SPECIALIZED SERVICE STANDARD FOR THERAPY GROUP LENS

In the State of Washington, the Office of Crime Victims Advocacy provides funds for sexual assault programs to conduct therapy groups. The research that has been reviewed and set forth within this manual is consistent with the OCVA Service Standards for Therapy Groups.

Another way of looking at the difference between psychoeducational support and therapy groups is reflected by the following:

<table>
<thead>
<tr>
<th>PSYCHOEDUCATIONAL SUPPORT GROUPS</th>
<th>THERAPY GROUPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Bad Things Happen</td>
<td>• Bad Things Happen</td>
</tr>
<tr>
<td>• What information can I learn and what do I need in order to get on with my life?</td>
<td>• Why am I unable to cope?</td>
</tr>
<tr>
<td></td>
<td>• How has my past influenced the way that I am coping with the sexual assault?</td>
</tr>
<tr>
<td></td>
<td>• How do I move through the pain and through the world?</td>
</tr>
<tr>
<td></td>
<td>• Why am I stuck?</td>
</tr>
<tr>
<td></td>
<td>• How do the bad things impact my life, my relationships, my family, my work?</td>
</tr>
</tbody>
</table>

5 Ibid., 6
A WORD OF CAUTION

If you are doing things or dealing with the questions under the “therapy” section, you may have unintentionally crossed the boundary between therapy and psychoeducational support groups. If you do not have the qualifications to run a therapy group, you have the potential of doing a great deal of unintentional harm.

IMPORTANT DISTINCTION

In gathering information for this manual, we have found that several programs utilize trained psychotherapists, along with a volunteer or advocate facilitator to conduct the psychoeducational support groups. Although the therapist may have the training and expertise to run a therapy group, when conducting a psychoeducational support group, the therapist must “remove their therapeutic hat” so to speak, and not engage in therapeutic activities within the confines of the psychoeducational support group. This action ensures that the facilitators, regardless of their expertise, are staying true to the nature of psychoeducational support groups and not blurring the lines between therapy and psychoeducational support groups.

...the therapist must “remove their therapeutic hat” so to speak, and not engage in therapeutic activities within the confines of the psychoeducational support group.
A VISUAL: DIFFERENCES BETWEEN THE THREE TYPES OF GROUPS

To outline the differences using a visual aid, the following table delineates some of the major differences between the three types of groups. Major differences include:

- Degree of change-orientation focus
- Provision of a structured curriculum vs. open agenda
- Inclusion of a trained facilitator or therapist
- Whether the group is open to the public or closed,
- Time-limited vs. on-going, pre-screening vs. drop-in, etc.

Having an understanding of these differences can help facilitators of psychoeducational support groups conduct their groups in ways that foster sharing and healing, and that are safe, effective, and supportive. Without an understanding of these differences, facilitators may run the risk of crossing the line into providing therapeutic interventions when they are not trained to do so, potentially causing unintentional harm.
<table>
<thead>
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<th>SELF-HELP</th>
<th>PSYCHOEDUCATIONAL</th>
<th>THERAPY</th>
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</thead>
<tbody>
<tr>
<td>Primary focus is to seek support in changing some aspect of the person</td>
<td>Primary focus is to provide support, information and education to increase knowledge, and coping skills</td>
<td>Primary focus is to fundamentally change behavior; seeking some kind of shift in action</td>
</tr>
<tr>
<td>Facilitated by members of the group</td>
<td>Facilitated by a trained facilitator who is usually connected to an organization such as a CSAP</td>
<td>Facilitated by a trained professional therapist who uses psychological interventions and methods to foster the healing process.</td>
</tr>
<tr>
<td>Primary direction and topic of the group is determined by the members themselves.</td>
<td>Primary direction and topics of the group is usually determined by the facilitator ahead of time; can also determine topics and direction with the assistance of the group members.</td>
<td>Primary direction of the group is lead by members with therapist acting as interpreter and observer of behavior, thinking and attitudes.</td>
</tr>
</tbody>
</table>
| Unstructured | Provision of a structured curriculum  
- Curriculum most often developed by facilitator  
- Purpose is to provide education, support and information  
- Must be outcome based  
- Based on helping to increase knowledge and skill  
- Group is structured to facilitate learning and healing through a combination of activities, exercises, discussion and lecture. It is important to have a balance  
- Educational objectives are associated with each topic. | Often unstructured |
| Change-oriented, usually through telling of member stories | Not change-oriented. There should be no exploration of deep feelings, interpretations of unconscious material, encouragement to examine interpersonal relationships. It is not the role of the facilitator to challenge participant’s thinking, behavior and attitudes **(addendum follows)** | Exploration of deep feelings, interpretations of unconscious material. Challenge behavior, thinking and attitudes. “Call out” certain behaviors |
| Focus is on relationships and sharing between members, usually no cross talk | Participant driven within a given structure – open exchange of ideas, cross-talk | Focus is on relationship between the members and the member’s relationship with the therapist. |
| Open-ended | Time-limited to a specified number of weeks or sessions | Can be either on-going, time-limited and usually runs for a longer timeframe than psychoeducational support groups. |
| Self-help | Supportive in nature | Self-discovery |
| On-going, drop-in, no-prescreening | Closed – participants are pre-screened | Closed – participants are pre-screened |
** Although we have identified that it is not the role of the facilitator of psychoeducational support groups to challenge behavior, thinking, and attitudes, it is appropriate to ensure that group members adhere to the guidelines and ground rules that have been determined by the facilitator and the group. Here is an example of the differences.
PSYCHOEDUCATIONAL SUPPORT GROUP

Many groups adhere to the prohibition of group members coming to group under the influence of alcohol and drugs. If a group member does come to the group under the influence, it is appropriate to ask the group member to leave the group and come back the next session to ensure the safety of the rest of the group members. If the member does come back to group the following session, it would not be within the role of the facilitator to publicly challenge this behavior or attempt to decipher its meaning for that particular member. In other words, it would not be appropriate to attempt to “call out” the behavior and identify how that member’s life has been impacted by drugs or alcohol. It would be appropriate however, for the facilitator to bring up the topic of “coping skills” to the entire group and have all members discuss the various ways they have coped with their sexual assault and the impact their chosen coping method has had on their life.

THERAPY GROUP

Using the same scenario, if a member comes to group under the influence of alcohol or drugs, it might be appropriate for the therapist to challenge this particular member’s behavior when the member comes to the next session. A professional therapist would explore with this particular member, how using drugs and alcohol may have impacted their life, their family, their relationships, their work, etc.
GOALS AND FOUNDATIONS OF EFFECTIVE GROUP FACILITATION

Your goal as the facilitator should be to create an environment in which participants feel supported, feel free to share, feel safe, understand the boundaries and guidelines of the group, are given choices, and who feel empowered and affirmed.

The role of a facilitator is multi-faceted. You will be called upon to function in different capacities depending on the group’s composition, purpose, climate, duration, and skill level of the members. Ultimately, you should strive to serve as a guide for the group members as they navigate through both the healing journey and the group process. The role of a guide in this context requires the facilitator to lead by having a structured agenda, linking and engaging the members to the agenda or topic, and then empowering members to initiate discussion and respond to their peers.6

In her book, *Self-Help and Support Groups*, Linda Farris-Kurtz identifies several goals for effective group facilitators and facilitation:

**INFORMATION EXCHANGE** is one of the most important roles of psychoeducational support groups. The facilitator disseminates information about [sexual assault] and helps the survivor recognize their own strengths.

**MUTUAL SUPPORT** – An effective facilitator introduces the concept of mutual aid and demonstrates to the group how to use empathic responses and supportive comments.

**GROUP COHESION** – An effective facilitator emphasizes the members’ similarities and strengths.

**COPING AND SELF-EFFICACY** – An effective facilitator can point out to group members their use of successful mastery over difficult situations and enhance one another’s coping skills when they relate how they have coped in the past with similar issues.

**REDUCTION OF SOCIAL ISOLATION** – This occurs naturally when groups meet. As stated earlier, many join a group in order to increase their social support network and seek to develop a support system around them who can understand the issues and problems that they are going through.

**STRESS REDUCTION** – Structured meeting formats and the use of fun exercises and activities are excellent tools for reducing stress.

**SAFETY** – Safety is one of the most important goals for groups and for sexual assault survivors. An effective facilitator can first establish safety by initiating the group norms and sticking to clear guidelines. Furthermore, facilitators can foster safety by not demanding self-disclosure if the survivor is not ready to do so.7

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6Circle of Support: A Basic Resource Guide for Support Groups Responsive to Sexual Violence (Pennsylvania Coalition Against Rape, 1999) 11 – Adapted with Permission

Skills that facilitate group process include attending to members, responding, focusing the group’s communication, guiding the group interaction and involving members in communication. Support group facilitation relies less on interpreting member interactions and more on helping the group to become a supportive information system. Support groups do not stress member insight and change; they rather attempt to sustain functioning and ease burdens.\(^8\)

Although the optimal psychoeducational support group is directed and driven by its members, you as the facilitator must function as a skilled guide and active listener who is in tune with the flow of the process and responsive to the needs of the members. The members of the group will look to you as the expert and will periodically rely upon your catalytic skills throughout the process. Due to the intricacies and complexities of a support group, running psychoeducational support groups with two facilitators is recommended if possible, particularly for a new facilitator.\(^9\) (See the section on Training and Supervision for more details).

As with everything however, there are some benefits and challenges of having two facilitators.

**SOME OF THE BENEFITS INCLUDE:**

- Having two perspectives
- Combined strengths
- Opportunities to do roleplays
- Hold each other accountable
- Consult each other regarding group process
- Enhance skills by learning from each other.

**CHALLENGES MAY INCLUDE:**

Conflict, such as power struggles between leaders, can interfere with the group process and block the members’ productivity. It is important for co-leaders to meet regularly to smooth out potential conflicts and provide feedback to each other regarding the group participants and the direction of the group.

\(^8\)Ibid., 106  
PERSONAL CHARACTERISTICS OF EFFECTIVE GROUP FACILITATORS

To facilitate a psychoeducational support group effectively, facilitators must possess a variety of interpersonal and counseling skills. Therefore, we have asked the question, “What personal and professional characteristics should facilitators possess in order to be as effective as possible. While not exhaustive, the following are some examples.

ETHICS

The first responsibility and motto that all advocates, therapists, and facilitators must possess is to “do no harm.” A particularly successful strategy to avoid doing unintentional harm is to be crystal clear of your role within a given context, such as facilitating a psychoeducational support group. Additionally, having strong ethics requires that you continually question yourself, review your intentions and purpose, and know whether or not you are meeting your intended goals. Therefore, when facilitating groups, it is critical that facilitators identify the specific goals and objectives they are attempting to meet prior to the onset of the group. Having clear goals and an understanding of the differences between the three types of groups that have been outlined can help you remain within the parameters of your role and ultimately be true to your ethics.
POSSESSOR OF STRONG BOUNDARIES AND ESTABLISHMENT OF SAFETY

Boundaries are defined as effective and appropriate interactions between advocates and the clients you serve and exist to protect both you and your client. Boundaries can be considered as a container of sorts – a container that provides guidelines to assist both the facilitator and group member in understanding the relationship and knowing how to operate within a given structure. As a group facilitator it is incumbent upon you to be clear of your role, your organization’s role and to understand that as an agent of the organization, you have a responsibly to act in accordance with the boundaries dictated by the field in which you work.

For sexual assault survivors to begin the healing and recovery process, it is vital that they feel that the environment in which they are in is safe and trustworthy. This means that participants in a group need to be able to rely on consistency and clear guidelines. Simply put, they need to know what to expect from the group facilitator, the group process, and from themselves.

SAFE TRUSTWORTHY ENVIRONMENT
When conducting psychoeducational support groups for sexual assault survivors, the more common boundary issues that arise have to do with:

1. **Adhering to guidelines**
2. **Personal disclosure** by the facilitator
3. **Beginning and ending times**
4. The use of **touch**
5. Giving and receiving **gifts**
6. **Transportation** issues
7. Giving out **personal information**

To create a safe and consistent environment, we recommend the following:

1. **When facilitating the group, stick to the given guidelines** created by yourself and the group. Having those guidelines helps both you and the client know what is expected and creates safety and structure.

2. **We recommend not disclosing your own personal history to your clients.** This ensures that the group is working on the issues of the client and not on those of the facilitator. We have also found that it is not necessary that a facilitator have a similar history with the client in order to be effective. Another thing to keep in mind is the notion of empowerment – empowerment is about providing the survivor with information so they can make their own choices. Personal disclosure by the facilitator may be confusing for the survivor and get in the way of them making their own clear decisions.

3. **Begin and end on time** – Beginning and ending a group on time ensures consistency, displays good boundaries and helps the group members know what to expect. If a participant has a crisis at the end of the group, it is not appropriate to ask the rest of the group to stay over the allotted time to work on that participant’s issues. Doing so disrespects the other client’s time, fosters unclear and inconsistent boundaries, and may threaten the safety of the rest of the group. Instead, we recommend that you end the group and meet with the participant alone to deal with their crisis the first time this happens. Should this behavior continue, this may be an indication that the participant is not ready for the group and may need different forms of referrals such as to a therapy group, individual counseling, etc.
4. **Never touch a survivor without asking for permission or without them asking you for the touch.** Giving hugs, touching someone on the shoulder, and patting a hand, can be very soothing and doing so with permission and invitation will make all the difference in the world.

5. **Giving and Receiving Gifts** - Giving and receiving gifts will depend on your agency’s gift acceptance policies. Often group facilitators will give each member a symbolic gift at the close of the group to remind them of the journey of recovery. This small token can help the group member feel encouraged and give them something to carry with them as they continue on their healing path. Additionally, sometimes clients may wish to give small tokens of appreciation and gratitude to the facilitator. Again, while giving and receiving gifts depends on agency policy, we believe it is appropriate to accept this gift. However, if the gift is something of value, the facilitator should steer the gift toward the rape crisis center proper and not to the personal advocate.

6. **Transporting Clients** - This is an issue that can get very dicey. Transporting clients to and from appointments, meetings, etc., can pose a great deal of liability for the agency, and presents a serious safety issue for both the advocate and client. Therefore, we recommend that programs examine their transportation policies a it pertains to both safety and liability issues. While we do not recommend that programs provide direct transportation for their clients, it is important to help them figure out solutions and/or provide assistance such as bus fare, taxi-service, or some other alternate strategy. Additionally, transporting clients does not fit with the empowerment model of helping survivors learn to rely on their own strengths and resources.

7. **Giving out Personal Contact Information** – This issue is similar to the one we discussed on personal disclosure and we recommend that facilitators never give out their own personal contact information. If the client needs to reach the facilitator, they should do so through the crisis line or directly through the rape crisis center as necessary. Giving out personal information can increase boundary violations and this may have the potential of quickly getting out of control.
KEEPER OF CONFIDENTIALITY

Confidentiality is the cornerstone of providing sexual assault services. It means treating certain communications (or products of those communications, like counseling records) between two people in confidence – that they are private matters and will not be shared or disclosed to any third party.

- Confidentiality is important because it maintains the victim’s trust and lays a foundation for healing from the physical and psychological trauma of a rape and/or sexual assault.

- Confidentiality helps provide a safe, intimate space for a survivor to tell their story, uninhibited and free from being shamed and blamed for what has happened to them.

- Confidentiality also helps provide freedom to be truthful, honest and vulnerable because it allows a rape victim to tell their story without being judged; without fear of reprisal – it helps them start the healing process and obtain appropriate services; it validates what has happened to them; it helps break the silence that so many sexual assault survivor’s experience.

- Confidential information should only be disclosed at the request of the client/survivor. It is your responsibility to create mechanisms, like operational polices and practices, to facilitate such requests while simultaneously minimizing any adverse impact on the client/survivor from the disclosure.

- Protecting confidentiality is also dynamic. It is not one act we engage in – but rather a series of acts over time that we engage in or fail to engage in. It is everything that sexual assault advocates or rape crisis centers do to ensure that a rape victim’s information is not disclosed to any third parties.

- You can also protect a group member’s confidentiality by keeping minimal notes of all group sessions.

- There are, however, specific instances when confidentiality must be breached. Washington State Laws require that the appropriate person or agency be contacted if our clients disclose (a) risk of imminent danger of harming oneself or others, or (b) suspected or known abuse or neglect of a child or vulnerable adults. We are also required to breach client confidentiality if clients’ records are demanded by state or other appropriate agencies (including subpoena) or funding sources as a function of their accountability procedures; in such instances the individuals reviewing the clients’ records will be bound by the confidential procedures discussed above.
FOLLOWER OF THE EMPOWERMENT MODEL VS. BEING A RESCUER

Empowerment is considered by some to be the foundation for healing. The core of sexual assault trauma is disempowerment and disconnection. Therefore the guiding principles behind all recovery efforts, including group facilitation, must be re-empowerment and the establishment of new and meaningful relationships or reconnection. The word “empower” means to give power or authority to; to enable or permit; or to invest with power or authority. People who help others under this model provide aid and resources that survivors deserve but do not have. To empower therefore means to not view the survivor as powerless. It means to focus on their strengths; to provide choices and resources, and options and allow the group member to make their own decisions regardless of your views and opinions.

“The feeling of being a powerless victim is hellish and is only made worse by people who agree with one’s powerlessness by rescuing.”

(Unknown)
ACTIVE LISTENING

Active listening is one of the most critical skills that an effective group leader possesses. To be an effective group facilitator, it is important that you attend to each group member and that you demonstrate this by using verbal and non-verbal cues that let the group members know they are being attended to, understood, heard, and validated. Active listening skills include focusing, reframing, asking clarifying questions, and associating the members' thoughts and words with their particular feelings. To be an active listener requires genuineness of heart, openness, and not planning your responses before the speaker has finished what they are saying. Although we have indicated that psychoeducational support groups are based on a structured agenda or curriculum, an active listener is someone who is flexible enough to allow the group to move away from the agenda in order to best meet the needs of the group. Sometimes the most critical discussions and learning and growing opportunities occur spontaneously. However, as an active listener you will also need to intervene when the group is struggling or stalls.

HAVING PERSONAL INSIGHT

Effective facilitators understand who they are and how they relate to their world, the people around them, and to the group members. Personal insight is also having knowledge of your own potential “triggers” and learning not to act them out in the group setting. Not having personal insight is often demonstrated when the facilitator is not attending to all the members, is showing favoritism and displaying inconsistent behavior. When learning to be a facilitator, it is easy for us to want the group members to like us. While being liked feels good, if the group views you as untrustworthy, inconsistent, or inattentive to certain group members (often due to your biases), the group process and the members will be impacted negatively.

Personal insight also has to do with being clear of your role. For example, if you find yourself becoming invested in wanting someone to make a personal change, that should be a red flag that you might be entering into the realm of therapy.

ENGAGING IN SELF-CARE

Working with trauma of any kind is hard work. When you conduct a group, know that it might become even harder since you are listening to 8 or 10 stories at once rather than one story at a time. It is important that you and your co-facilitator engage in self-care activities that restore, rejuvenate and prevent burn-out. Although these self-care strategies will be personal to you, a responsible group facilitator engages in them. It may mean doing something simple like taking a walk, not working through your lunch, having candles in our office, playing music, or even going to the bathroom when you need
to. How often have we become so caught up in our work that we realize we haven’t eaten or used the restroom when we needed to? Self-care should be viewed as a responsibility rather than as a luxury. Many of us in the field are caretakers and want to help; we need to ensure that we don’t do this at the expense of our own needs. So please, take care of yourself. Talk to your supervisor if you are feeling overwhelmed, or was particularly bothered by something that was said in group. It doesn’t mean that you are not doing your job or not doing it well. It means you are human.
PROFESSIONAL CHARACTERISTICS OF EFFECTIVE GROUP FACILITATORS

Along with interpersonal characteristics, effective facilitators must also possess professional characteristics as well. While not exhaustive, the following are some examples:

KNOWLEDGE OF SEXUAL ASSAULT AND POPULATIONS

Those who conduct psychoeducational support groups must possess a working knowledge of the issues specific to sexual assault along with knowledge of the particular population that you are serving. Different populations require different skill sets and different approaches. Those conducting psychoeducational support groups within a sexual assault context therefore would require an understanding of the dynamics of sexual assault, myths and facts, underlying conditions specific to sexual violence, listening and counseling skills, boundaries and safety issues, dynamics of child sexual abuse, issues specific to adult survivors of sexual abuse and so on. It is also important that facilitators have a working knowledge of the particular population they are serving. For example, if you are facilitating a sexual assault group for males, it would be critical that you not only understand the dynamics of sexual assault, but also how sexual assault specifically impacts male survivors.
TO INFLUENCE GROUP CLIMATE

...promote a climate that models healthy interaction and ownership of feelings and behaviors.

Group members will be influenced by the way you conduct yourself, interact with a co-facilitator, and interact with other group members. Your behavior will serve as the frame of reference throughout the group process. You need to promote a climate that models healthy interaction and ownership of feelings and behaviors. A means of doing this is to encourage members to use "I" statements; this technique will help members get in touch with their own feelings. You need to encourage members to participate, but not make them feel compelled to do so. You need to respect the pace and choices of each individual.¹⁰

TO TUNE IN TO THE NEEDS AND NONVERBAL CUES OF THE GROUP MEMBERS

If you see that group members are not being responsive to each other's needs, you may need to interject and review the ground rules and guidelines that were set up in the beginning of the group. Doing so may help enlighten group members regarding their behavior and serve as a catalyst for discussion.¹¹

TO BE PREPARED TO MANAGE PRACTICAL TASKS OF THE GROUP PROCESS

These tasks include keeping group members aware of the schedule or time frame, keeping members true to the ground rules and refocusing the group’s attention when the discussion strays from the topic, but always being flexible enough to allow the group to stray if necessary in order to best meet the current needs of the group.¹²

¹⁰Ibid., 11
¹¹Ibid., 12
¹²Ibid
UNDERSTANDING OF GROUP DYNAMICS AND STAGES OF GROUP DEVELOPMENT

An effective facilitator not only has subject matter expertise but they also understand that each group has its own unique personality and no two groups are ever the same. No two groups will ever have the same feel and flow, as the traits and characteristics of its members combine to form an individual entity in a group. It is important to be aware of this because the personality of a group may necessitate changes in the way it is facilitated.

Typically every group goes through three progressive stages in its development. It is important to understand each of these stages and develop strategies for navigation of the challenges and opportunities that each stage presents. It is essential for a group to progress through these stages to become a functional and cohesive group.

FIRST STAGE: This first stage is where the group initially comes together and the group members are getting to know one another. There is generally some apprehension on the part of the group members during this stage, as they have not developed trust between each other and they are unsure of what to expect during the group. During this stage the group meets and learns about the group, the guidelines, the other members and works towards some agreement on the goals of the group. An important task during this stage is for members to discover their similarities so that they may develop a connection with each other based upon their common ground. Facilitators should focus on working to develop trust between the group members and help the group establish group goals and guidelines. Typically this first stage does not last more than one or two group sessions.
SECOND STAGE: During this stage, the group defines how it will work together towards its common goal. Group members will start to begin to open up to each other and support each other’s experiences. In this stage, group members work to adjust their behaviors to each other as they develop a process that makes the group flow well. There may be occasional conflicts during this stage as group members compete for attention or struggle to define their role in the group. It is important during this stage that the facilitator encourage the participation of all group members and be careful not to allow individual members to control the direction of the group. While this process is necessary, it may be difficult for some group members who are uncomfortable with conflict or with expressing a differing opinion. An important task during this stage is bonding between group members and the development of mutual support systems. Group members may begin to explore new ways of coping and can find ideas and validation in their fellow participants. It is through this process that group members begin to trust each other. The facilitator’s role during this stage is to help group members share their personal experiences, nurture the group cohesion, and maintain the group’s momentum. The majority of the group sessions during a short term group will be spent in this stage.

THIRD STAGE: This stage is the phase leading up to termination, transition and group closure. By this time, group members are typically trusting of one another and have developed their unique personality and the way that they relate to each other. The third stage will generally begin a few weeks before the group officially ends. This is often a difficult time for group participants and it is normal for them to experience some grief or feelings of loss, particularly in a well formed group. It is important that the facilitator acknowledge these feelings and include activities that focus on transition and the end of the group. The focus of the group during this time should be on the progress made and new skills learned. Activities can be centered on the development of a supportive network outside of group, and ways to continue the healing process. If necessary, it also may be appropriate to provide referrals to additional services.
TO HAVE ADEQUATE TRAINING

"learn the ropes" of the trade . . .
become as successful as they can be.

In order to be an effective group facilitator, the facilitator must not only have a thorough understanding of sexual assault but also have training in group process, interpersonal dynamics, and experience as a facilitator or co-facilitator.

There is an old adage that people learn by doing. Therefore, we recommend the following training schedule as one option to assist newer facilitators "learn the ropes" of the trade and to become as successful as they can be. Remember, who becomes the group facilitator should be based on one’s ability and not their availability.

One strategy that we have seen work, functions like a pyramid:
Although we indicated that after the Phase 3, the new facilitator would take the lead and could possibility run on the group on their own, we still recommend that they have a co-facilitator if at all possible.

Unfortunately, there is no specific timeline as to when a new facilitator would be ready to take the lead in handling a support group. However, the authors recommend that a volunteer, who is going to assist with a support group, have at least 6 months to one year of experience in sexual assault and be given more and more responsibilities for running the group once they show competency.
SUPERVISION

Regardless of time on the job, all facilitators need to be supervised on an ongoing basis. We recommend that supervisors have extensive experience in group dynamics, knowledge of sexual assault and meets regularly with the facilitators to debrief the group.

Listed below is a checklist of some of the competencies that supervisors could look for in a new facilitator to determine whether the new facilitator is ready to run a group on their own. Please know this is a partial list and if you have others, we encourage you to add them to the list.

SUPERVISOR’S CHECKLIST FOR GROUP FACILITATORS

<table>
<thead>
<tr>
<th>TASKS</th>
<th>COMMENTS</th>
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<tbody>
<tr>
<td>Does the facilitator demonstrate knowledge of group dynamics, group process and sexual assault?</td>
<td></td>
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<tr>
<td>Does the facilitator display and model appropriate boundaries and ethics (see list on boundaries)?</td>
<td></td>
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<tr>
<td>Does the facilitator demonstrate an ability to handle smooth transitions between the different tasks and activities of the group?</td>
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<tr>
<td>Does the facilitator demonstrate an ability to attend to all members of the group in ways that are supportive and empathetic?</td>
<td></td>
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<tr>
<td>Does the facilitator demonstrate a sense of confidence in running the group?</td>
<td></td>
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<tr>
<td>Does the facilitator demonstrate good time management skills?</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Answer</td>
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<tr>
<td>------------------------------------------------------------------------</td>
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<tr>
<td>Is the facilitator sensitive to the group's needs and demonstrate flexibility between following an agenda and knowing when to allow a discussion to continue?</td>
<td></td>
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<tr>
<td>Is the facilitator able to draw out shy members of the group without putting them on the spot?</td>
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<tr>
<td>Does the facilitator demonstrate good time management and know how long aspects of the group should take? Does the facilitator begin and end the group on time?</td>
<td></td>
</tr>
<tr>
<td>Does the facilitator demonstrate an ability to develop a successful agenda or curriculum for the group based on the group's target population?</td>
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</tr>
<tr>
<td>Does the facilitator demonstrate a knowledge and respect for cultural competency and understand that different cultures have different ways of interpreting and healing from their trauma. Does the facilitator incorporate some of those healing strategies into the group agenda?</td>
<td></td>
</tr>
<tr>
<td>Does the facilitator demonstrate sensitivity and respect to each group member?</td>
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<tr>
<td>Does the facilitator demonstrate active listening skills such as restating, clarifying, questioning, summarizing, dealing with silence, etc.</td>
<td></td>
</tr>
<tr>
<td>Does the facilitator demonstrate the ability to open, close and terminate a group? If available, does the facilitator demonstrate an ability to work with a co-leader effectively?</td>
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</tbody>
</table>
It is important to note that supervision is not a one time event. There must be consistency and a continual flow of feedback between the facilitator and the supervisor.

One way of handling supervision for group facilitators is to host group supervision so that the facilitators can present their issues with a trained supervisor and have the rest of the group provide needed feedback. This is especially important since we realize that no matter how long one has been facilitating groups, they may always be faced with a situation in which they might not know how to handle. Getting more than one perspective in these situations is invaluable.

COMMITMENT TO CULTURAL COMPETENCY

Cultural competency provides us with the ability to look through different mirrors, different lenses, and respectfully see the various viewpoints of other groups. It brings us to a place to understand our nation’s motto: “E pluribus unum – Out of many, one.”

Because of the role and impact culture has on individuals, this segment offers a perspective for facilitators to learn to integrate and articulate cultural competence to foster an atmosphere, within the parameters of psychoeducational support groups, that is knowledge based and responsive to cultural differences.

Culture has so much to do with how one defines the effects of sexual violence, how they access systems has a huge impact on their recovery process, has an impact on how one heals and even whom one tells. All these factors need to be understood if a facilitator is going to be committed to running a group that is culturally competent. Although the group structure and format may be
the same, when you commit to having a group that is culturally competent, it is important to understand that cultural groups interpret their experiences differently, have different experiences with dominant mainstream systems and have different healing strategies. An understanding of these issues can therefore be reflected in the curriculum and activities that you choose to incorporate.

**PLATINUM RULE**

In order to stretch beyond the lens in which we view the world, we must recognize observable aspects of barriers such as biases, judgments, and stereotypes which disallow us to treat people the way we would like to be treated. However, there is another thought process that is identified as the Platinum Rule: Do unto others as they would have done unto them.”

Therefore, as a psychoeducational facilitator, you must learn to respect:

- Boundaries, customs and values of other cultures
- Traditions that may be foreign to your own
- Explore and become aware of one’s own cultural biases

To cultivate a culture of competency, it is vital to understand the perspective lens of ethnocentrism and the other terms listed below to assess your own behavior and worldviews, because:

The rewards of the process will give you the knowledge skills, tools and ability to influence and integrate cultural competency in the service delivery of psychoeducational support groups.

“Operating through the lens of ethnocentrism is contrary to the process and design of creating an atmosphere of cultural competency.”

**ETHNOCENTRISM**

The lens and views of ethnocentrism is defined as the process of using standards from one’s own cultural background to judge, assume and draw conclusions about people from other cultures.
CULTURE SHOCK

Culture shock is a form of anxiety that results from an inability to predict the behavior of others, or act appropriately in a cross-cultural situation.

ETHNICITY

A group identity based on culture, language, religion, or a common attachment to a place or kin ties. Ethnicity is a relational concept.

SOCIAL STRATIFICATION

The division of members of a society into strata (or levels) with an unequal access to wealth, prestige, power, opportunity and other valued resources.

SOCIO-STRUCTURAL FACTORS

The manner in which social ideologies influence individual access to services and opportunities provided by particular institutional systems, e.g. political, legal, education, health care, housing and economic systems.

SPIRITUALITY

Spirituality is defined as one’s orientation or total response to oneself, others, and the universe. It reflects the human capacity to see, to feel, to act in terms of a transcendent dimension, to perceive meaning that is more than merely mundane. (Smith in Wulff 1991, p.4).

There are three aspects of spirituality:

1. **Orientation to the Self may include:** accord with self-definition; lasting self-verification; goal clarity and sense of purpose to pursue valued goals; conviction.

2. **Orientation to Others may include:** connectedness with community (others, nature, and other forms of life); meaningful world order and purpose; shared values with a group that in turn affirms one’s own identity; belong

3. **Orientation to the Universe/Transcendent** in connectedness to an “otherwise incomprehensible realm beyond oneself”

A knowledge and understanding of these terms and how different cultures are impacted by them is critical to the goal of cultural competence.

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CULTURAL COMPETENCE CONTINUUM

As mentioned, components shared in this segment will improve a facilitator’s role in fostering cultural competency; however, the developmental process of building awareness is ongoing. Engaging encounters with others outside of your culture is ongoing, obtaining knowledge of various cultural beliefs is ongoing, and so is seeking advice and consultation from culturally competent individuals so that the knowledge, awareness and activities can be integrated in the facilitation of support groups.

Opposed to assumptions, the execution of building relationships through cultivating cultural competency allows stories to be told, experiences to be shared, thus providing efficiency and effectiveness in the delivery of services.

...what matters most often is that they feel that they belong, that they are safe, that they are respected and heard, and that their alternate ways of healing are encouraged.

It really all boils down to this: Cultural competency means that you take the time to learn about different cultures. You take the time to bridge the gap between yourself and the culture, so that the soil of building relationships will produce the language of meaningful communication. Being culturally competent requires an action on your part and this can be done both individually and organizationally. If you have different cultures in your group, what matters most often is that they feel that they belong, that they are safe, that they are respected and heard, and that their alternate ways of healing are encouraged.

To address potential conflicts between group members due to cultural issues, you might want to stress the need to respect different perspectives, points view and cultures as part of your groundrules.
SECTION 2

THE HOW TO’S OF RUNNING A GROUP
SO, YOU WANT TO RUN A PSYCHOEDUCATIONAL SUPPORT GROUP?

When starting a group, the facilitator must take several things into consideration. The things that must be decided include:

- Do you have a need for the group?
- What target population will you serve?
- What will be the membership criteria?
- Where you will hold the group?
- How many members would you consider to be an ideal size for a group?
- What will your group meeting format and structure look like?
- What will be the length and frequency of your sessions?
- Will you have one or two facilitators?
- How will you market the group and recruit members?
- How will you measure outcomes and group success?
- Pre-screening
- What kind of curriculum will you develop?
DO YOU HAVE A NEED FOR THE GROUP?

Although most communities have a need for sexual assault psychoeducational support groups, not all programs are successful in getting individuals to participate. One option is to develop a running list throughout the year of calls you receive for the most requested services. If you already have a group cycle going, tell the caller that you will put them on a waiting list and will call them at a specified time period to determine if they are still interested.

If your program is just starting to offer psychoeducational support groups, one way to determine need is to look at the largest population of people that you serve currently and identify the kinds of requests you are receiving.

WHAT TARGET POPULATION WILL YOU SERVE? WHAT WILL BE THE MEMBERSHIP CRITERIA?

Once you have identified a need, the next step will be determining who you will run the group for. Will you run the group for adult survivors of childhood sexual abuse, adult victims of sexual assault, non-offending parents, male survivors, teens, etc.

It is important to note that research indicates that groups function best and more cohesively when members of the group have similar issues or life experiences, like sexual assault. However, because so many different people are impacted by sexual assault, having an experience of sexual assault alone is not enough to form a tightly cohesive group. Other factors to take into consideration when selecting your target population and membership criteria include:

- Gender (it is recommended that groups be gender specific)
- Age
- Where the client is in their recovery process
- Culture
- Victimization history
WHERE WILL YOU HOLD THE GROUP/LOCATION?

Once you have identified a need and determined whom you will serve, the next step is to look for a location. When looking for a location, you want your meeting space to be accessible, convenient to bus lines or taxis, and a place that offers safety, confidentiality, and convenience. It should also be comfortable and not be disturbed by other events.

When examining your location, try to determine if it is a “gracious space.” Does the location make the participants feel welcomed? Do you meet in a comfortable, inviting space? Is your space a place to talk about things that are scary?

Another factor to consider when determining your location is to examine your target population. For example, one member of our team told us about an experience she had with a male survivor support group. She originally held the group in a room that had comfortable couches and to her that would have felt safe. However, the men in the group felt very uncomfortable being in that room because they were uncomfortable sitting so close to each other on the couches. They wanted tables and more space between them. She eventually moved the group to a more conference room like set-up and the group was able to feel much more at ease.

FORMAT, LENGTH AND FREQUENCY OF SESSIONS AND SIZE OF GROUP

Once you have determined your target population and have decided upon the meeting location, the next step is to determine how your group will be set up, how it will operate, the length and frequency of your group and how many people you want to have in your group.

Your format, length, frequency of sessions and size of groups will be entirely dependent upon the population you are working with. For example, if you are working with adult victims, the format and length of sessions may be different than if you are working with teens in a school setting.

LENGTH AND FREQUENCY OF SESSIONS

Typically for adults, most programs run their groups anywhere between 8 to 12 weeks for 1 - 2 hours in length. For adolescent groups that are being held in the school, the session times are usually one rotating class period of 50 minutes and normally lasts the entire semester. Although it is important to be creative in how you structure your groups, remember, psychoeducational support groups must have an end date or they run the risk of becoming some other type of group.
FORMAT

For most programs their formats are as follows: They first do a check-in. “How was your week and is there anything going on that you would like to discuss? Then the group reviews what was covered last session. Did anything come up for you during the week about the topic? Once check-ins have been completed, the group then moves on to the new topic, activity or discussion (which is prepared ahead of time) and then closes the group at the specified time.

Let’s say the group is from 6:00 – 8:00

- 6:00 – 6:45 Check-ins
- 6:45 – 7:00 Break, snacks, socializing
- 7:00 – 7:45 New topic, activity, exercise, discussion
- 7:45 – 8:00 Check-outs, homework assignments

In the appendix, we have samples of how to specifically run each session, with goals, objectives, activities, timelines, etc.

SIZE OF THE GROUP

One of the hardest aspects of running a group is to have enough participants in it to make it effective. Each program will have to determine the minimum size that they are willing to work with. Typically a good group size is about 5-8 members. Remember to build in more because of attrition and drop-out rates.

It is important to discuss up front that if they decide to participate in the group, that you will ask that them to come to as many sessions as feasibly possible. Nothing is harder for group members to be coming every week and for two weeks in a row nobody else shows up. If folks are no longer coming, you may have to cancel the group and work with those who have come individually or find them other options.

You also might want to examine why this is happening. Is the space accessible? Is childcare an issue? Is the time and place convenient? Did we do a good job with our pre-screening? Is there a lack of similarity between the members? Is there something going on in the group that makes them feel unsafe? Is the subject matter too difficult? Is transportation an issue? Asking those who have stopped coming to the group can help you later down the road as you attempt to begin another group.
The ground rules establish parameters for behavior and should be referenced throughout the group process to remind participants that they are accountable for their conduct and interaction.

**GROUND RULES**

During your initial session, it is important to establish ground rules for every group process. The ground rules establish parameters for behavior and should be referenced throughout the group process to remind participants that they are accountable for their conduct and interaction. Because they represent the guidelines for interactions between members and between members and the facilitators, the ground rules must be established during the initial group process and must include feedback and input from the group. Having the members provide feedback helps them buy into the ground rules and can help to keep each other accountable to them during the length of the group.

Once the ground rules have been established, some programs like to have each member sign a form agreeing to these ground rules. Again, this is a way of establishing safety, consistency, clear expectations and boundaries.
When establishing ground rules, ensure they are age appropriate and attempt to have the members develop ones that are phrased in the positive if possible. Examples of some areas that you might want to cover include:

- Be respectful

- Don’t talk or interrupt when others are speaking

- No one under the influence of drugs or alcohol will be permitted to come to the group that session

- Confidentiality

- Touching

- Invading space

- Arriving late, etc.
HAVING ONE OR TWO FACILITATORS

Although it is possible to run groups with a sole facilitator, due to the intricacies and complexities of a support group, running psychoeducational support groups with two facilitators is recommended if possible, particularly for a new facilitator. (See the training structure chart). Two facilitators can support each other and share the work of responding to the various group members. Having co-facilitators is also helpful for strategic purposes – two minds are involved in planning group sessions, coordinating individual and collective objectives for the group, and reviewing the sessions. It is essential for co-facilitators to meet with each other prior to each group session to plan activities and discussions; as a lack of preparedness can jeopardize your credibility.\(^\text{14}\)

Regardless of whether there are one or two facilitators, the following questions should be answered prior to the start of your group.

- Who will do what?
- Who will do the pre-screening?
- Who and how will we handle any scapegoating or aggressive behavior?
- Who and how will we handle any member coming to group under the influence or not following the agreed upon guidelines?
- How will we deal with a member who seems withdrawn and doesn’t want to participate in the structured activities?
- How will we deal with a member who suddenly becomes very upset, cries or dashes out of the room?
- How will we handle a group member who has a crisis five minutes before the group ends?
- How will we deal with negative or harsh comments made to one group member or to the facilitators?
- How will you deal with someone who may be displaying physical aggression?
- How will you handle a group member who monopolizes all the time in the group at the expense of the other members?
- How will we keep records about the group process?
- What confidentiality measures will we take in our recordkeeping?
- How will you decide if a group member is simply not profiting from the group? What will you do about it?\(^\text{15}\)

\(^{15}\)Adapted from Coder, Billy Farmer, Structured Psychotherapy for Sexually Abused Children (Professional Resource Press, 2000)
MARKETING AND RECRUITING STRATEGIES

Creating a marketing strategy is key to the successful implementation of support groups. One of the first elements to successful marketing and recruitment is relationship building. It is important to get to know the various programs, organizations, school personnel, church leaders, newspapers, and civic groups in your community so that when it comes time to market your group, your relationships with these community leaders are already established.

MARKETING TIPS

Maintain a flyer year round that lists out all of our groups and has your contact information on it. Every person that you see, every presentation that you do, gets one in their packet.

- Nail salons and beauty shops
- Clothing stores
- Doctor’s offices, OBGYN centers
- Community colleges, universities
- Professors, teachers, school board, PTA
- CPS workers
- Churches
- Mental Health Agencies
- Civic clubs
- Therapists
- Prosecutor’s office
- Hospitals
- College counseling centers
- Hotels, motels
- Church bulletins
- Courthouse bathrooms, city hall bathrooms
• Police officers carry them in their cars
• Day care centers
• GLBTQ community centers
• Homeless shelters
• HIV/AIDS centers
• Drug and Alcohol Rehab centers
• AA, NA and other groups – just leave in room
• Health and community fairs
• Teen parent conferences
• Parent programs
• Programs serving marginalized communities

Regardless of where you place your flyers or recruit your members, remember, developing solid relationships is the key. Sit down with folks and let them know about your program and how you can help. Often time, word of mouth will then become your best referral.
MEASURING OUTCOMES IN CLOSED PSYCHOEDUCATIONAL SUPPORT GROUPS

More and more, the evaluation of programs is becoming a necessary part of social services. Not only is evaluation required by many funding sources, but most managers now understand that evaluation is an important tool for improving programs. A closed, time-limited group provides a good opportunity to measure the success of the sexual assault services. Because members begin and end group at the same time, evaluating changes that might likely be attributed to the group is relatively easy. This segment of the manual will walk you through one strategy for measuring outcomes in closed psychoeducational support groups.

SET GOAL

In order to measure the success of any service, the evaluator must be clear about the goal of the service. The goal should be positive and long-term in nature. When a support group has an overall goal, curriculum design and updates are easier to make. This is because any additions or changes can be examined in the context of the goal.

Sexual assault service providers can create goals by considering the reason that people seek services. In sexual assault psychoeducational support groups a goal might be to improve the participant’s ability to cope with the effects of sexual assault. We’ll use this goal as our example throughout this section.

**Goal:** Participants are better able to cope with the effects of sexual assault.

SET MEASURABLE OBJECTIVES

Once a goal has been established, it is important to identify measurable short-term objectives that demonstrate movement toward the goal. Objectives can be determined by considering the steps that need to be taken to get to the goal, the reason that key components of the program exist, and the hopes that providers have for participants.

For instance, psychoeducational support groups may be offered because providers hope that it will help participants realize that they are not alone in their experiences, feelings or reactions. Feeling less alone can help a participant move toward the goal of being better able to cope with the effects of sexual assault. Therefore, decreasing isolation could be a measurable objective of the group. This objective could be measured by asking participants to rate their feelings of support and isolation before and after the group.

Most likely, sexual assault psychoeducational support groups will have more than one measurable objective. For the purpose of this manual, we have identified three example objectives:
OBJECTIVES

1. Participants indicate an increased understanding of the effects of sexual assault.

2. Participants indicate an increased use of healthy coping skills.

3. Participants show a decreased sense of isolation.

Please note that each of these objectives can demonstrate movement toward the overall goal of the group. When participants show change in the desired direction, the likelihood that they are better able to cope with the effects of sexual assault is strong.

Also note that because each objective statement contains the word “increased” or “decreased” we will be able to measure changes from before the group to after the group. We do not expect all participants to master each realm during the group, but we do expect the group to make a difference to participants in the above areas. Otherwise, what is the point of providing the service?

Measuring the objectives in a psychoeducational support group setting is not about measuring the progress of participants. Rather it measures the helpfulness of the services that are being provided.

MEASUREMENT

Because members of a closed group start and end the group at the same time, pre-and post-testing is an ideal way to measure changes. Programs can adopt, adapt, or create a tool that measures the objectives for their particular support group.

It is important that surveys be fairly short, clear and easy to complete. Questions should be worded so that participants with limited literacy can participate. Efforts should be made to ensure that participants can complete the survey in their primary language. Surveys that ask participants to rate their response of a numerical scale lend themselves to efficient measurement of change. However, a more qualitative measurement might be more appealing to some programs. Many programs choose a combination of these approaches. Be sure to consider how each aspect of the tool will be evaluated.
Each question on the survey should be examined for relevance to the objectives. If the survey contains questions that are unrelated to the objectives, evaluation will be difficult. If there are questions that you still wish to include that may be an indication that objectives need to be modified.

**IMPLEMENT TOOL**

Once the tool has been created, it can be given to participants. For a closed group, using pre and post testing, you may wish to give the survey to participants before they come to the first group meeting or during the first group meeting.

Explain the purpose of the measurement tool to the group members. They should be told that the results are used to improve services and not to measure their own personal success. Participants should be told that completing the survey is not a requirement for participation in the group, and paperwork will be kept confidential.

The post-test should be given during the last group session for maximum participation. In programs with access to participants, a three or six month follow-up survey would provide additional information about the lasting effects of the group.

**EVALUATE RESULTS**

Responses to the measurement tool can be compiled and evaluated. On quantitative measures, the average change for all participants can be reported. On qualitative measures, themes and trends that emerge can be reported. After the results are compiled an evaluation report can be created that provides the details, an interpretation of the data and recommendations for improvements.

Regardless of the type of measurement that is evaluated, it is a good idea to examine all aspects of the group during the evaluation phase. Scrutinize the demographics of the group members, the absence rate, and other factors.

**IMPLEMENT CHANGES**

Evaluation of support group services would be pointless unless the recommendations are implemented. If any aspects of the results are unsatisfactory, changes need to be made to the support group curriculum, objectives or measurement tool. Sometimes programs determine that a particular subject needs to be more of a focus during the group. Sometimes programs find that the curriculum and objectives are out of sync. Other times, the measurement tool has a design flaw. Evaluation is done to determine strengths and weaknesses and to provide opportunities to improve.
MEASURING OUTCOMES

1. SET GOAL
2. SET MEASURABLE OBJECTIVES
3. MEASUREMENT
4. IMPLEMENT TOOL
5. EVALUATE RESULTS
6. IMPLEMENT CHANGES
PRE-SCREENING PROVIDES -

- Safety
- Confidentiality
- Ensures Group Fit

PRE-SCREENING

Pre-screening for a sexual assault group is the most fundamentally sound practice that a facilitator will engage in. Pre-screening helps:

- Ensure that being in the group is indeed the best program fit for the participant.
- Ensure the safety of all the group members, both emotionally and physically.
- Determine where each member is in their recovery process.
- Assess a participant’s goals and objectives for being in the group.
- Assess potential issues that the participant may be bringing with them to the group.
- Ensure group compatibility and that those who are selected are considered a good group fit.
- To discuss issues of confidentiality.
- To ensure that members who know each other are not placed in the same group. This helps establish a sense of safety.

Without good pre-screening, most groups are more likely to fail. Not screening has the potential of doing more harm than good. For example, let’s say you are planning on running a psychoeducational support group for non-offending parents. If you have one member of the group who brings the attitude of protecting the offender, the rest of the group may ostracize that member, thereby creating an unsafe atmosphere for everyone.
Often times programs conduct an orientation session prior to the start of the group. This session allows group members to get to know you, get to know other group members, to review the ground rules and confidentiality policies and to see the space they will be working in.

WHO SHOULD DO IT?

The screening should be done by the person who will be facilitating the group. If you plan to have a co-facilitator, we recommend that you handle the pre-screening together. This helps to establish a relationship and connection between you and the member and allows the potential member to answer questions they may have of you and about the group.

HOW DO YOU DO IT?

*It’s all in the approach.* What do we mean by that? The pre-screening interview is time to have a conversation with potential members and to ask relevant questions that will help you gather as much information as possible to determine if the potential participant is a good fit. The pre-screening interview is about creating an environment where the potential group member feels safe, secure and can see that you are willing to listen to what they have to tell you.

Although many programs will use a form to review the questions that they want to ask of participants, we have found it particularly helpful to approach the pre-screening interview more as a conversation and as the conversation is flowing, have the facilitator simply fill in the answers that the participant is giving you. We say this because sometimes the pre-screening interview can take on the air of an interrogation rather than an interview or conversation. Remember, your goal is to establish rapport and to help the participant feel safe.

If you have a pre-screening tool of questions, just mark the answers as they are talking and then ask any follow-up questions that you have. Additionally, we recommend that a facilitator never give the participant the pre-screening tool and have them fill out the form on their own. This will hinder your ability to really get to know the individual and may interfere in your ability to establish rapport.

As a result of a thorough interview process, you should be able to select a group of individuals that are compatible with one another. And remember, screening is not just a one time affair – screening should be taking place through the entire group process.
SO, WHAT SHOULD YOU SCREEN FOR?

Although each member brings issues to the table, here is a list of some items that you may want to cover during your pre-screening conversation. Remember, you are first attempting to screen the person “in” to the group as opposed to screening “out.” However, there may be times when it becomes apparent that the participant is not ready to be in a group for a variety of reasons or that your agency cannot meet the needs of that individual. Therefore, having proper referrals and other ways of meeting their needs will be critical to ensure the participant receives the proper service as well as to the success of the group.

Sample questions to learn during the pre-screening interview.

- **Learn more about the person** and find out their reasons for wanting to be in the group, their expectations, to explain the organization, how the group is run and information about your agency.

- **Screen to access a potential member’s readiness.** The individual should possess a willingness to talk about issues related to the abuse and what they hope to gain from the group. If the member is too fragile to discuss these matters, a group may not be the best choice of service.

- **Screen for individuals with addictions** – If the person indicates that they may not be able to attend the actual group session free of alcohol or drugs, you may need to dissuade them from entering the group. If they are not enrolled in some type of treatment program, providing them with a good referral is best. If the person does admit to drug and alcohol issues, but feels that they can come to group sober, it is important to normalize that sexual assault survivors use a variety of coping mechanisms that are both healthy and unhealthy and that we hope that by attending the group, they will learn more healthy coping skills.

- **Screen for offender behavior** – As uncomfortable as it may be, it is crucial that you not place perpetrators in a group with victims. One way of screening for this is by asking, “Have you ever acted out toward somebody else in a way that was similar to the way you were abused.” Also ask questions about domestic violence, “Have you ever been involved in an incident of domestic violence?” How long ago, and what happened?” If the person admits to being the aggressor, placing them in a group with victims will jeopardize the safety of the rest of the members.
Screen for signs of resistance, hostility or aggressive behavior. Sample questions might be “do you have any concerns that you would express your emotions in physical ways toward a group member or your partner?

Screen for signs of both healthy and unhealthy coping mechanisms. Identification of healthy and unhealthy coping strategies can give you ideas as to what activities you can bring to the group to address these.

Screen for signs of behavioral and mental health issues. Although survivors of sexual assault may have some of these issues, having behavioral or mental health issues should not automatically exclude them from the group. However, you will want to get a sense of what these issues are and to determine if they can be contained within the confines of a group setting. If this is not possible, providing a resource and referral may be the best option for this person.

Screen for safety factors of each individual group member. To ensure safety for the group members, you will want to find out what are the ways that they feel most safe in given situations. You may also want to know how a person reacts to particularly stressful situations and help them come up with better coping strategies.

Screen to prevent the admission of family members into the same group. It is important that group members feel that they can talk openly and honestly with members of their peers. If there are family members or friends in the same group, this may seriously impact a member’s ability to be forthright and develop trust within the group.

If running a non-offending parent group it is important to screen for those who are supportive of their children vs. those who are not. Mixing in these two perspectives into the same group can have detrimental consequences for all parties.

Screen in a style that matches the population being served or in a culturally competent manner. It is important that you understand the makeup of your group and be able to incorporate cultural competency aspects into the group activities and strategies. One way of getting at this is to ask potential members, “How does your background or culture influence your healing? This again will help establish a sense of rapport and help the survivor know that you take their culture seriously and that you are demonstrating an atmosphere of respect for all cultures.”

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16Circle of Support: A Basic Resource Guide for Support Groups Responsive to Sexual Violence (Pennsylvania Coalition Against Rape, 1999) 6-9 – Adapted with Permission
Screen for age compatibility and developmentally appropriate age levels. Having groups with members of the similar ages has been shown to be more effective as the group is then able to relate more to their fellow participants.

After you have conducted your pre-screening interviews, you may realize that certain people are just not ready for the group or that you will not be able to serve them adequately. The best approach in this situation is to provide proper referrals to programs or develop other creative solutions such as having one-on-one sessions, so that you can best meet their needs more adequately. Sometimes it is difficult for us to say no to someone, but saying learning to say no will ultimately result in ensuring that all participants receive the best services possible. Not saying no can result in you doing more harm than good.

Remember, psychoeducational support groups are not always the best fit for all people and that depends on many factors, such as those listed above. Therefore, when pre-screening, it is critical that you remember what the goals of a psychoeducational support group are. For example, if someone is clearly talking about wanting to change some aspect of their life, or address deep seated issues, it is best to refer that person to a therapy group rather than to have them become a member of the psychoeducational support group. Psychoeducational support groups are not about changing oneself. If the person really needs to make some fundamental shift in who they are, making a good referral is the best practice.

Lastly, screening out potential clients because of barriers or other factors is also about helping the client make informed choices. This is done by giving them all the information about what the group will be like, who will be in the group, and asking them if they think this is the best choice for them. After giving the person all the information for them to make an informed decision, most often times they screen themselves out. So, it’s not about just telling someone that they can’t come, we need to use our advocacy skills to frame things in such a way that the person makes their own decisions based on all the information given.
DEVELOPMENT OF A CURRICULUM

There is no one-size-fits all psychoeducational support group curriculum that will work in every community and with every population. At the same time, many resources have been made available that can offer assistance in the process of development. Facilitators should strive to ensure that the curriculum used is a good match for the members of the group.

UTILIZING RESOURCES

When beginning the process of curriculum development, it is helpful to review books and other resources written on the topic. These books, many of which are available to check out from the WCSAP library, can provide a framework for topics and structure that can be a helpful starting point. While the facilitator is unlikely to find a curriculum that matches the number of weeks and topics that both she/he and the group members want to cover, such resources can be valuable. There is not much sense in completely re-inventing the wheel.

Once a framework for the group is established, session topics can be identified. Usually, a different topic is explored at each session. The topics should directly relate to the issues faced by the population served. These may be specific feelings, behaviors, or skills. Group topics may include:

- Sexual Assault 101
- Fear
- Anger
- Guilt and Shame
- Handling triggers and flashbacks
- Intimacy
- Sexuality
- Relationships
- Assertiveness and Boundaries
- Trust
- Building support systems
- Impact of abuse on children
- Talking with children about abuse
- Sadness and Grief
- Healthy Coping Strategies
- Self-Esteem and Body Image
Facilitators are most effective when they do less talking than the members of the group. One way to ensure that this happens is to carefully prepare open-ended questions and/or activities/exercises related to the session’s topic that guide group members into relevant conversation. When developing psychoeducational support group outlines, other resources that can be helpful are self-help books and workbooks for survivors. These resources often contain reflective “homework” questions that can be utilized in a group setting.

**ASK FOR INPUT FROM GROUP MEMBERS**

Many group facilitators find it helpful to enter into a group with a framework in mind and resources at hand, while at the same time remaining open to the needs and desires of the individual group members. During the first session, group members can be asked to identify issues they are struggling with and what they hope to gain from participating in the group. The facilitator can then modify the existing curriculum to more closely match the group.

**CHECK CURRICULUM AGAINST GOALS AND OBJECTIVES**

It is important to refer back to the stated goals and objectives of the support group during the curriculum development process. Ensure that each topic and session outline relates to the goal of the group. Doing this helps to create a cohesive curriculum that maximizes the limited resources available to programs and the participants’ experience in group.
CONSIDER POPULATION

Psychoeducational support groups for non-offending parents are inherently different than groups for survivors of childhood sexual abuse. Whenever you are developing a curriculum, it is important to ensure that the content is a good match for the population being served. In addition to the type of victimization, consider ethnicity, culture, primary language, disability status, sexual orientation, gender identity, religious affiliation and other factors of potential participants before and during the group. Depending on the size of your community, it may or may not be possible to offer psychoeducational support groups geared specifically to specific populations.

REVIEW CURRICULUM ON REGULAR BASIS

Once a curriculum has been developed, it is important to review it on a regular basis. Utilize evaluation techniques, member feedback, facilitator debrief, new learning and experiences to make changes, and updates to the overall curriculum or individual session agendas. Facilitators, as well as group members, learn something each time a group is conducted. Use that knowledge to improve
PRACTICAL APPLICATION

Let’s say you are going to conduct an 11 week group for Adult Survivors of Childhood Sexual Abuse and that each group will be 2 hours in length. When you look at the schedule we have outlined, typically your topic discussion/exercise/activity will last between 45 minutes to an hour as the rest of the group will be taken up with check-ins, a potential break (depending on facilitator), and closing of the group.

6:00 – 6:45  Check-in
6:45 – 7:00  Break
7:00 – 7:45  Topic
7:45 – 8:00  Close

DEVELOP GOAL AND OBJECTIVES FOR THE GROUP

Goal: To increase participants’ emotional stability and understanding of their response to victimization and the related impact on their life.

Objective: To provide group members with a safe, open atmosphere for discussion and activity to facilitate understanding of sexual victimization and the healing process.

BRAINSTORM TOPICS RELEVANT TO THE TARGET POPULATION

Examples may include:

Adult Survivors:

- Sexual Assault 101
- Fear
- Anger
- Guilt and Shame
- Handling triggers and flashbacks
- Intimacy
- Sexuality
- Relationships
- Assertiveness and Boundaries
- Trust
- Building support systems
- Impact of abuse on children
- Talking with children about abuse
- Sadness and Grief
- Healthy Coping Strategies
- Self-Esteem, Self-Confidence and Body Image
ARRANGE TOPICS INTO WEEKLY SEGMENTS THAT ARE LOGICAL FOR THE SAFETY AND NATURAL FLOW OF THE GROUP.

For example, you wouldn’t start the group out with the topic of sexuality as that topic may be difficult to discuss until the group members feel more comfortable with the other members, you, and the group process.

**Week 1:** Opening – Introductions of members, introduction to group format, development and discussion of ground-rules, topic review, hopes and fears.

**Week 2:** Sexual Assault 101

**Week 3:** Coping Strategies

**Week 4:** Self-Esteem, Self-Confidence and Body Image

**Week 5:** Trust

**Week 6:** Fear and Anger

**Week 7:** Sadness, Grief and Shame

**Week 8:** Handling Triggers and Flashbacks

**Week 9:** Intimacy and Self-Care

**Week 10:** Sexuality and Relationships

**Week 11:** Closing – Saying goodbye, identifying additional supports, hopes and fears realized, taking stock of your progress.

Notice that Week 1 and Week 11 are already covered with the opening and closing of group. That leaves you with 9 additional sessions to plan for.
DEVELOP GOAL AND METHOD FOR REACHING THE GOAL FOR EACH SESSION.

The methods for reaching the goals for each session are limitless. This is your time to get creative. You can use videos, film, handouts, journaling activities, discussion, trigger plans, feeling charts, art projects, collages, using hoola hoops to demonstrate boundaries, sexual effects inventory, development of self-nurturing activities, self-affirmations, web of support using yarn, trust exercises, self-relaxation techniques and whatever else you come up with. There are literally thousands of activities that you can choose from. Just make sure that they match the topic and are age-appropriate to your target population. So go ahead and have some fun here.

**Week 2: Sexual Assault 101**

**Goal:** To create an atmosphere where members begin to explore issues of sexual violence in a societal context.

**Activity:**
1. Discussion of myths and facts and issues specific to gender socialization.
2. Each participant lists out 1 impact of childhood sexual abuse and places anonymously into container. Facilitator picks a few to discuss. Perhaps this becomes the basis for future topics.

**Week 3: Coping Skills**

**Goal:** To create an environment where members can begin to identify positive and negative coping skills.

**Activity:** Collage art project using magazines of positive and negative coping skills used by each participant. Discuss.
Week 4: Self-Esteem, Self-Confidence and Body Image

Goal: To create a safe environment where participants can identify issues of positive and negative self-talk and take steps toward moving toward self-esteem, self-confidence and a positive body image.

Activity:

1. Discussion of what the concepts of self-esteem, self-confidence and positive body image mean.
2. Participants to draw how they view their body image and develop one affirmation of acceptance.

Note: We have included samples of group outlines and curriculum from other programs in the Appendix Section.

REPEAT PROCESS UNTIL ALL WEEKS ARE FILLED IN.

Additionally, to further prepare you, you might want to outline each session’s timeframe until you feel comfortable understanding how the group will flow.

Week 1:

6:00 – 6:30 Introductions
6:30 – 7:00 Ice-Breaker Activity
7:00 – 7:30 Development of Ground-rules
7:30 – 7:45 Discussion of Hopes and Fears
7:45 – 8:00 Closing, Homework assignment (if applicable), Prepare for next week’s topic

KEEP A BINDER

Keep a binder of good ideas, activities, handouts you find, exercises, etc. for your group. These ideas will be invaluable to you and you will notice that the possibilities are endless. Again, have fun and be creative. This is the exciting part. Good luck!
PROBLEMS, PITFALLS AND POSSIBLE RESPONSES

During any group you may be faced with some issues that may challenge you and the rest of the group. We have listed out some of the more common problems and possible solutions. If you have others to contribute, please feel free to do so, as this is by no means an extensive list.

<p>| Problem: Certain participants don’t say anything, seem shy. | Possible responses: Try to draw out quiet participants, but don’t put them on the spot. Make eye contact – it reminds them that you’d like to hear from them. Look for nonverbal cues that indicate participants are ready to speak. Frequently, people will feel more comfortable in later sessions and will begin to participate. When someone comes forward with a brief comment after staying in the background for most of the group, you can encourage him or her by conveying genuine interest and asking for more information. And it’s always helpful to talk with people informally before and after the session. Conduct “round-robin” style of group facilitation. This is a technique where the facilitator has participants go around the circle and share as much as they choose. This also helps with controlling a participant who takes up too much time away from the rest of the group. |
| Problem: An aggressive or talkative person who dominates the discussion. | Possible responses: As the facilitator, it is your responsibility to handle domineering participants. Once it becomes clear what this person is doing, you <strong>must</strong> intervene and set limits. Start by limiting your eye contact with the speaker. Remind the group that everyone is invited to participate; “Let’s hear from some folks who haven’t had a chance to speak yet.” If necessary, you can speak to the person by name. “Charlie, we’ve heard from you; now let’s hear what Robert has to say.” Be careful to manage your comments and tone of voice – you are trying to make a point without offending the speaker. |</p>
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<th>Problem:</th>
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<td>Lack of focus, not moving forward, participants wander off the topic.</td>
<td>Responding to this takes judgment and intuition. It is the facilitator’s role to help move the discussion and activities along. Keep an eye on the participants to see how engaged they are, and if you are in doubt, check it out with the group. “We’re a little off the topic right now. Would you like to stay with this, or shall we move on to the next topic? However, remember that sometimes the most spontaneous discussions are obtained when participants stray off topic. This requires a balancing act.</td>
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<td>Lack of interest, no excitement, no one wants to talk, only a few people participating.</td>
<td>This may happen in the early stages of a group but as the group gets to know each other, it may subside. Having a solid agenda can also help with this issue. It may also happen if the facilitator talks too much or does not give participants enough time to respond to questions or enough activities to get involved. People need time to think, reflect, and get ready to speak up. It may help to pose a question and go around the circle until everyone has a chance to respond. Another potential response is to go back to your curriculum and see if you can make adjustments to exercises, topics or activities. This may rekindle some excitement and participation.</td>
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<td>Tension or open conflict in the group. Perhaps two participants lock horns and argue. Or, one participant gets angry and confronts another.</td>
<td>If there is tension, address it directly. Remind participants that disagreement and conflict of ideas is OK as long as it is done respectfully. Explain that everyone has a right to their opinion but personal attacks are not acceptable. You must interrupt personal attacks, name-calling, or put-downs as soon as they occur. You will be better able to do so if you have established ground rules that disallow such behaviors and that encourage tolerance for all views. Don’t hesitate to appeal to the group for help; if group members bought into the ground rules, they will support you. As a last resort, consider taking a break to change the energy in the room. You can take the opportunity to talk one-on-one with the participants in question.</td>
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<td>Participant becomes upset at the end of the meeting.</td>
<td>Allow a person who needs more time due to crisis the first time to stay over and talk with facilitator (one time). After that, the person should communicate within the allotted time structure. If they do not adhere to this, this may indicate that they are not ready to be in a support group and you may have to refer them to therapy. It is not appropriate to ever ask the group to stay over the time limit. This fosters bad boundaries and doesn’t create a safe, consistent space.</td>
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<td>Participant comes to the group under the influence of alcohol or drugs.</td>
<td>You will have to ask the person to leave the group and invite them to come back to the next session but stress that they must return free from the influence of alcohol or drugs.</td>
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<tr>
<td>A participant bringing an uninvited guest to the group.</td>
<td>It may be helpful to establish a ground rule up front about not bringing in outside members as doing so may jeopardize the safety of the group.</td>
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<td>Ganging up on another member in the group to accuse them of something or pressure them into taking some kind of action or making a change.</td>
<td>It is the role of the facilitator to protect all members of the group. Perhaps this can be helped if the ground rules indicate that individuals talk or participate as they feel comfortable. It is also important to redirect the group to its goals. The purpose of the group is to provide support and therefore remind the group that they make changes when they are ready.</td>
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<tr>
<td>Other members of the group invading the privacy of fellow participants – asking overly personal questions.</td>
<td>Members are allowed to share when they are ready and they have a right to not answer if they are uncomfortable with anything. This might be a good time to direct the conversation to the topic of boundaries.</td>
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<tr>
<td>Gossip – when a member talks about another person in the room.</td>
<td>Ask the member to direct their comments to the person in the room and provide reminders about confidentiality.</td>
</tr>
<tr>
<td>Problem:</td>
<td>Possible Response:</td>
</tr>
<tr>
<td>----------</td>
<td>-------------------</td>
</tr>
<tr>
<td>Group members want to become friends outside of group</td>
<td>Provide reminders about confidentiality. Discuss its important and why it is there.</td>
</tr>
<tr>
<td>Rescuing – when a group member gives too much advice or overly takes on others’ issues.</td>
<td>Remind the rescuer that the problem belongs to that person. “They gain nothing if the problem and solution is taken from them.”</td>
</tr>
<tr>
<td>Planned crisis at the end of group – manipulating behaviors</td>
<td>Before the group ends and with time still left, it might be a good idea to check with the group to see if members have any issues they would like to address or if particular feelings arose during topics. Provide check-ins. Remember, it is never appropriate to ask the group to stay over the time limit to accommodate one member of the group. If this behavior continues, this might be a sign that the individual is not ready for this type of group and may need a referral for individual counseling or a therapy group.</td>
</tr>
<tr>
<td>Members who constantly show up late.</td>
<td>Talk to the participant outside of group to find out the reason for the lateness. If this continues, you may have to ask the member to leave the group as this is not fair to the rest of the members. Include in ground rules.</td>
</tr>
<tr>
<td>You have a member of the group whom you clash with.</td>
<td>Discuss this with your supervisor. Do not ignore your own feelings or reactions.</td>
</tr>
</tbody>
</table>
FOOD FOR THOUGHT

In closing, we want to say that assembling this manual in collaboration was an exciting project and was developed to support advocates and facilitators as to continue to serve and meet the variety of needs of all survivors of sexual violence. We hope this manual provides a place for you to start, a place for reflection, and a practical tool for you to use to create a safe and nurturing group for survivors. Good luck on your journey!
# OCVA SERVICE STANDARDS FOR SUPPORT GROUPS

## SUPPORT GROUP

<table>
<thead>
<tr>
<th>Definition</th>
<th>Regular facilitated meetings of victims and/or secondary victims of sexual abuse/assault with a supportive and educational focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goal</td>
<td>To provide emotional stability and promote the understanding of the impact of sexual abuse/assault</td>
</tr>
<tr>
<td>Duration</td>
<td>1 to 2 hour average length of time per session; 1 to 4 sessions per month; 3 months to a year</td>
</tr>
<tr>
<td>Activities</td>
<td>Group meetings with a planned beginning and ending date and an outcome-based, structured agenda with a primary focus on sexual abuse/assault issues.</td>
</tr>
</tbody>
</table>
| Service    | • Adult or adolescent sexual abuse/assault victims  
• Non-offending parents of child sexual abuse/assault victims  
• Significant others who require help/assistance in order to address their own reactions to victimization and to effectively support the victim |
| Recipients | The facilitator must complete 30 hours of initial sexual abuse/assault training, plus 12 hours of ongoing sexual abuse/assault training annually. All trainings must be approved by the Washington Coalition of Sexual Assault Programs (both the curriculum and the trainer). The provider must be familiar with the dynamics of sexual abuse/assault and relevant community resources, as well as have an understanding of how medical, legal and social services respond to victims of sexual abuse/assault. The facilitator must also have training in group process and interpersonal dynamics, and experience as a facilitator or co-facilitator. |
| Qualifications | The facilitator must be supervised by a paid staff person with a minimum of a BA degree in Human Services or a related field plus two years of relevant experience or a combination of six years of relevant experience, education and training. The facilitator must be, or receive consultation on group process from, a Masters level therapist. |
ALTERNATIVES TO VIOLENCE OF THE PALOUSE

INTRODUCTION AND CONSENT TO SERVICES

Reaching out for support and/or assistance in dealing with an abusive situation, including domestic violence and sexual assault, is an important and courageous step in the healing process. We, at ATVP offer confidential services to assist members of our community that have been affected by abuse. Our services include a 24-hour hotline and in-person crisis intervention, legal advocacy, medical advocacy, advocacy based counseling, information and referral, technology safety, education, emergency shelter, support groups, child advocacy and sexual assault therapy. Volunteer advocates and staff provide these services.

Our services are confidential; thus, clients’ identities and the information they choose to share with our advocates and/or staff are handled in a manner to insure privacy. Within this confidential setting client information will not be disclosed to individuals outside of our agency without the written consent of the information you share. There are, however, specific instances when confidentiality must be breached. Idaho and Washington State Laws require that the appropriate person or agency be contacted if our clients disclose (a) risk of imminent danger of harming oneself or others, or (b) suspected or known abuse or neglect of a child or vulnerable adults. We are also required to breach client confidentiality if clients’ records are demanded by state or other appropriate agencies (including subpoena) or funding sources as a function of their accountability procedures; in such instances the individuals reviewing the clients’ records will be bound by the confidential procedures discussed above. ATVP also provides non-identifying statistical data about clients to grantors/contractors. If a subpoena is received, ATVP staff/volunteers will follow the procedures outlined in the policy and procedures manual.

There may be times when our advocates need to consult with another advocate or staff in order to provide our clients with appropriate and high quality services. Consultation within our agency remains confidential and serves to enhance the quality of services provided to our clients.

We keep a confidential record of the services provided to our clients. You may request that we share this information with another agency to coordinate services, in which case it will be necessary for you to sign a release of information. You may request to see and/or obtain a copy of your records; should you desire to do so please speak with a staff member. Clients will not be asked to appear publicly, in a videotape or photograph, or to identify themselves as a current or former ATVP client without prior written voluntary consent.

I consent to the provision of services.

Client #:

Client Name:

Signature:

Date:

Witness:
# ALTERNATIVES TO VIOLENCE OF THE PALOUSE

## ADULT SEXUAL ASSAULT SUPPORT GROUP OUTLINE

### 8 WEEK SESSION

**Goal:** To increase participants’ emotional stability and understanding of their response to victimization and the related impact on their life.

**Objective:** To provide group members with a safe, open atmosphere for discussion and activity to facilitate understanding of sexual victimization and the healing process.

<table>
<thead>
<tr>
<th>SESSION</th>
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| **Week 1** | **Introduction to Sexual Assault Support Group**  
**Goal:** To create an atmosphere free of judgment where group members can freely participate.  
Introduction to group format, group member introductions, discussion of ground rules, topic review. |
| **Week 2** | **Looking at Sexual Violence from a Societal Framework**  
**Goal:** To create an atmosphere where members begin to explore issues of sexual violence in a societal context. Includes discussion of rape myths, media’s portrayal of violence against women, and socialization. Focused activity will explore the socialization of men and women and it’s impact of the life of the trauma survivor. |
| **Week 3** | **Self-Esteem and Self-Confidence**  
**Goal:** Discussion around self-esteem /self-confidence. Identification of positive and negative self-talk and first steps toward moving toward acceptance.  
Create one self-esteem driven affirmation for the evening; complete and discuss.  
**Handout:** Gaining Insight into Self-Talk |
| **Week 4** | **Fear and Anger**  
**Goal:** To create an atmosphere in which group members can express their feelings of fear and anger related to their assault. Identify feelings of fear and anger related to individuals traumatic experiences. Discussion surrounding things group members do to avoid these difficult emotions and situations that currently feel safe to the membership.  
**Handouts:** Voices of the Past and Voices of the Present |
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<tr>
<th>Week 5</th>
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<td><strong>Goal:</strong> Discussion of Guilt and shame associated with sexual assault and where these messages came from. Participants discuss the challenges associated with having those they trusted blame them for being sexually assaulted. Participants identify self care needs associated with these difficult emotions.</td>
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<td><strong>Handouts:</strong> Self-Blame and Guilt Exercise, 13 Ways to Treat Yourself</td>
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<th>Week 6</th>
<th>Triggers and Flashbacks</th>
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<td><strong>Goal:</strong> Create an atmosphere where group members can identify elements in their lives that trigger memories of their sexual assault. Group members will identify their new self-care needs as a result of their trauma and self-care areas they would like to work on developing. Group members will identify personalized self-care plans for triggers.</td>
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<td><strong>Handouts:</strong> Self Nurturing Activities, My Self-Care Plan for Triggers</td>
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<tr>
<th>Week 7</th>
<th>Intimacy and Self-Care</th>
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<tr>
<td><strong>Goal:</strong> Create an atmosphere where groups members can discuss challenges and successes regarding connecting intimately with others post sexual assault. Discussion of the roles that communication, trust and boundary setting plays in relation to intimacy.</td>
<td></td>
</tr>
<tr>
<td><strong>Handouts:</strong> Sexual Effects Inventory, Bill of Sexual Rights</td>
<td></td>
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<tr>
<th>Week 8</th>
<th>Support Networks- Group Closing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goal:</strong> To create an atmosphere where members can identify their internal and external support networks. Discussion and debriefing about support group and saying good-bye.</td>
<td></td>
</tr>
<tr>
<td><strong>Handout:</strong> Taking Stock of Your Progress, Web of Support</td>
<td></td>
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</tbody>
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*** Additional Topics May Include: Trust, Assertiveness, Letting Go, Identifying Emotions, Dissociation, Boundary Setting, Relaxation Techniques, and Sensory Relief.
ATVP SA SUPPORT GROUP

Date:________________

SESSION #1

10 min. Welcome to Group (GJ)
- Review group member agreement. Stress confidentiality (this includes seeing other members outside of group).
- Remind members that it is okay to leave if they feel uncomfortable (let us know if you’re leaving for the rest of the night so that we know where you are. Are you leaving for a breather or are you leaving for the entire evening?)
- Groups is structured so that members can say as much or as little as they would like/feel comfortable about the abuse. We’re here for support.
- Facilitators can be reached by phone in-between meetings during regular office hours. Additional support is also available on ATVP’s 24-hour hotline if you need to speak to an advocate during the agencies off-hours.

10 min. Review of Group Meeting Format (GJ)
- Order of Group: Announcements, Breathing, Check-in (3 min. limit for each group member), Discussion/Activity, Check-out, Breathing).
- Group meets for 8 weeks and is closed after the 1st meeting (additional screenings are being performed until Friday August 2nd). After said date no one else will be permitted to join the 8 week session for reasons of confidentiality and the productivity and comfort of the group).
- Emphasize missing no more than 2 days.

3 min. Breathing Exercise (GJ)
- See Attached Instructions.

10 min. Check-In (GJ)
- Today I’m feeling “............”

15 min. Activity (GJ)
- Colored Candles Activity
- Each Color Represents a Topic of “Favorites” such as books, music/band, movies, food, and hobbies.

20 min. Hopes and Fears (GJ)
- What are your hopes and fears re: group?
- After knowing what our outline of topics looks like for the upcoming 7 weeks, are there any topics that you are concerned we are not going to cover?

10 min. Check Out (GJ)
- This week, I’m looking forward to “............”
- Bring in two magazines that you don’t mind not getting back/having cut up for next weeks project re: self-esteem, body image, and social framing of the victimization of women.
ATVP SA SUPPORT GROUP

Date: ________________

SESSION #2

Review Group Meeting Format (GJ) 5 min.
- Go over order of group again

Welcome to group again (GJ) 10-15 min.
- Ice-Breaker Activity: Ice-breaker bag

Breathing exercise (GJ) 3 min.
- Natural breathing

Check-In (GJ) 5-10 min.
- Where and how in the media do participants see SA being depicted- how does this make members feel?

Discussion (GJ) 20-25 min.
- Pass out list of Rape Myths for group members to look at and ask for reactions, how have these popular rape myths expressed themselves in their lives, if at all?

Activity (GJ) 30 min.
- Collage: Construct a collage that has two opposing sides. One side of the collage should represent images that support SA/ Rape myths, the other side should be indicative of your “hope for the future,” positive images that you may draw upon to find strength.

Check Out (GJ) 5-10 min.
- A goal for the upcoming week- big or small- recorded on an index card and shared with the group as group members feel comfortable.

Breathing (GJ) 3 min.
- Natural Breathing
ATVP SA SUPPORT GROUP

Date: ______________

SESSION #3

Welcome to group again (GJ) 5 min.
• Announcements. How did last week’s goals go?

Review Group Meeting Format (GJ) 2 min.
• Tonight is our 4th session together and we’ll be discussing the topics of Assertiveness and Self-Esteem.

Breathing exercise (GJ) 3 min.
• Deep Breathing Exercise

Check-In (GJ) 10-15 min.
• How do you feel about your current level of self-esteem and why?

Activity #2 (GJ) 30-40 min.
• Self-Image Exercise: 2 images— one image indicates the way your trauma has affected your self-image, the other image should be your image if not exclusively influenced by trauma/abuse. Choose colors, shapes and patterns that indicate your emotions related to feelings you have toward yourself.
• Discuss the images that group members have created.
• Ask members if they see a connection between assertiveness and self-esteem—discuss what those connections look like.

Check Out (GJ) 10 min.
• Assertiveness hand-outs for members
• Ask members if there is one instance where they’d like to practice being assertive more often.
• What is one self-care activity that group members will participate in over the next week? Members may write it on a card if they’d like to.

Breathing (GJ) 3 min.
• Deep Breathing Exercise
ATVP SA SUPPORT GROUP

Date: ______________

SESSION #4

Welcome to group again (GJ) 10 min.
- Announcements

Review Group Meeting Format (GJ) 5 min.
- Tonight is our 5th session together. Our topic for the evening is Fear and Anger.

Check-In (GJ) 5-10 min.
- How did group members reflect on last week’s discussion/activity?

Discussion (GJ) 20 min.
- Are you aware of anger in your life?
- What would you like to do with your anger? How could your anger serve you?
- Can you imagine anger as a positive emotion?
- What keeps you from getting angry? From controlling your anger?
- What keeps you from directing your anger at yourself? Your abuser?

Activity #1 “Validating Anger” (GJ) 30 min.
- Supplies needed: magazines, glue, scissors, one sheet of paper.
- Look through mag’s to locate an image that helps you complete the statement: “My anger is like a ________.” For this exercise it is more helpful to choose a manufactured item or an item from nature than a person or animal.
- Look through the magazines and find one or more pictures that can be “helpful” to the anger image you choose.
- Move the pictures around on your page until they have an arrangement that is meaningful to you.
- Discuss these images together.

Closing (GJ) 20 min.
- Anger into Action: On one or more index cards, record ways that you can safely express your anger in positive ways.
- Share one idea with the group.

Check Out (GJ) 5 min.
- Deep Breathing Activity
### ATVP SA SUPPORT GROUP

**Date:** ______________

**SESSION #5**

**Welcome to group again (GJ) 5 min.**
- Announcements

**Review Group Meeting Format (GJ) 5 min.**
- Go over order of group again: Announcements, Breathing, Check-in (3-minute limit), Discussion/Activity, Check-Out, Breathing
- Tonight is our 4th session together. Our topic for the evening is *Dealing With Difficult Emotions: Guilt and Self-Blame*

**Check-In (GJ) 5-10 min.**
- Do you ever feel guilt or self-blame associated to your trauma? In what circumstances do you find these emotions come up for you?

**Activity #1 (GJ) 20 min.**
- Introduction- Survivor Guilt (it is a normal reaction to loss, etc).
- What is guilt that results from failing to meet societal expectations? (This is the guilt we feel when we fear losing the love and esteem of others.)
- What are some reasons why members may experience self-blame or guilt?
- Journal Activity: Family/Societal Guilt-- On the left write early ‘should’ messages, in the middle write who the message came from and on the right write what the punishment was for not meeting that expectation. Have each members write at lease 5 ‘should messages’ in their journals.
- Discuss as a group.

**Activity #2 (GJ) 25-30 min.**
- Art Project- Identify one guilty feeling or thought. Write in the center on a fresh sheet of construction paper.
- Now draw lines coming out of the guilty thought or feeling. On these lines have members write ways/draw pictures they could combat the guilty feeling (Ex: Remind Myself it’s Not my Fault, Exercise, Call a Supportive Person, etc).
- Members may do more than one if time allows.

**Check Out (GJ) 5 min.**
- What is one way that you will take time for yourself in the upcoming week?
- What is one guilty feeling that you will work on this week?
ATVP SA SUPPORT GROUP

Date:______________

SESSION #6

Welcome to group again (GJ)  5 min.
• Announcements: does the group have anything to announce?
• How was their holiday/vacation?

Review Group Meeting Format (GJ)  2 min.
• Tonight is our 6th session together. Our topic for the evening is Flashbacks, Triggers, Disassociation and Being Present.

Check-In (GJ)  10-15 min.
• Are triggers/flashbacks and/or disassociation part of your life? If so, in what ways?

Discussion (GJ)  20-25 min.
• What is a Flashback? Trigger? Disassociation?
• What are the specific things that trigger memories of your abuse/assault?
• What are the benefits/drawbacks to “spacing out” or disconnecting from reality?
• Are there grounding/self-care skills that you have that you’d like to share?
• Are there grounding/self-care skills that you would like to work on developing?

Activity #2 (GJ)  25 min.
• Modifying Emotional Patterns Activity
• Discuss projects when completed.

Check Out (GJ)  5 min.
• Tonight what sort of self-care activity will you take part in? Or, over the next week, what is one new self-care activity that you will try?
ATVP SA SUPPORT GROUP

Date:______________

SESSION #7

Welcome to group again (GJ)  5 min.
• Announcements: does the group have anything to announce?
• Hand Out: Embodiment Practices for grounding techniques and journaling ideas.

Review Group Meeting Format (GJ)  10 min.
• Tonight is our 7th session together. Our topic for the evening is Intimacy and Self-Care.
• Next week will be our last week together- Our topic is “Support Networks” but it will also be a time for us to sit and recount together the things that we have benefited from throughout the group process. Do group members have thoughts on how this could be done?

Check-In (GJ)  10 min.
• Sexual Assertiveness Dramatization. Read and discuss with members.

Group Discussion: Intimacy (GJ)  30 min.
• What is intimacy?
• When is intimacy easy? When is being intimate difficult?
• How does trust play a role?
• How does self-care/self-esteem play a role?
• Hand-Out: Sexual Fear. Discuss hand-out.

Check Out (GJ)  30 min.
• Self-Esteem Guided Imagery
• Give each member a paper bag and several index cards.
• On the outside of the bag, write the three things that you do well.
• On the inside of the bag write 2 things you don’t like but can change.
• On the index cards, write first steps to change these qualities.

Take Home: Gaining Insight into Self-Talk (GJ)  5 min.
ATVP SA SUPPORT GROUP

Date:______________

SESSION #8

Welcome to group again (GJ) 10 min.
  • Announcements.

Review Group Meeting Format (TM-M) 5 min.
  • Today is group #8, our final meeting. Our next SASG begins On July 29th, same time and place. If interested please make an appointment to meet with one of us to re-screen for group. Today’s topic is Support Networks.

Introduction (GJ) 10-15 min.
  • Distribute and read through poem. Talk about the importance of support networks and issues of self-esteem, personal strength, knowing who you are, etc. How might other poem reflect the importance of support/ a support network?

Check-in (TM-M) 10-15 min.
  • How would you rate your support network on a scale of 1-10, 10 being excellent? How do you feel about your score? What areas would you like to improve?

Certificate of Appreciation (GJ) 25-30 min
  • Have group members write on one another’s’ certificates affirming messages.
  • Go-Around- Have each group member affirm a helpful aspect of group.

Check Out (GF & TM) 15 min.
  • Pass out small pieces of paper and pens.
  • Have members write something on the paper that they would like to leave at group- something that they would like to leave behind to symbolize letting go and moving on.
  • Tear them up and placer in the bag. Throw away together.
**ALTERNATIVES TO VIOLENCE OF THE PALOUSE**

**SEXUAL ASSAULT SUPPORT TEENS GROUP OUTLINE**

**8 WEEK SESSION**

**Goal:** To increase participants’ emotional stability and understanding of their response to victimization and the related impact on their life.

**Objective:** To provide group members with a safe, open atmosphere for discussion and activity to facilitate understanding of sexual victimization and the healing process.

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**Goal:** To create an atmosphere free of judgment where group members can freely participate.  
Introduction to group format, group member introductions, discussion of ground rules, topic review. |
| Week 2  | **Self-Esteem and Body Image**  
**Goal:** To create an atmosphere where members begin to explore issues of sexual violence in a societal context. Includes discussion of rape myths, media’s portrayal of violence against women, and socialization. Focused activity will explore the socialization of men and women and it’s impact of the life of the trauma survivor. |
| Week 3  | **Healing: Healthy Ways to Cope**  
**Goal:** Discussion around self-esteem /self-confidence. Identification of positive and negative self-talk and first steps toward moving toward acceptance.  
Create one self-esteem driven affirmation for the evening; complete and discuss.  
**Handout:** Self-Talk & Self-Care handouts |
| Week 4  | **Fear and Anger**  
**Goal:** To create an atmosphere in which group members can express their feelings of fear and anger related to their assault. Identify feelings of fear and anger related to individuals traumatic experiences. Discussion surrounding things group members do to avoid these difficult emotions and situations that currently feel safe to the membership.  
**Handouts:** Voices of the Past and Voices of the Present |
### Appendix - Sample Tools

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<th>Triggers, Nightmares, &amp; Flashbacks</th>
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<td><strong>Goal:</strong> Create an atmosphere where group members can identify elements in their lives that trigger memories of their sexual assault. Group members will identify their new self-care needs as a result of their trauma and self-care areas they would like to work on developing. Group members will identify personalized self-care plans for triggers.</td>
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<th>Assertiveness and Boundaries</th>
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<td><strong>Goal:</strong> Create an atmosphere where groups members can discuss challenges and successes regarding establishing healthy relationships, practicing assertiveness and when to put boundaries in place.</td>
<td></td>
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<tr>
<td><strong>Handouts:</strong> Boundary Building Exercises, handouts about assertiveness.</td>
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<th>Week 8</th>
<th>Building Strong Support Networks- Group Closing</th>
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<td><strong>Goal:</strong> To create an atmosphere where members can identify their internal and external support networks. Discussion and debriefing about support group and saying good-bye.</td>
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*** Additional Topics May Include: Trust, Letting Go, Identifying Emotions, Disassociation, Relaxation Techniques, Risk Reduction, and Sensory Relief.***
## ALTERNATIVES TO VIOLENCE OF THE PALOUSE

### MALE SEXUAL ASSAULT SUPPORT GROUP OUTLINE

#### 8 WEEK SESSION

**Goal:** To increase the participants’ emotional stability and understanding of their response to victimization and the related impact on their life.

**Objective:** To provide group members with a safe, open atmosphere for discussion and activity to facilitate understanding of sexual victimization and the healing process.

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| **Week 1** | **Introduction to Male Sexual Assault Support Group**  
**Goal:** To create an atmosphere where group members can freely participate without being judged.  
Introduction to group, group member introduction, discussion of ground rules, ice breaker activity, and review of session format and topics for 8 week session. |
| **Week 2** | **Looking at Men and Male Victimization from a Societal Framework**  
**Goal:** To create an atmosphere safe for members to begin to explore the issues of sexual assault as they apply to men; to create space for group members to share observations about society’s views of men and how these societal views have affected them in their healing process; to create space for group members to share observations about the impact assault has had upon them and to reach a common experience as a group.  
Focused activity that will foster an understanding of how socialization of men and women affects the impact that the trauma has had on one’s life.  
**Handout:** Male Sexual Assault Statistics  
Facilitate discussion, lead activity, present statistics, lead visualization. |
| **Week 3** | **Self-esteem, Self-imaging, and Society**  
**Goal:** To create an atmosphere in which members explore the effects of victimization on self-esteem and self-imaging; to create an atmosphere where information about feelings is distributed and discussed; to create an atmosphere where group members can discuss perfectionism versus worthlessness.  
Activity or questionnaire for group members to further explore their level or rate of self-esteem and self-imaging.  
**Handout:** Thoughts in the Present, Gaining Insight into Self-talk, Assessing the Damage Questionnaire.  
Facilitate discussion, lead activity. |
<table>
<thead>
<tr>
<th>Week</th>
<th>Topic</th>
<th>Goal</th>
<th>Activity</th>
<th>Handout</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>Feelings: Anger and Fear</td>
<td>To create an atmosphere in which members can express their feelings associated with their sexual assault; to discuss how society pressures men to respond in certain ways.</td>
<td>Activity to highlight possible reactions and stages of emotion after sexual assault experience.</td>
<td>Feelings worksheet with labels for feelings, Uncovering Anger. Facilitate discussion.</td>
</tr>
<tr>
<td>5</td>
<td>Self-blame, Guilt, Self-care, and Coping Skills</td>
<td>To create an atmosphere in which group members can discuss self-blame and guilt; to create an open environment where members can discuss feelings of isolation and/or alienation due to society’s views about gender; to explore the various styles of coping that people use; to identify positive coping techniques.</td>
<td>Activity to explore member’s self-blame and guilt. Discuss healthy coping mechanisms and the costs and benefits of various coping styles.</td>
<td>Survivors’ Group Questionnaire, 13 Way to Treat Yourself, Self-nurturing Activities. Facilitate discussion, lead heat meditation.</td>
</tr>
<tr>
<td>6</td>
<td>Shame, Sexuality, Trust, and Intimacy</td>
<td>To create an atmosphere in which group members can discuss feelings of shame relating to victimization; to explore possible questions or confusion about sexuality; to create an atmosphere in which members can speak about trust and intimacy issues.</td>
<td>Activity to highlight positive, realistic relationships.</td>
<td>Ideal Relationship worksheet, Intimacy Questionnaire, Sexual Effects Inventory, Worksheet on Sequence of Dating and Sexual Behaviors. Facilitate discussion.</td>
</tr>
<tr>
<td>7</td>
<td>Triggers, Flashbacks, and Self-care</td>
<td>To create an atmosphere in which group members can identify varying triggers; to provide an atmosphere in which members feel comfortable to discuss flashbacks; to brainstorm possible positive self-care techniques after experiencing a trigger or flashback.</td>
<td>My Self-care Plan for Triggers. Facilitate discussion, lead visualization.</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Support Networks and Closing</td>
<td>To create an atmosphere where members can identify their internal and external support networks. Discussion and debriefing about support group and saying good-bye.</td>
<td>Taking Stock of Your Progress Questions.</td>
<td></td>
</tr>
</tbody>
</table>
# ALTERNATIVES TO VIOLENCE OF THE PALOUSE

## NON-OFFENDING PARENT SUPPORT GROUP OUTLINE

### 8 WEEK SESSION

**Goal:** To increase the participants’ emotional stability and understanding of their response to victimization and the related impact on their and their child’s lives.

**Objective:** To provide group members with a safe, open atmosphere for discussion and activity to facilitate understanding of sexual victimization and the healing process.

<table>
<thead>
<tr>
<th>SESSION</th>
<th>DESCRIPTION OF SESSION</th>
</tr>
</thead>
</table>
| **Week 1** | **Introduction to Non-offending Parents Support Group**  
**Goal:** To create and atmosphere where group members can freely participate without being judged.  
Introduction to group, group member introduction, discussion of ground rules, ice breaker activity, and review of session format and topics for 8 week session.  
**Handout:** Evaluation handed out-OCB |
| **Week 2** | **Impact of Sexual Violence on Children**  
**Goal:** To create an atmosphere safe for members to begin to explore the issues of sexual assault as they apply to the child/ren; to create space for group members to share observations about the impact assault has had upon their children and to reach a common experience as a group.  
Focused activity which will foster an understanding of the child's experience and to gain insight into the impact that the trauma has had on the child’s life. Group members also gain insight into the areas of their child lives that require their focus and attention.  
**Handout:** Effects of trauma, behaviors related to sexuality or elementary school children.  
Facilitate discussion, lead activity. Free write exercise to process the experience privately and to make a record for the benefit of the parent child relationship. |
| **Week 3** | **Parental Response to Sexual Abuse**  
**Goal:** To create an atmosphere where members explore as a group, the range of emotional responses experienced as a result of their child’s assault.  
To create an atmosphere where information about feelings is distributed and discussed. Activity to assist exploration of reactions to key words that commonly surround the internal experience of the non offending parent.  
Facilitate discussion. |
| Week 4 | **Surviving the Abuse of Your Child/Coping Skills**  
**Goal:** To explore the various styles of coping that parents use. To identify positive styles of coping that supports the parent-child relationship and identifies stressors. To initiate understanding about the effects of modeling behavior within a parent-child relationship. For parents to note ideas of improving quality of life and relationships with their child/ren. Activity to highlight healthy coping mechanisms and discuss the costs and benefits of various coping styles parents use to handle reoccurring stressors. Facilitate discussion. Free write. |
|---|---|
| Week 5 | **Impact of Abuse on Parent Child Relationship**  
**Goal:** To begin to look directly at the effects that sexual abuse has had on the parent child relationship. Discussion of relations within the family. Activity is designed to help parents identify healthy quality communication with their child/ren. Facilitate discussion. |
| Week 6 | **Talking With Children About Abuse**  
**Goal:** To create a safe atmosphere where members address communication barriers between the parent and child because of the abuse. To develop as a group methods of exploring the post abuse experience with the child. Facilitate discussion. |
| Week 7 | **Safety Planning With Your Children**  
**Goal:** To provide an atmosphere where members can exchange ideas, experiences and concerns that they have for their children and for themselves in relation to safety needs. To enhance the parents role in the education of the child about abuse. 
Activity to create a hierarchical arrangement of environmental threats that realistically exist in the child’s life and to develop a vocabulary and approach for talking with the child/ren about those specific threats. Supplemental readings and handouts on the subject of children’s safety from sexual assailants in order to increase the knowledge base of the parents and improve methods they might use in discussing safety with their child/ren. Facilitate discussion. |
| Week 8 | **Support Networks: Group Conclusion**  
**Goal:** To create an atmosphere where members can identify their internal and external support networks. Discussion and open dialog regarding saying goodbye.  
**Handout:** Evaluation handed out- OCB |

* Please note: Some session topics may change due to group identified needs; for example after discussion of Parental Response to Abuse. Group members may respond with request for a session on Feelings: sadness, grief and shame.  
Supplemental group may topics may include but not limited to Anger and Stress management.
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date: ________________

SESSION #1

Introductions: KT (15-20 min)
- Introduction of Facilitators
- Discuss Group Member Agreement
- Review Confidentiality Agreement. What does confidentiality mean to the group membership?
- Describe the group structure: NOPSG is 8-weeks in duration, becomes a closed group by week two; advocates can be reached on 24-hour hotline; facilitators can meet participant’s in-between group sessions.

Check-in: GJ (15-20 min)
- Hand out folders, business cards, NOPSG outlines and other supplies.
- Have group members introduce themselves during the check-in process.
- **What is one positive change that you have noticed in your life since you decided to come to NOPSG? How have things been different for you since you made the choice to come to group?**

Group Norms: KT (15-20 min)
- Brainstorm positive ideals for groups to come on poster board.
- We will post these and use them as refreshers when needed.

Discussion: GJ (20-25 min)
- What do group members hope to get out of group?
- Do group members have specific concerns/fears regarding their participation in group?
- Looking at your group outlines, are there any specific topics that you are particularly interested in at this time?
- Are there any topics that are missing from the outline that could be added?

Closing: KT (10 min)
- **In relationship to your current situation (life/family), what makes you feel hopeful?**
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date:______________

SESSION #2

Introduction/Welcome Members to Group: 5 min. GJ
- Have members review the group member agreement previously agreed upon and discuss any possible additions.

Announcements: 5 min. KT
- How has everyone’s day/week been going?
- Any general announcements from the group that they would like to share?

Check-in: 10-15 min. GJ
- What is one thing you notice in popular culture and/or the media that helps perpetuate sexual violence in society? How does it make you feel as a parent?

The topic for the evening is Child Sexual Abuse/Assault and Society: 20-25 min. KT
- Hand out list of Rape Myths
- Review hand-out and discuss which myths have impacted their lives.
- How do group members combat these myths?
- What facts about child SA do you wish more people were aware of?
- What are some ways to help educate your child correctly about personal safety without buying in to the rape myths?

Educational Topic How to Stop Obsessive Worry: 20-25 min. GJ
- Review worksheet as a group.
- Have members identify an alternate strategy from the list that they currently employ and discuss.
- Have group members identify one strategy on the list that they would like to try, but have not yet done so.

Check-Out/Goal Setting: 10-15 min. KT
- What will your 1st step toward developing this alternative activity be?
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date:__________

SESSION #3

CHALLENGING EMOTIONS: GUILT, ANGER AND FEAR

Welcome/Announcements: (5-10 min) KT
- Announcements?
- How did members weeks go?

Check-In: (15 min) GJ
- What is an emotion you have had, or continue to have, about the abuse of your child that you would like to work on coping with or expressing?
- When does this emotion come up for you?

Activity/Discussion (20-25 min) KT
- Go through the activity as a group.
- Have group members generate answers to the questions on the self-evaluation hand-out.
- Discuss.

Activity/Discussion: Skill Building (20-25 min) GJ
- Review the “Blame, Acceptance and Forgiveness” packet
- What messages have group members received about blame? Acceptance? Forgiveness?
- Review “Things to Remember Every Day.”

Check Out: Goal Setting (10 min) KT
- What is one thing that went well in group?
- What is one goal that you have set for yourself in the weeks to come?
Welcome back to Group: (5 min)
- Re-welcome members
- Any announcements
- How did everyone’s week go?
- Catch up on observations on last week’s homework: Blame, Acceptance & Forgiveness

Review Format: (5 min)
- Today is week four of group. Discuss group schedule for the next few weeks re: holidays and the combining of topics.
- Today our topic is: Parental Response to Sexual Abuse and Coping Skills

Check-In: (5-10 min)
- How is everyone feeling tonight?
- How are you doing in identifying your emotional “stopping blocks this week?”

Family Diagrams: (20-25 minutes)
- On paper plates, create a pie chart of what your life looked like before the assault.
- Next, cut out the portions that are now gone as a result of making changes in your life.
- Now, create a plate that symbolizes where you are at now.
- Discuss these changes: What do they look like? How do you feel? Do you have empty spaces that you are still looking to fill?

Hand Out: Current Family Life (20-25 minutes)
- Hand out the packet and discuss.
- Go through a few with the group. Additional questions may be answered as homework.

Check Out (10 minutes)
- What is one healthy coping strategy that is working well for you that you will try to do this week? Discuss how you will accomplish this.
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date:______________

SESSION #5

FOSTERING THE PARENT-CHILD RELATIONSHIP

Re-Welcome To Group: GJ (5min)
• Any announcements?
• How is everyone?

Review Format: GJ (5 min)
• Today is week 5 of our group
• Group will follow the format as usual
• Today our topic is: Fostering the Parent-Child Relationship

Check-In: KT (10-20 min)
• What is one strength that you can identify in your current parent-child relationship(s)?

Activity: GJ (15-20 min)
• Using colored pencils, markers, magazine pictures or whatever you would like, create a diagram of you family as you see it now.
• What is central to your family?
• What barriers are there between family members?
• What has changed?
• What has not?

Discussion: KT (20-25 min)
• If you feel comfortable, share your diagrams with the group.
• How were you feeling during the exercise?
• What is the communication like in the family now?
• What can be said and what cannot.
• What is the nature of the barriers to good communication in your family?
• Who is responsible for maintaining the barriers?
• What might be some ways around them?

Checkout- Family Wish: GJ (10 min)
• Write down a wish you have for your family on a 3x5 card.
• Share with the group, if you wish to do so
• Take it home and hang it somewhere in the open or place somewhere as a reminder only to you.
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date:________________

SESSION #6

SAFETY PLANNING WITH YOUR CHILDREN

Re welcome to group: (5-min)
- Re-welcome members
- Any announcements?
- How is everyone feeling?

Review Format: (5-min)
- Today is week #7 of our group
- Which means we are one week away from our last group.
- Group will follow the same format as before
- Our topic today is Safety planning with your children.

Check-In: (5-10 min)
- How is everyone feeling tonight?
- Let's do a short brainstorm about safety planning with your children (what does it mean to you? how do you feel about it).
- Three minutes per person

Activity: (20-25 min)
- Draw and color a pie graph containing Areas of concern you have for you and your child.
- On the backside, or on another sheet of paper, write safety plan- things you might say to your child, or measures you might take to protect your child or yourself from those potential dangers. (areas of concern can be physical, emotional or anything that is a threat to you and your child’s well being and recovery)

Discussion: (25-30 min)
- If you feel comfortable, share your graphs with the group.
- What are the areas of highest concern on your graphs?
- What do you think about your safety plans?
- Are you at present able to communicate these types of plans to your children?
- If not what seems to be in the way?

Check-Out: (5-10 min)
- Write down when and where that moment might occur and what you might say and share with the group.
NON-OFFENDING PARENTS/CAREGIVERS SUPPORT GROUP

Date:______________

SESSION #8

OVERVIEW AND DISCUSSION

OCVA Group Evaluations

Re-welcome to group: (5 min) GJ
• Any announcements?
• How is everyone?

Review Format: (5-min) KT
• The topic for tonight is **Overview and Building Strong Support Networks**.
• It is the 8th and last session of this group.
• We will be contacting group members within the next few weeks to determine if anyone is still interested in attending this group again.
• Contact us via our business offices or in-person in the future as needed.

Check-in/ Discussion (5-10min) GJ
• How is everyone feeling tonight?
• What does a strong support network look like to you?
• In what ways is your network currently strong?
• What are some needed areas for development?

Activity: Web of Support (20-25) KT
• Have group members toss the ball of yarn to one another.
• Before tossing, group members can share one thing they enjoyed about being in group and/or one thing that they learned from the group experience.

Discussion: (20-25min) GJ
• What was something meaningful that came from the group experience for you?
• What are some things you feel you may have to work on further?
• What are some experiences you did not expect?
• What was most valuable to you?

Check-out: (5-10min) KT
• What would group members like to take away from this experience and how might they carry these positives into future parent-child relations?
CURRICULUM FOR SUPPORT GROUP FOR PARENTS AND CAREGIVERS OF CHILDREN WHO HAVE BEEN SEXUALLY ABUSED

PROVIDENCE SEXUAL ASSAULT CENTER – EVERETT, WA

- Facts and statistics of childhood sexual abuse

- How sexual abuse affects families
  - Common feelings of parents

- Defense mechanisms and coping style
  - Focus on denial

- Developmental disruptions
  - Mitigating effects of child sexual abuse

- Parenting a child who has suffered sexual abuse
  - Discipline
  - Emotional reactions

- Boundaries

- Basic offender information
  - Focus on grooming

- How to talk to your children about sexuality
  - Behaviors related to sex and sexuality in young children

- Legal information; laws, prosecution, rights of victims, interviews
  - Understanding the system

- Safety and prevention
CURRICULUM FOR SUPPORT GROUP FOR ADULT FEMALE SURVIVORS OF CHILD SEXUAL ABUSE

PROVIDENCE SEXUAL ASSAULT CENTER – EVERETT, WA

- Introduction to the group
  - Group rules and responsibilities
  - Group goals
  - Self-care
- The Effects of Sexual Abuse
  - Physical effects
  - Psychological effects
  - Relational effects
  - Activity – Write a letter of condolence to yourself
- Emotions
  - Understanding your emotions
  - Dealing with emotions
  - Healthy ways to express emotions
- Coping Mechanisms
  - How do coping mechanisms develop
  - Unhealthy coping
  - Dissociation
  - Healthy coping mechanisms
- Self-Esteem
  - What do you think of yourself?
  - What is healthy self-esteem
  - Self-love
  - Self-care
- Boundaries
  - Family of origin issues
  - Identifying poor boundaries
  - Setting boundaries
  - Activity – Practice setting boundaries
- Disclosure and Confrontation
  - Is it necessary to disclose?
  - Reasons for disclosing/confronting
  - What to say to people
  - How to talk to your family
  - Activity – Write a letter to your offender
- Relationships
  - How survivors function in a relationship
  - Ways partners can help survivors
  - How being a partner affects parenting
  - Healthy relationships
- Sexuality
  - Impacts on sexuality
  - Sexual Healing
- Forgiveness
  - What is forgiveness?
  - Is it necessary to forgive?
  - Where do you go from here?
  - Closing of group
CURRICULUM FOR SUPPORT GROUP FOR ADULT MALE SURVIVORS OF CHILDHOOD SEXUAL ABUSE AND ADULT SEXUAL ASSAULT

WASHINGTON ASSAULT CENTER – EVERETT, WA

• Introduction to the group
  - Group rules and responsibilities
  - Group goals
  - Confidentiality

• The Effects of Sexual Abuse
  - Physical effects
  - Psychological effects
  - Relational effects

• Emotions
  - Understanding your emotions
  - Dealing with emotions
  - Healthy ways to express emotions

• Coping Mechanisms
  - How do coping mechanisms develop
  - Unhealthy coping
  - Disassociation
  - Healthy coping mechanisms

• Self-Esteem
  - What do you think of yourself?
  - What is healthy self-esteem
  - Self-care

• Boundaries
  - Family of origin issues
  - Identifying poor boundaries
  - Setting boundaries
  - Activity – Practice setting boundaries

• Disclosure and Confrontation
  - Is it necessary to disclose?
  - Reasons for disclosing/confronting
  - What to say to people
  - How to talk to your family
  - Activity – Write a letter to your offender

• Relationships
  - How survivors function in a relationship
  - Healthy relationships

• Sexuality
  - Masculinity
  - Impacts on sexuality
  - Sexual orientation
  - Sexual Healing

• Now what
  - What is forgiveness?
  - Is it necessary to forgive?
  - Where do you go from here?
  - Closing of group
CURRICULUM FOR SUPPORT GROUP FOR ADULT MALE SURVIVORS
OF CHILDHOOD SEXUAL ABUSE AND ADULT SEXUAL ASSAULT

PROVIDENCE SEXUAL ASSAULT CENTER – EVERETT, WA

- **Why are we here?**
  - Group rules
  - Group commitment
  - Getting to know each other

- **Trust**
  - Trust walk
  - Who do you trust?

- **Feelings**
  - What are you feelings
  - Why are those feelings present
  - Alternatives to anger

- **Sexuality**
  - Understanding sexuality

- **Coping**
  - Self-harm
  - Reactions to flashbacks
  - Relaxation

- **Boundaries**
  - Personal safety
  - Healthy boundaries

- **Telling your experience**
  - How did it start, end?
  - How did you feel?
  - Who did you tell?

- **Letter to the Offender**
  - Feelings associated with activity

- **Choices**
  - Making good choices

- **Closing and Celebration**
  - Affirmations
CURRICULUM FOR SUPPORT GROUP FOR ADULT FEMALE RAPE SURVIVORS

PROVIDENCE SEXUAL ASSAULT CENTER – EVERETT, WA

Week 1: Welcome. Logistics, Creating a safety plan, and recognizing self care

Week 2: Coping and PTSD. Understanding flashbacks and looking at behaviors in managing the trauma- Understanding healthy coping skills versus dysfunctional ways of behaving

Week 3: Recalling your story. Individuals will write their story and verbalize to the group. They will also learn how to confront their offender through letter writing.

Week 4: Relaxation and healing exercises

Week 5: Sex and sexuality

Week 6: Insight on sex offenders and the legal process

Week 7: Understanding feelings and how to work with them in healthy ways.

Week 8: Trust and boundaries

Week 9: Helping others support you

Week 10: Closure
## HOW I COPE WHEN I AM ANGRY

**How do I handle my anger?** Use a “U” for usually
Use an “S” for sometimes
Use an “N” for never

<table>
<thead>
<tr>
<th>I hit people</th>
<th>I don’t let people know</th>
</tr>
</thead>
<tbody>
<tr>
<td>I yell</td>
<td>I run away</td>
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<tr>
<td>I like to be alone</td>
<td>I talk about it</td>
</tr>
<tr>
<td>I cry</td>
<td>I hit pillows or something soft</td>
</tr>
<tr>
<td>I throw things</td>
<td>I try not to be angry</td>
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<tr>
<td>I try to hide it</td>
<td>I want to drink alcohol</td>
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<tr>
<td>My stomach gets tight</td>
<td>I want to hurt somebody</td>
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<tr>
<td>I have to go to the bathroom</td>
<td>I get into trouble</td>
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<tr>
<td>I drink alcohol</td>
<td>I try to hurt somebody</td>
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<tr>
<td>I want to use drugs</td>
<td>I try to hurt myself or an animal</td>
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<tr>
<td>I don’t let anyone know</td>
<td>I do use drugs</td>
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<tr>
<td>I eat soft foods</td>
<td>I want to sleep</td>
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<tr>
<td>I get a stomach ache</td>
<td>I slam doors</td>
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<tr>
<td>I drive too fast</td>
<td>I can’t pay attention</td>
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<td>I hit myself</td>
<td>I call a friend</td>
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<td>I play hard</td>
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</table>
## Identifying Your Coping Strategies

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Often</th>
<th>Sometimes</th>
<th>Hardly Ever</th>
<th>Never</th>
<th>Used to but don’t now</th>
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<tbody>
<tr>
<td>Cleaning (house or self)</td>
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<td>Sleeping</td>
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<tr>
<td>Keeping busy</td>
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<td>Going out a lot</td>
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<td>Staying in a lot</td>
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<tr>
<td>Sealing off feelings</td>
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<tr>
<td>Fantasizing/Daydreaming</td>
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<tr>
<td>Dissociating/Cutting Off</td>
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<td>Passing out</td>
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<tr>
<td>Taking medication</td>
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<td>Drinking alcohol</td>
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<td>Taking non-prescription drugs</td>
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<td>Smoking</td>
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<tr>
<td>Self-harming</td>
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<tr>
<td>Withdrawing form other people</td>
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<td>Overeating/Binge eating</td>
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<td>Undereating</td>
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<td>Spending time on computer</td>
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<tbody>
<tr>
<td>Working</td>
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<tr>
<td>Suicide attempts</td>
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<tr>
<td>Becoming aggressive</td>
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<td>Taking a bath</td>
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<td>Resting</td>
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<td>Painting</td>
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<td>Writing</td>
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<td>Phoning someone</td>
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<tr>
<td>Talking to Someone</td>
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<tr>
<td>Walking</td>
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<tr>
<td>Having a massage</td>
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<tr>
<td>Exercising</td>
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<tr>
<td>Dancing</td>
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<tr>
<td>Listening to music</td>
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<tr>
<td>Reading</td>
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<td>Other:</td>
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<td>Other:</td>
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<tr>
<td>Other:</td>
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</tbody>
</table>
# PROGRESS IN STRENGTHENING

You can tell you are beginning to strengthen your boundaries when:

(Check any breakthroughs you have experienced)

<table>
<thead>
<tr>
<th>You act on feelings when you need to.</th>
</tr>
</thead>
<tbody>
<tr>
<td>You can say no when you want to without experiencing tidal waves of guilt.</td>
</tr>
<tr>
<td>You generally do precisely what you want to do rather than depending on the suggestions of others.</td>
</tr>
<tr>
<td>You no longer blame you for everything that goes wrong in a relationship or a friendship.</td>
</tr>
<tr>
<td>You no longer feel responsible for making a relationship work or for making another person happy.</td>
</tr>
<tr>
<td>You don’t take things so personally. If a friend is inconsiderate or a partner has a wondering eye, you know the action may have come from that person’s history.</td>
</tr>
<tr>
<td>You disagree with a friend and yet are able to maintain your friendship.</td>
</tr>
<tr>
<td>You realize that you are not responsible for the actions of others.</td>
</tr>
<tr>
<td>You become comfortable in receiving as well as giving.</td>
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</tbody>
</table>
## SELF-ESTEEM

<table>
<thead>
<tr>
<th>Statement</th>
<th>Always</th>
<th>Usually</th>
<th>Sometimes</th>
<th>Rarely</th>
<th>Never</th>
</tr>
</thead>
<tbody>
<tr>
<td>I feel dirty, like there’s something wrong with me.</td>
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<tr>
<td>I feel ashamed.</td>
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<tr>
<td>I’m different from other people.</td>
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<tr>
<td>I feel powerless.</td>
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<tr>
<td>If people really knew me, they’d leave.</td>
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<tr>
<td>I want to hurt/kill myself.</td>
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<td>I hate myself.</td>
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<tr>
<td>I have a hard time taking care of myself.</td>
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<tr>
<td>I don’t deserve to be happy.</td>
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<tr>
<td>I don’t trust my intuition or feelings.</td>
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<tr>
<td>I’m often confused.</td>
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<tr>
<td>I don’t know how to set goals and follow through on them.</td>
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<tr>
<td>I’m a failure. I don’t feel capable of doing a good job.</td>
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<tr>
<td>I use work to make up for empty feelings inside.</td>
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<tr>
<td>I’m a perfectionist.</td>
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<tr>
<td>I’ve made up a lot of stories about my life.</td>
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</tbody>
</table>
SIGNS YOU HAVE POOR BOUNDARIES

- Your feelings about who you are stem from being liked by someone else.
- Your good feelings about who you are stem from receiving approval from someone else.
- Someone else’s struggles affect your serenity.
- Your mental attention focuses on solving someone else’s problems or relieving their pain.
- Your mental attention is focused on pleasing someone else.
- Your mental attention is focused on manipulating someone to do it your way.
- Your self-esteem is bolstered by someone else’s pain.
- Your own hobbies or interests are put aside in order to participate in someone else’s hobbies or interests.
- You are less aware of how you feel than how someone else feels.
- You are less aware of your own wants and needs than of someone else’s.
- Your dreams for your future are linked to someone else.
- Your fear of rejection determines what you do and say.
- Your fear of your anger determines what you do and say.
- You use giving to someone as a way to feel safe in a relationship.
- You put aside your values in order to connect with someone else.
- You value someone else’s opinion and way of doing things more than your own.
- Your quality of life is in direct relation to the quality of someone else’s life.
WHERE AM I IN MY HEALING?

Everyone is in a different stage of their healing. Although there is no set beginning, middle, or end to the healing process, there are points when you are closer to the beginning and other points when you are much further along.

As you begin group it is a good idea to get an idea of where you are in the healing process. Check off the statements that apply to you:

<table>
<thead>
<tr>
<th>Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>I have just started having memories of being sexually abused.</td>
</tr>
<tr>
<td>I don’t remember anything specific, but I think I might have been abused.</td>
</tr>
<tr>
<td>I don’t have any specific memories or pictures, but I know something happened to me.</td>
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<tr>
<td>I know I was abused, but I don’t know who did it.</td>
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<tr>
<td>I’m not sure my experience counts as sexual abuse. I wonder if I am in the right place.</td>
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<tr>
<td>I’ve always remembered the abuse. I am just beginning to think it affected me.</td>
</tr>
<tr>
<td>I want to deal with these issues, but I don’t know where to begin.</td>
</tr>
<tr>
<td>I’m feeling really desperate and hopeless. I am beginning this group as a last resort.</td>
</tr>
<tr>
<td>The abuse happened a long time ago and I don’t think it has much to do with my life today.</td>
</tr>
<tr>
<td>I’ve been working on these issues for a long time. I’m looking for an affirmation of how far I have come.</td>
</tr>
<tr>
<td>I feel that I’ve dealt with most of the core issues surrounding the abuse. I just need some help around specific issues.</td>
</tr>
<tr>
<td>My therapist/partner/friend suggested that a group might be helpful for me.</td>
</tr>
<tr>
<td>Starting this group terrifies me. I don’t want anyone to know I am doing this.</td>
</tr>
</tbody>
</table>

(Adapted from The Courage to Heal Workbook, by Laura Davis)
**WHY TELL?**

There are many benefits to talking about your abuse, although it can be hard to identify them when you’re feeling scared about doing so. Listed below are some common reasons survivors find it empowering to tell. Check off the ones that apply to you. Add any others you can think of.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Description</th>
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</thead>
<tbody>
<tr>
<td>Telling will help me overcome feelings of shame.</td>
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<tr>
<td>I’ll find out that I’m no longer alone or different.</td>
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<tr>
<td>I’ll experience someone else’s compassion and love.</td>
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<tr>
<td>I’ll stop following the abusers rules.</td>
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<tr>
<td>I’ll expose the offender.</td>
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<tr>
<td>Once I tell, I can get help and support.</td>
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<tr>
<td>I’ll move through my denial.</td>
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<tr>
<td>I’ll get more in touch with my feelings.</td>
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<tr>
<td>When I’m more honest, my relationships will become more intimate.</td>
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<tr>
<td>People around me will get information and be less confused about what I’m going through.</td>
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<tr>
<td>I’ll establish myself as a person I the present dealing with the abuse I suffered as a child.</td>
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<tr>
<td>I’ll help end child sexual abuse by breaking the silence in which it thrives.</td>
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<tr>
<td>I’ll be a model for other survivors.</td>
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<tr>
<td>I’ll be a model for the kids in my family who are still being abused.</td>
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<tr>
<td>I can stop abuse that’s still going on.</td>
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<tr>
<td>I’ll feel relieved.</td>
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</tbody>
</table>
SUPPORT GROUP
MEMBER AGREEMENT

- I will make my best effort to attend every group on time.
- I will care for myself and not come to group under influence of drugs or alcohol.
- I will not disclose information of group location, day and time, or have a current partner drop me off at group.
- Before addressing conflicts with other group members I will talk to one of the facilitators before or after group.
- I will not use “oppressive” language (racial slurs, judgmental or prejudicial terms).
- I will express myself however I feel, but in an appropriate manner for others.
- I will consider safety, provide mutual respect, and be supportive of all members.
- I will not participate in side talk; rather I will give other members my full attention and allow others time to share.
- I will honor the Confidentiality Statement as explained below:

Confidentiality is essential to the success of any group. Confidentiality means that what is said in group, stays in group (this also includes the identity of group members). It is also inappropriate to talk about other group members outside of group. I may, however, share my own experiences and insights with others outside of group as long as I do not break the confidentiality of group members.

The group facilitators will abide by the same standards of confidentiality, except in the following circumstances, as mandated by law: in the case of suspected child abuse, vulnerable or elder abuse and/or if it becomes clear that a member is in immediate danger of harming herself or others. Facilitators may choose to review discussions, which occur in group with the psychologist who is consulting the facilitators. In this case, they will remain mindful of this commitment to confidentiality.

I understand and agree to follow the agreement and statement above.

____________________________  ______________
Group Member Signature            Date

____________________________  ______________
Facilitator Signature    Date
# CSA GROUP EVALUATION

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neutral</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>I felt supported/safe in the group.</td>
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<tr>
<td>2.</td>
<td>The group goals were accomplished.</td>
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<td>3.</td>
<td>I have learned some new skills.</td>
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<td>4.</td>
<td>I felt comfortable with the facilitator.</td>
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<tr>
<td>5.</td>
<td>I was able to participate as much as I wanted to during the sessions.</td>
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<tr>
<td>6.</td>
<td>I feel good about my group experience.</td>
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<td>7.</td>
<td>The group met my expectations.</td>
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<td>8.</td>
<td>I feel better equipped to cope with my assault.</td>
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<tr>
<td>9.</td>
<td>I have a better understanding of the effects of sexual assault.</td>
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<td>10.</td>
<td>I feel more comfortable discussing my sexual assault.</td>
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</tbody>
</table>

1. What have you learned?

________________________________________________________________________

2. What about the group has been most helpful to you?

________________________________________________________________________

3. If you were the group facilitator, what might you do differently?

________________________________________________________________________

**THANK YOU FOR YOUR HONESTY!**
THINKING ABOUT YOURSELF
(Can Use for Pre/Post Test to Measure Outcomes)

NAME: ______________________________________________________________
SCHOOL: ______________________________________________________________
AGE: __________________________

Read each statement carefully and circle the word that best describes the way you usually think or behave.

1. **I feel like I’m the only one who has ever been abused/assaulted.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

2. **I feel like the abuse/assault was my fault.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

3. **I understand how the abuse/assault has affected my life.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

4. **I can accept my feelings and begin to deal with them.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

5. **I understand the way I have reacted to the abuse/assault.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

6. **I feel like I can control the way I react to the abuse/assault.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

7. **I understand what steps I can take to keep healing.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

8. **I feel I am able to make changes in my life.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

9. **It is hard for me to reach out for help.**
   - Always
   - Most of the Time
   - Sometimes
   - Rarely
   - Never

10. **I feel supported.**
    - Always
    - Most of the Time
    - Sometimes
    - Rarely
    - Never

11. **I am willing to get support from other people.**
    - Always
    - Most of the Time
    - Sometimes
    - Rarely
    - Never
12. How often do you seek support from the following?

Family:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Friends:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Individual Therapy:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Religious Organizations:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Social Service Agencies:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Other (specify)_________________:
- Always
- Most of the Time
- Sometimes
- Rarely
- Never

Which support do you use the most?

13. What are 3 important things you hope to get out of being in this group?

1.

2.

3.

Thank you!
READING GUIDE FOR SUPPORT GROUP FACILITATORS

The PTSD Workbook: Simple, Effective Techniques for Overcoming Traumatic Stress Symptoms (Paperback)
by Mary Beth Williams, Soili Poijula

The Relaxation & Stress Reduction Workbook (Paperback)
by Martha Davis, Matthew McKay, Elizabeth Robbins Eshelman

Anxiety and Phobia Workbook (New Harbinger Workbooks) (Paperback)
by Edmund J. Bourne Ph.D.

Healing the Trauma of Domestic Violence: A Workbook for Women (New Harbinger Self-Help Workbook) (Paperback)
by Edward S., Ph.D. Kubany, Mari A. McCaig, Janet R. Laconsay

The Rape Recovery Handbook: Step-By-Step Help for Survivors of Sexual Assault (Paperback)
by Aphrodite, Ph.D. Matsakis

Surviving Childhood Sexual Abuse Workbook: Practical Exercises for Working on Problems Resulting from Childhood Abuse (Paperback)
by Carolyn Ainscough, Kay Toon

Helping Your Child Recover from Sexual Abuse (Paperback)
by Caren Adams, Jennifer Fay, A. G. Fawkes

When Your Child Has Been Molested : A Parents Guide to Healing and Recovery (Paperback)
by Kathryn Brohl, Joyce Case Potter

Allies in Healing: When the Person You Love Was Sexually Abused as a Child (Paperback)
by Laura Davis

by Ellen Bass, Laura Davis

If He is Raped: A Guidebook for Partners, Spouses, Parents and Friends (Paperback)
by Alan W. McEvoy, Jeff D. Brookings, Debbie Rollo

The Body Image Workbook: An 8-Step Program for Learning to Like Your Looks (New Harbinger Workbooks) (Paperback)
by Thomas F. Cash, Ph.D.
Appendix - Sample Tools

It Happened to Me: A Teen’s Guide to Overcoming Sexual Abuse
(Paperback)
by William Lee Carter


Jensen, Marla


REFERENCES

Alternatives to Violence of the Palouse – Excerpts of Support Group Materials and Outlines. Community Sexual Assault Program – POB 37, Pullman, WA 99163 509-332-0552


Providence Intervention Center for Assault and Abuse – Excerpts of Psychoeducational Support Group Materials 425-388-7408