

Similar Gifts in Various Shiny Packages: Common Elements of Effective Group Interventions for Promoting Mental Health



Stevie N. Grassetti, Ph.D.

West Chester University of Pennsylvania
University of Delaware

MTSS Conference
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2:15-3:30



INTRODUCTION

Stevie Grasseti, Ph.D.

- Assistant Professor, Psychology
- West Chester University of Pennsylvania
- Clinical Scientist, Center for Training, Evaluation, & Community Collaboration
- University of Delaware

Licensed, Clinical Psychologist

- Researcher:
 - Program evaluation (in schools and other community settings)
 - Trauma-focused group therapy in DE schools
 - Bullying prevention programs in DE schools
 - Majority of my school-based work focuses on youth from K-9
- Clinician:
 - Youth and families
 - Trauma, behavior difficulties, anxiety, depression
 - Underserved populations
 - Supervision, Consultation



Learning Objectives

Upon successful completion of this session, attendees will be able to:

- Explain a cognitive behavioral conceptualization of mental health difficulties
- Articulate a rationale for emotion-focused work and describe strategies that emotion identification, regulation, and tolerance
- Describe three specific cognitive distortions and identify strategies for challenging these distortions
- Summarize the necessary factors for promoting therapeutic relationships individually and in therapy groups
- Assess how cognitive behavioral strategies are already embedded in existing supports

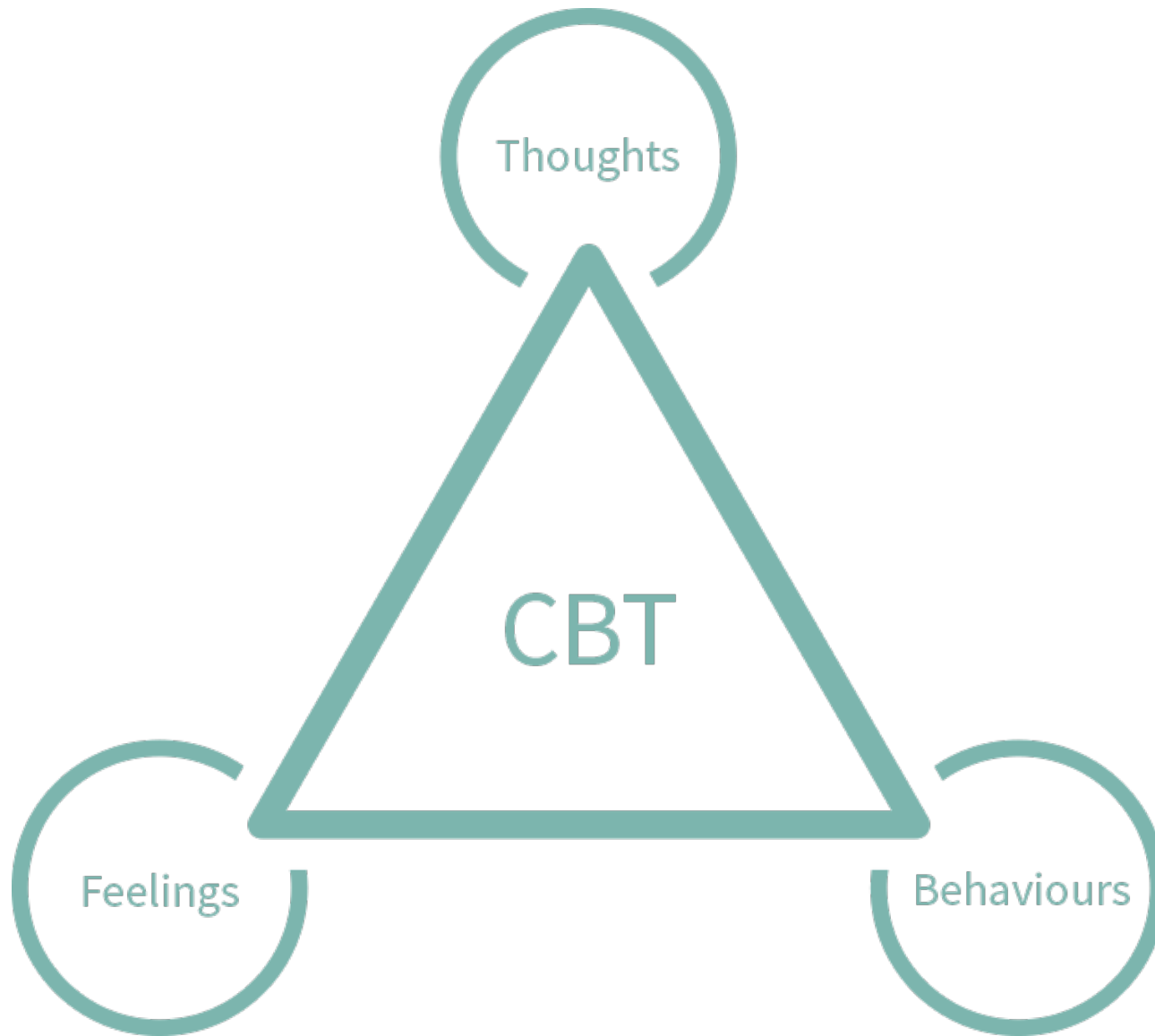
Session Outline

- Introduction
- Cognitive Behavioral Therapy Framework
- Strategies targeting emotions
- Strategies targeting thoughts
- The therapeutic alliance
- Strategies for facilitating treatment in the group format

Multiple shiny packages



CBT Conceptualization



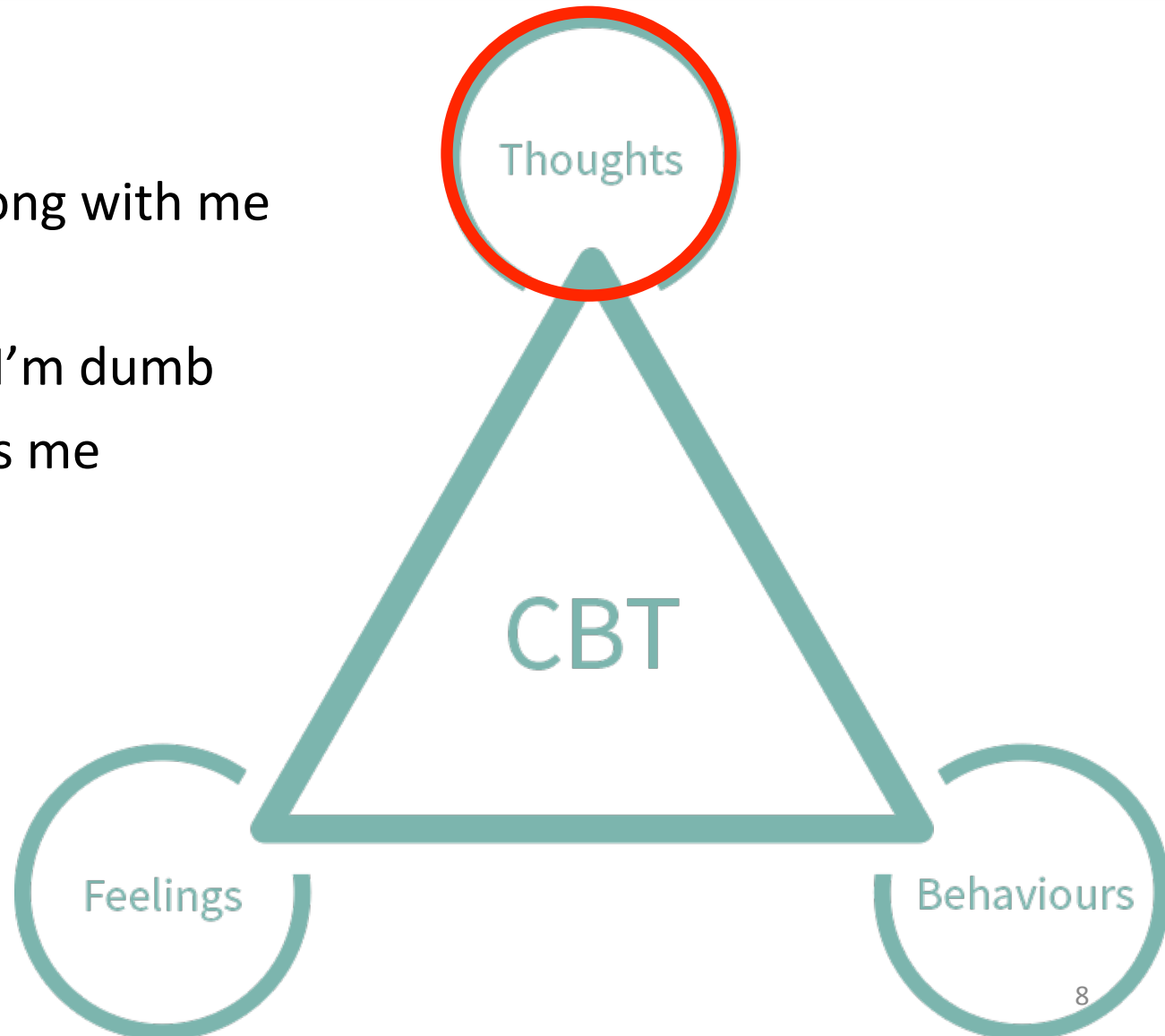
Example of Triangle in Action



CBT Conceptualization & Intervention Model

CBT: Thoughts

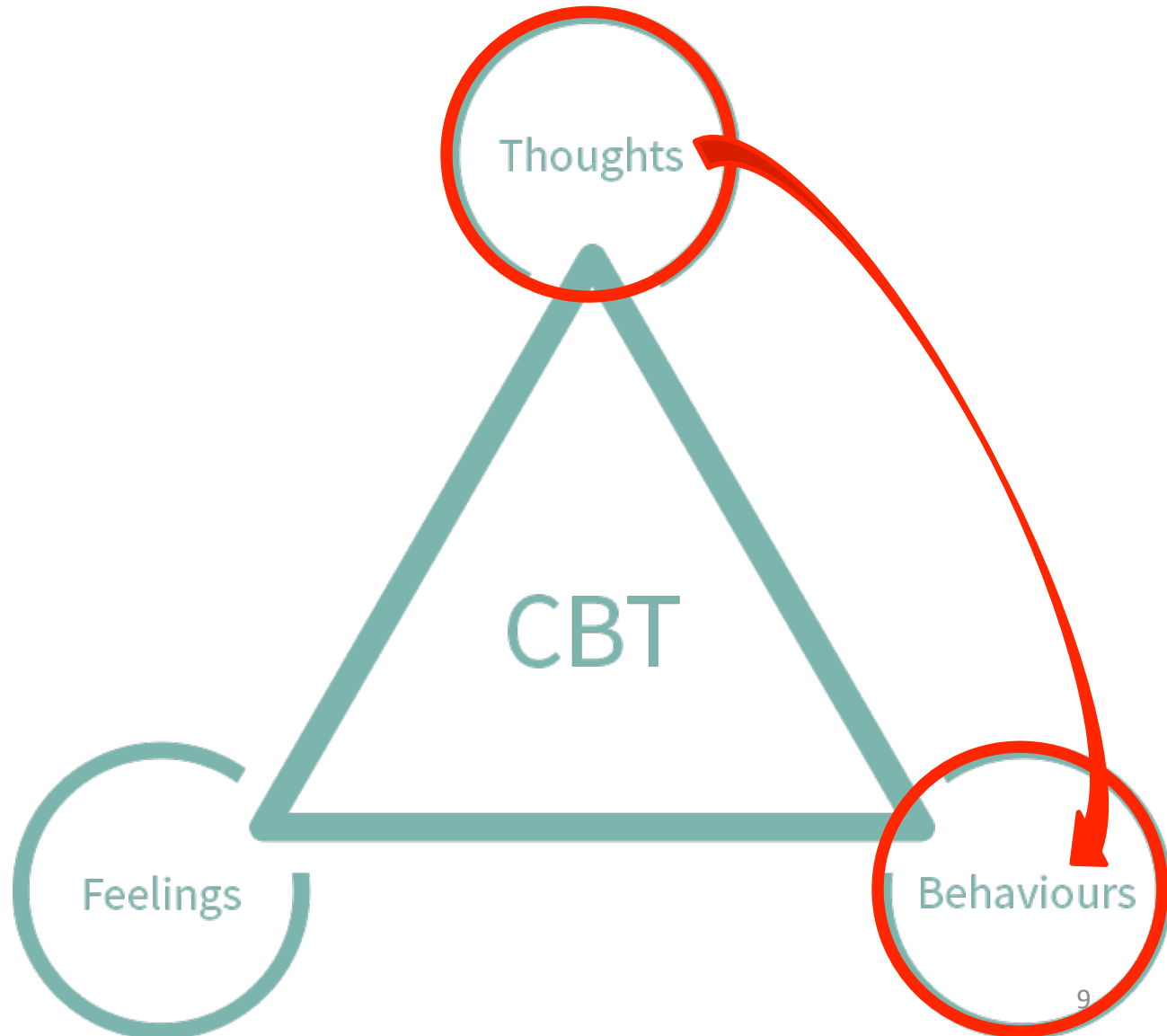
- Something is wrong with me
- I'm not smart
- Everyone thinks I'm dumb
- My teacher hates me



CBT Conceptualization & Intervention Model

CBT: Behaviors

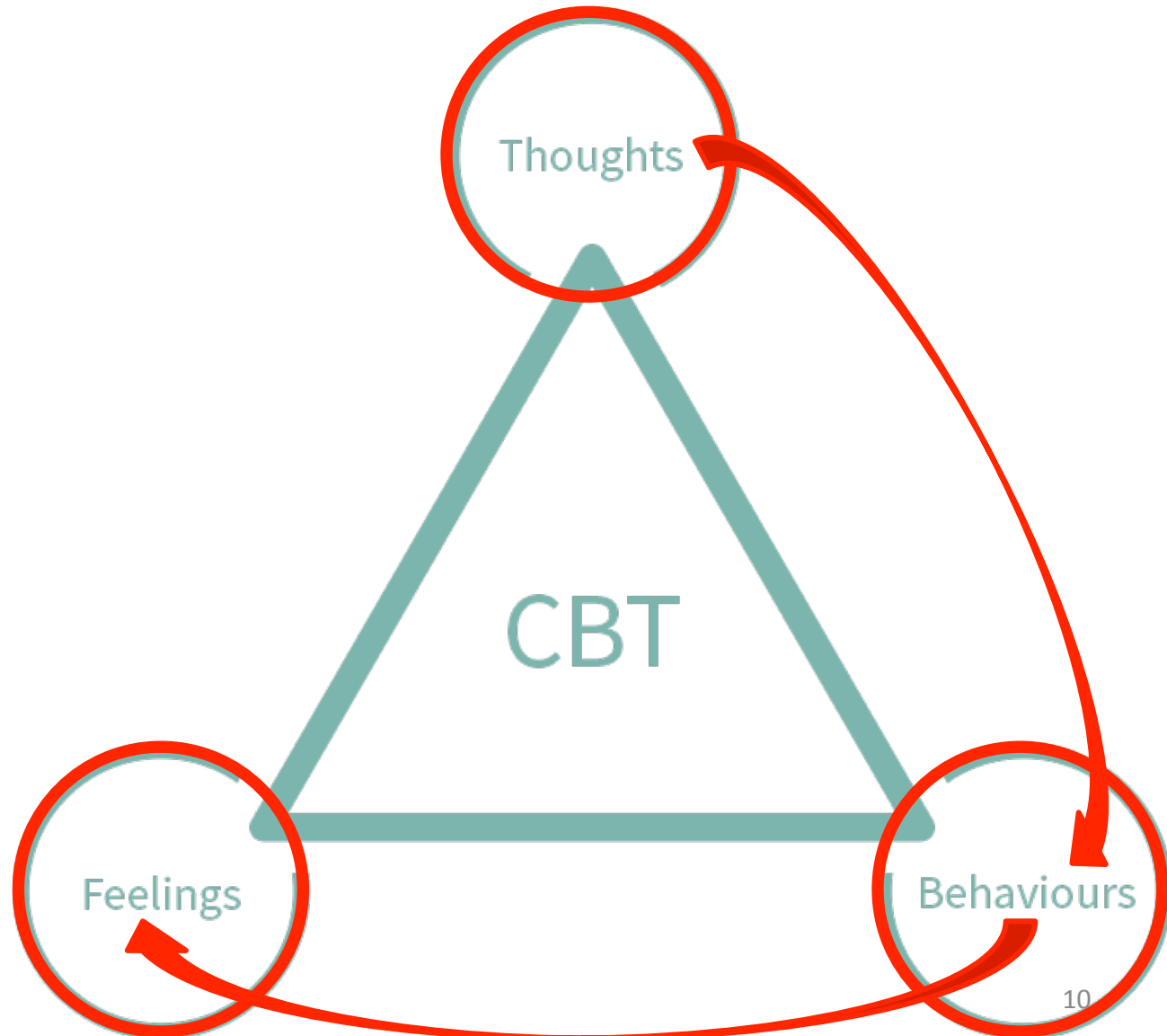
- Withdrawal
- Refusal to try
- Acting out



CBT Conceptualization & Intervention Model

CBT: Feelings

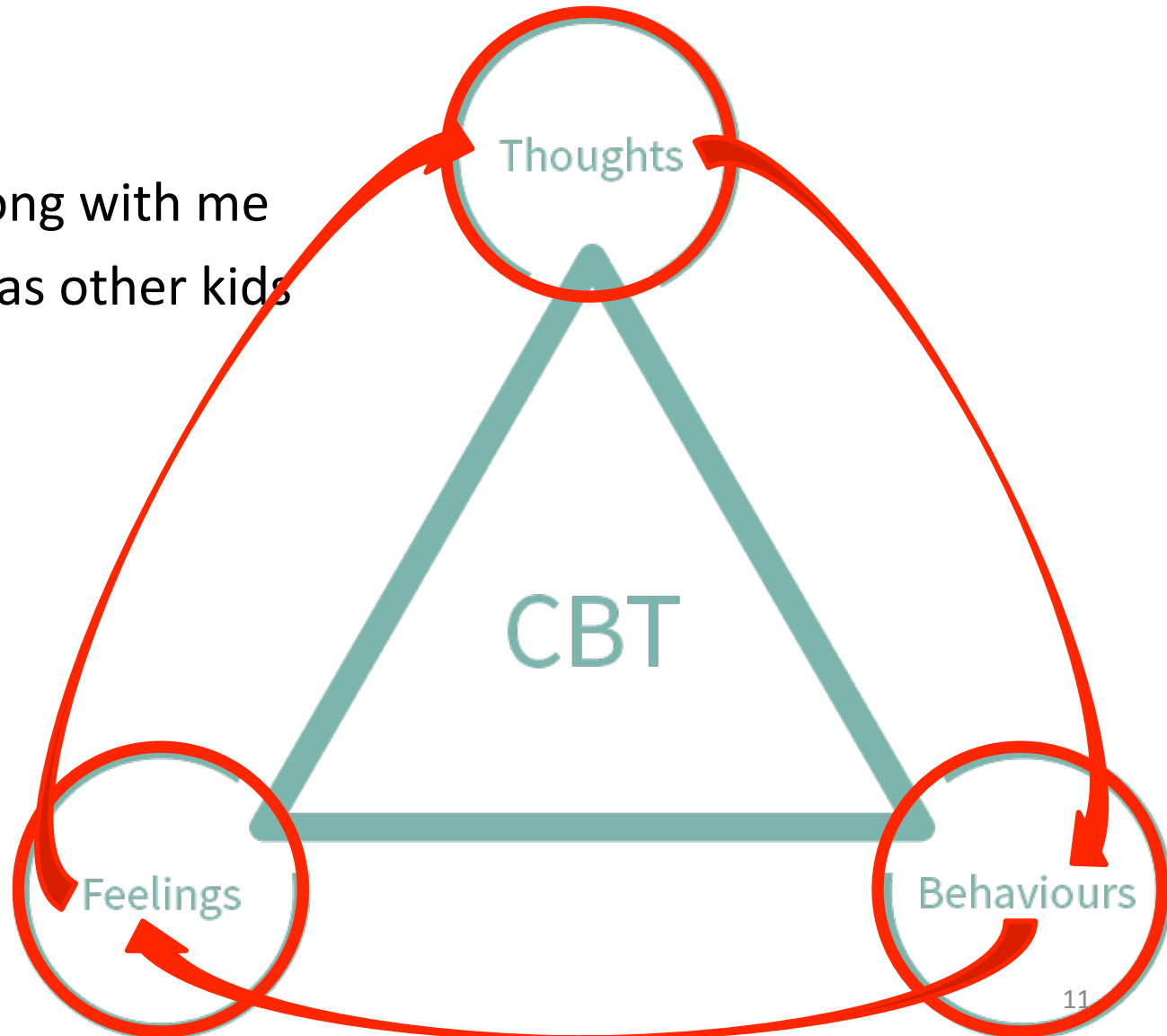
- Sadness
- Isolation
- Depression
- Anxiety



CBT Conceptualization & Intervention Model

CBT: Thoughts

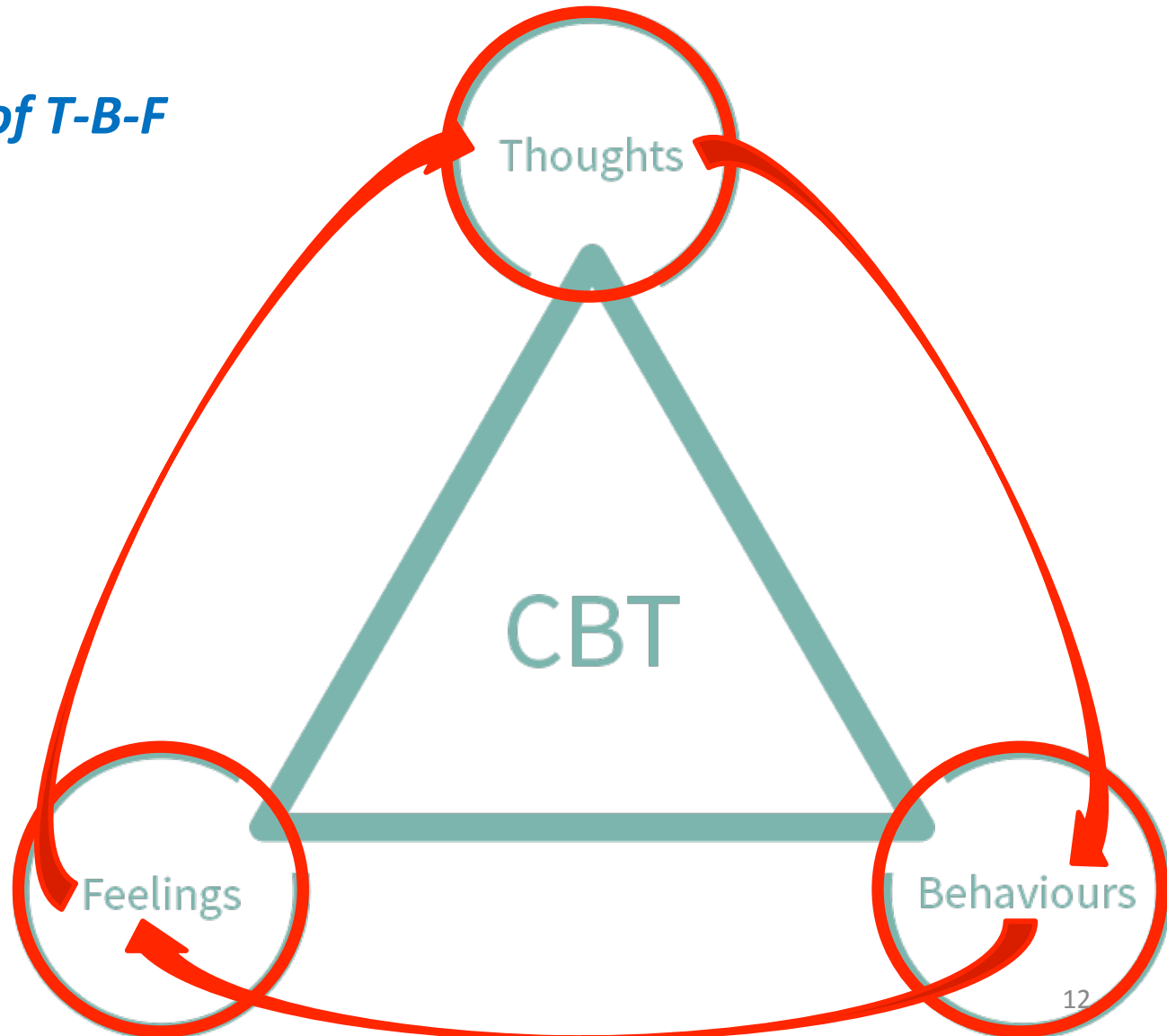
- Something is wrong with me
- I'm not as smart as other kids
- I can't cope



CBT Conceptualization & Intervention Model

CYCLICAL NATURE of T-B-F

- Feedback loop



CBT Conceptualization & Intervention Model

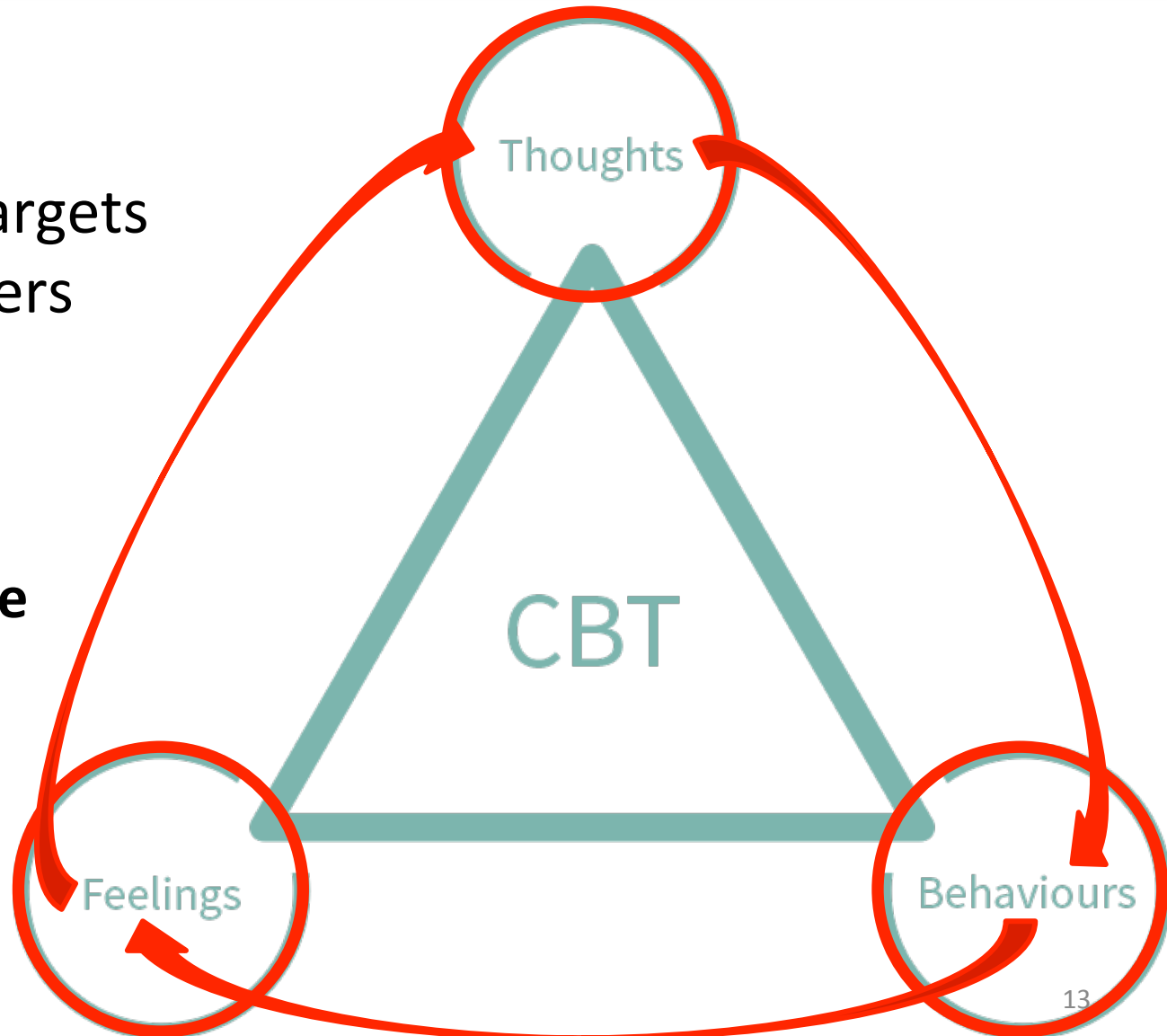
CBT: Focus

- Intervention targets each of 3 corners

Skill Building

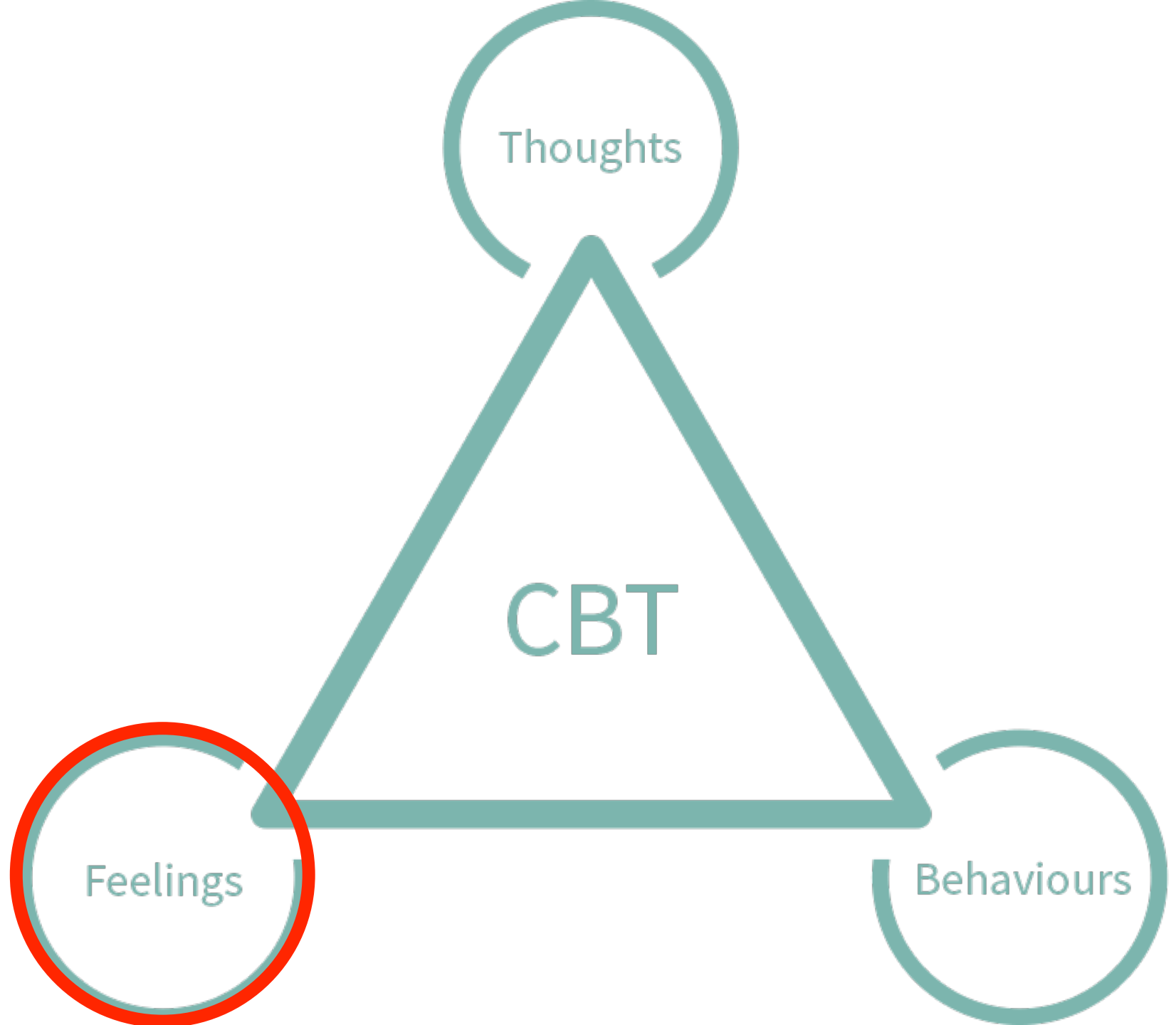
Practice

Planning for future



Kernels versus Ears

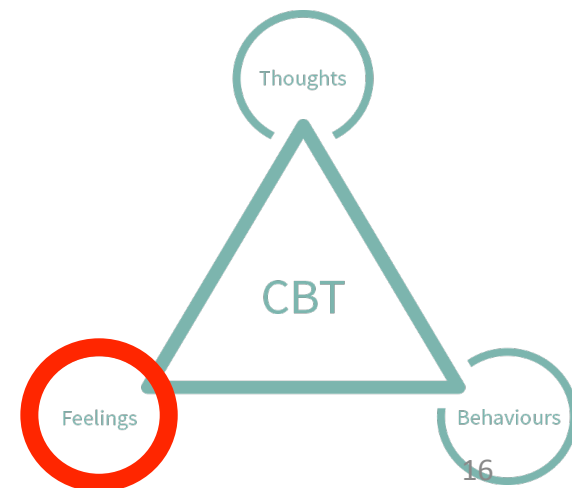




CBT Rationale: Focus on Feelings

Kids experience a range of complex emotions that color every interaction. CBT-intervention activities focus on:

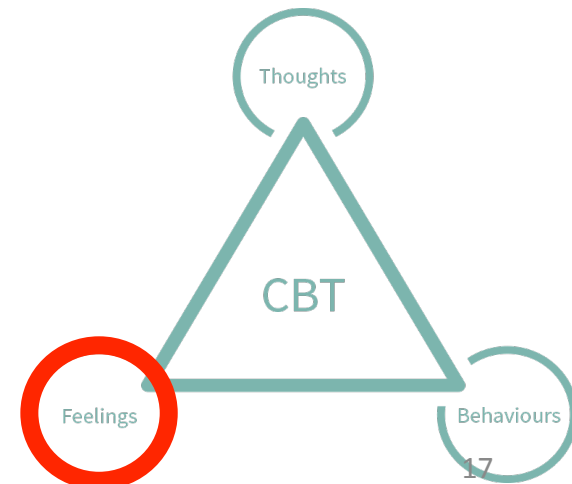
- 1. Identification and Awareness of Feelings**
- 2. Tolerating Feelings (Distress Tolerance)**
- 3. Emotion Regulation**



Building the Foundation for Emotion Work

Emotion Vocabulary Exercise:

- Break up into small groups (2-4)
- Please list as many emotion words as you can.



Building the Foundation for Emotion Work

Emotional Intelligence (EI):

- Ability to understand and manage your own emotions, and those of the people around you.
- People high on EI know what they're feeling, what their emotions mean, and how these emotions can affect other people.
- It's very difficult to regulate emotions if you don't know how to label them!

Identifying Emotions

Reading the Mind in the Eyes

This test will investigate your ability to read emotion from the eyes. You will be shown a pair of eyes with four emotion labels around it. You are to select which one of the four emotion words best describes the emotion that the eyes are showing. Please provide one best guess for each item.

What emotion are the eyes showing?



JEALOUS --- ARROGANT --- HATEFUL -- PANICKED

What emotion are the eyes showing?



JEALOUS --- ARROGANT --- HATEFUL -- **PANICKED**

What emotion are the eyes showing?



PLAYFUL --- COMFORTING --- IRRITATED --- BORED

What emotion are the eyes showing?



PLAYFUL --- COMFORTING --- IRRITATED --- BORED

What emotion are the eyes showing?



TERRIFIED --- UPSET --- ARROGANT --- ANOYED

What emotion are the eyes showing?



TERRIFIED --- **UPSET** --- ARROGANT --- ANOYED

Activity Debrief

How did you do?

Activity Debrief

How did you do?

Which emotions do you think we are able to most quickly identify?

Activity Debrief

How did you do?

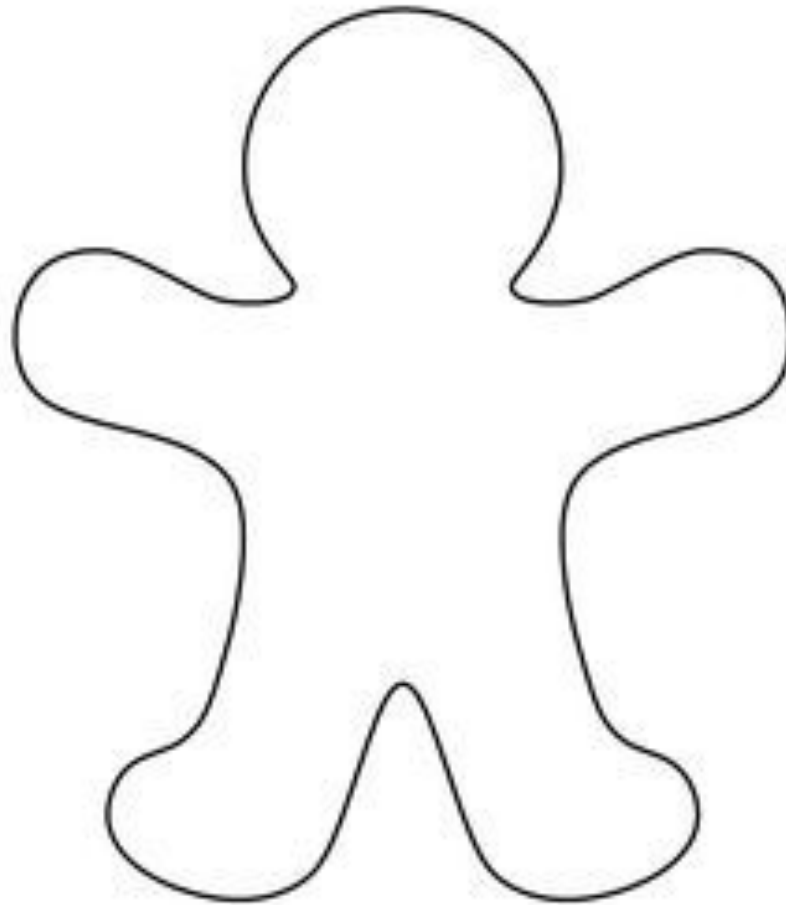
Which emotions do you think we are able to most quickly identify?

What are some factors that may contribute to errors?

Emotions Charades

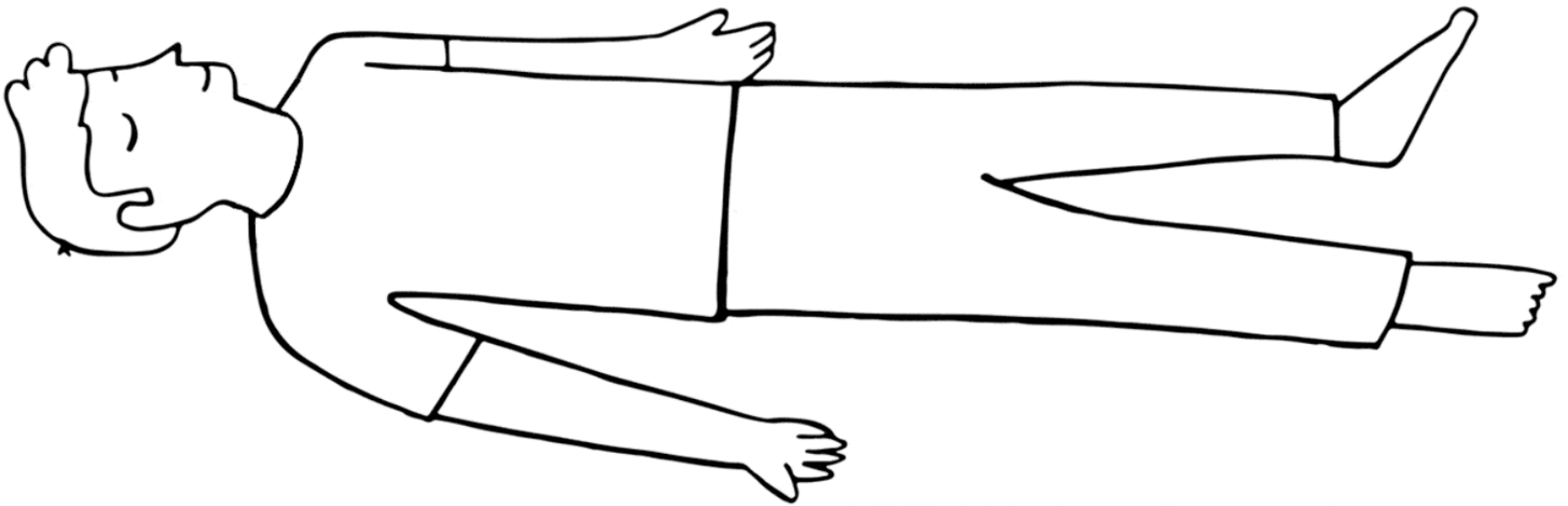
- **60 second speed charades**
 - Actor (No words)!
 - Checker (must be the EXACT emotion word)
 - 3 passes permitted
- **Rock-Paper-Scissors for choice of who goes first**

BODY-FEELINGS and SOMATIC CUES



BODY-FEELINGS and SOMATIC CUES

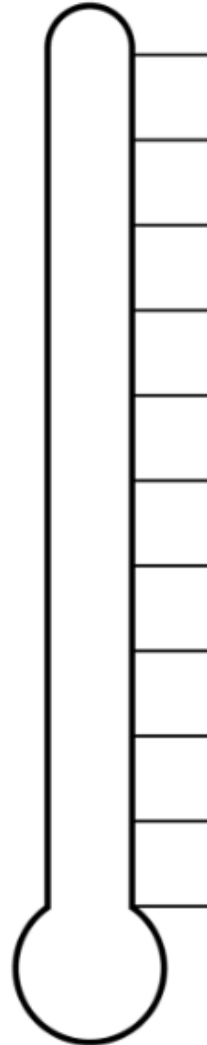
BODY SCAN MEDITATION



Recognizing Escalating Emotions



Recognizing Changes in Emotions : Feeling Thermometer

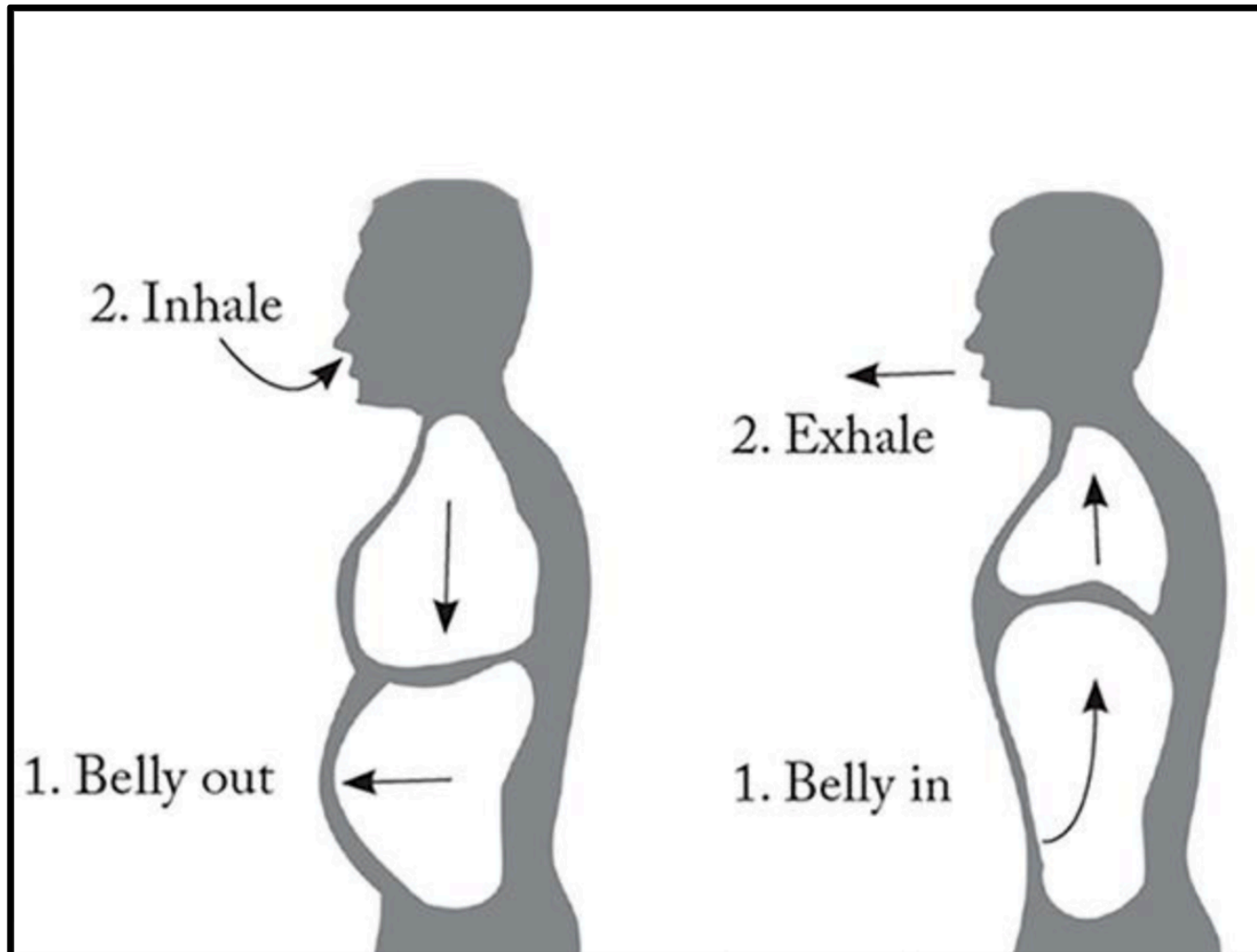


Emotion Modulation: Feeling Thermometer



Modulating Body Feelings (Affect Modulation)

Diaphragmatic “Belly” Breathing



Modulating Body Feelings (Affect Modulation)



Modulating Body Feelings

Progressive Muscle Relaxation



RELAXATION ROUTINE

1. SIT
ON A CHAIR...



2. "SCRUNCH"
UP YOUR
FACE...



THEN...
RELAX
IT...

3. TENSE
YOUR
ARMS...



THEN...
RELAX
THEM

4. TENSE UP YOUR
SHOULDERS
AND CHEST...

THEN...
RELAX
THEM



5. TENSE UP
YOUR LEGS...



...THEN RELAX!

6. BREATHE
IN
RELAXATION...

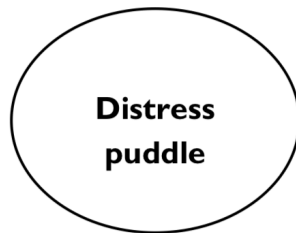


...BREATHE OUT
TENSION

DISTRESS TOLERANCE

Distress Tolerance: Your actual or perceived ability to stand up to emotional distress – Surviving an emotional incident without making it worse.

- We often (habitually) fight against or attempt to push away unpleasant emotions.
- This can add additional effort/strain on top of the already experienced unpleasant emotion.



DISTRESS TOLERANCE

Surfing Our Emotions

- Consider: nothing lasts forever!
- Unpleasant emotions/sensations rise and fall naturally
- You can ride sensations and emotions, that are like a wave that goes up and eventually comes down.

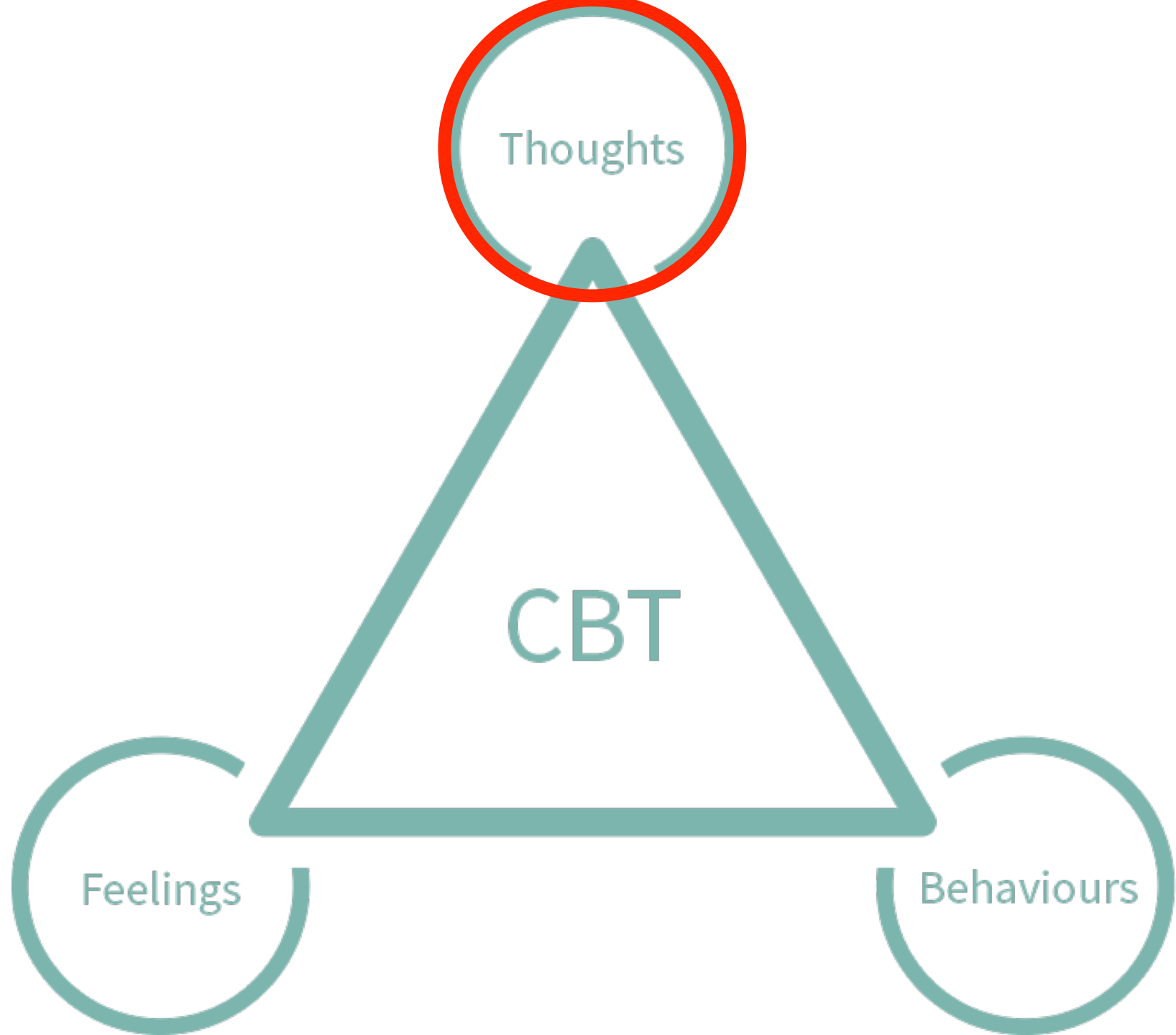


DISTRESS TOLERANCE



Emotion Surfing

1. Recognize Unpleasantness
2. Give it a label
3. Notice it in body
4. Allow it to Be!
5. Inhale and Exhale
6. Notice its intensity
7. Repeat Steps 5-6





Counting Thoughts Exercise

WHAT COMES TO MIND...?

Shout out whatever comes into your mind as I read these statements....

WHAT COMES TO MIND...?

Shout out whatever comes into your mind as I read these statements....

JOHN WAS ON HIS WAY TO SCHOOL

WHAT COMES TO MIND...?

Shout out whatever comes into your mind as I read these statements....

JOHN WAS ON HIS WAY TO SCHOOL

HE WAS WORRIED ABOUT THE MATH LESSON

WHAT COMES TO MIND...?

Shout out whatever comes into your mind as I read these statements....

JOHN WAS ON HIS WAY TO SCHOOL

HE WAS WORRIED ABOUT THE MATH LESSON

HE WAS NOT SURE HE COULD CONTROL THE
CLASS AGAIN TODAY

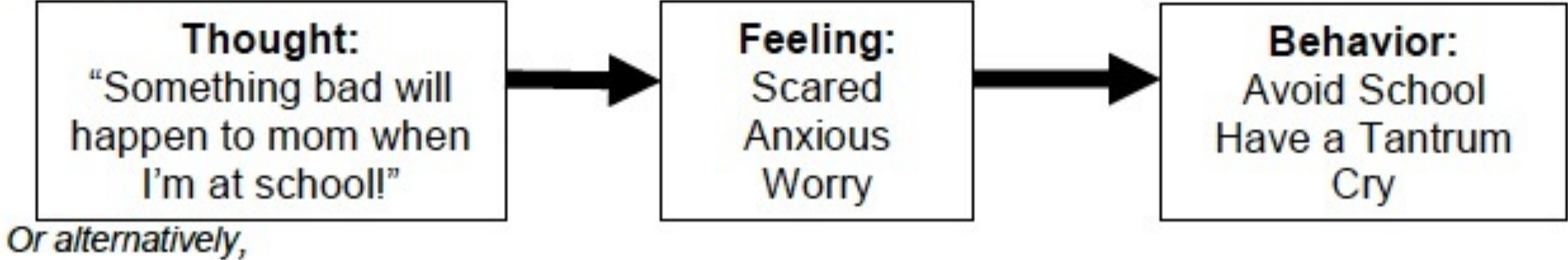
WHAT COMES TO MIND...?

Shout out whatever comes into your mind as I read these statements....

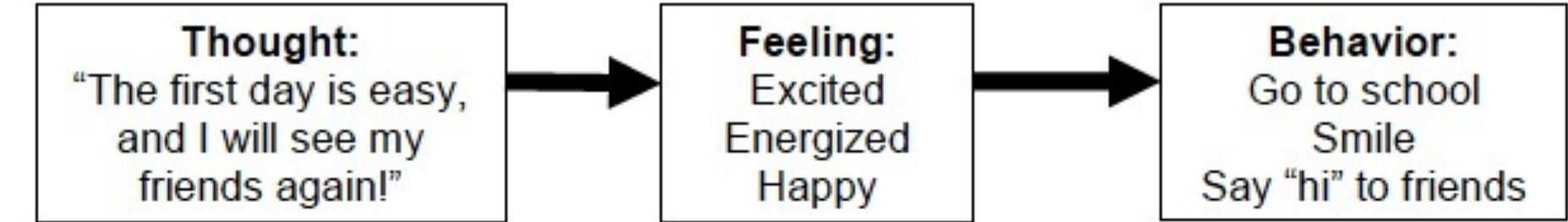
JOHN WAS ON HIS WAY TO SCHOOL
HE WAS WORRIED ABOUT THE MATH LESSON
HE WAS NOT SURE HE COULD CONTROL THE
CLASS AGAIN TODAY
IT WAS NOT PART OF A JANITOR'S DUTY



ANXIOUS THOUGHTS



HELPFUL THOUGHTS



AUTOMATIC THOUGHT QUESTIONNAIRE

What are your own “greatest hits”?

1. I feel like I'm up against the world
2. I'm no good
3. Why can't I ever succeed?
4. I've let people down
5. I'm so weak
6. I'm so disappointed in myself
7. I can't get started
8. I'm a loser
9. I hate myself
10. I'm worthless
11. What's the matter with me?
12. I'm a failure
13. I feel so helpless
14. There must be something wrong with me.



Mental Filter

When we notice only what the filter wants or allows us to notice, and we dismiss anything that doesn't 'fit'. Like looking through dark blinkers or 'gloomy specs', or only catching the negative stuff in our 'kitchen strainers' whilst anything more positive or realistic is dismissed



Judgements

Making evaluations or judgements about events, ourselves, others, or the world, rather than describing what we actually see and have evidence for

Mind-Reading

Assuming we know what others are thinking (usually about us)



Emotional Reasoning

I feel bad so it must be bad! I feel anxious, so I must be in danger



Prediction

Believing we know what's going to happen in the future



Mountains and Molehills

Exaggerating the risk of danger, or the negatives. Minimising the odds of how things are most likely to turn out, or minimising positives

Compare and despair

Seeing only the good and positive aspects in others, and comparing ourselves negatively against them



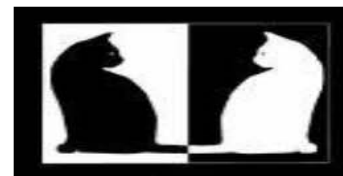
Catastrophising

Imagining and believing that the worst possible thing will happen



Critical self

Putting ourselves down, self-criticism, blaming ourselves for events or situations that are not (totally) our responsibility

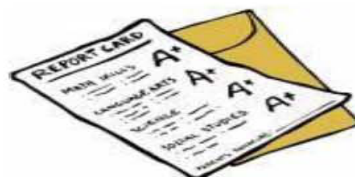


Black and white thinking

Believing that something or someone can be only good or bad, right or wrong, rather than anything in-between or 'shades of grey'

Shoulds and musts

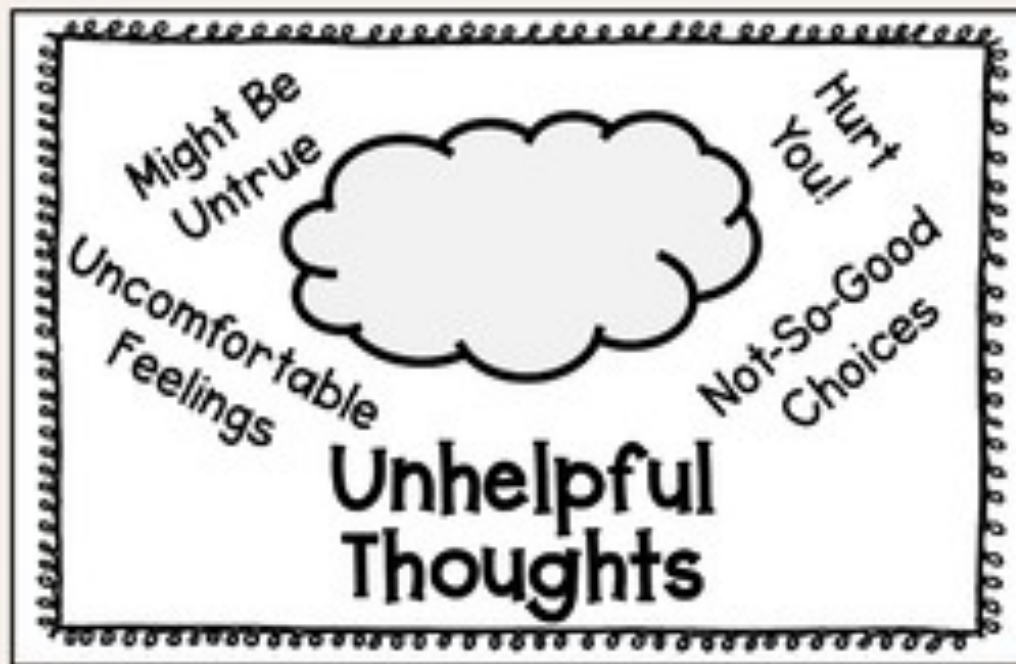
Thinking or saying 'I should' (or shouldn't) and 'I must' puts pressure on ourselves, and sets up unrealistic expectations



Memories

Current situations and events can trigger upsetting memories, leading us to believe that the danger is here and now, rather than in the past, causing us distress right now



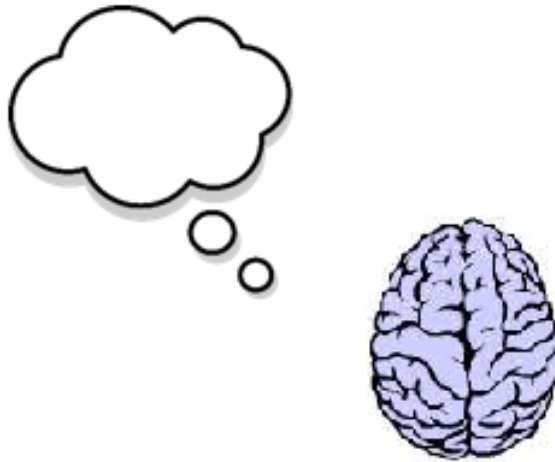


We can't stop thoughts...But, *we can challenge them!*

A few examples of how to challenge:

- Examine the evidence
- Experimental technique
- Best-friend technique
- Cost-benefit analysis

Before Thought Challenging



Inflexible, absolute thinking

After Thought Challenging



Inflexible, absolute thinking

Flexible, responsive thinking

Promoting Therapeutic Relationships

The relationship is necessary for the therapeutic “gift” to be received



Therapeutic Alliance

Predicts outcome above and beyond
clinical approaches & outcome measures
(Ardito & Rabellino, 2011)

1. Bond: Relationship
2. Goals: hoped outcome
3. Tasks: how to move toward goals

Children are different. (DiGiuseppe , Linscott, & Jilton, 1996)

Group work

Benefits:

More students treated with fewer resources

Reduces feelings of isolation, stigma

Sustainable Gains

A more complicated therapeutic bond:

1. Self to therapist
2. Group to therapist
3. Self-to-members
4. Other-to-therapist

Tips for promoting group bond

Build Trust

- Explicit discussion of privacy
- Privacy agreement

Find common experiences

Facilitate positive experiences between members

Facilitate sharing

Goals

Goals

1. Co-constructed
2. Similar, but don't need to be the same
3. Shared

Sharing goals helps with commitment to goals

Tasks: Leveraging the group format to move toward goals

Group “rules”

“Best friend” technique in action

Ask how others solve problems



Thank you!
Questions?

CONTACT INFO

Additional Questions?
Please contact me, I'd love
to help.

Stevie N Grassetti,
Ph.D.



SGrassetti@wcupa.edu

Supplemental Slides