Individual Group Proposal: Coping with PTSD for Veterans

Rylee L'Italien

University of Maine Farmington

REH 305

Dr. Jewel Jones

12/11/16

Abstract

Veterans returning to civilian life face many obstacles and challenges that may hinder a smooth transition. This paper will focus on the specific issue of Post Traumatic Stress Disorder in veterans and developing coping skills to live a successful and meaningful life after combat. This issue will be looked at through the lens of group therapy and how its specific techniques can benefit veterans with PTSD. More specifically, a group will be developed to establish an environment of support, while touching upon purpose of group, group goals, pre-group screening and preparation, techniques, ethical considerations, issues of diversity, evaluation, and how to help members translate what they learned from group into the community.

Group Proposal for Veterans with PTSD

Group therapy settings have many benefits and positive outcomes. A success group offers its members a supportive environment, a place of belonging, and a place to build relationships out of connections and commonalities, all while working on important issues. For veterans dealing with Post Traumatic Stress Disorder, group therapy would serve as a place to gain insight and coping skills and most importantly, gaining a support system that they might not have elsewhere of people who can relate. As the paper will discuss, this group environment will provide skills that can be translated from the group environment, to the veterans every day life in home and community.

Purpose and Rationale

With the ongoing war in Afghanistan and Iraq, it is known that more and more soldiers are returning to civilian life with difficulties, especially after seeing combat. Nearly one third of veterans returning home from Afghanistan and Iraq have been diagnosed with PTSD or other anxiety disorders (Barrera, Hernandez, Graham, Teng, 2014). This data suggests that there needs to be efficient and accessible resources for veterans with these mental health needs. Although the Department of Veterans Affairs, the VA, offers a wide range of resources and information, the center is not always accessible to every veteran. A support group that is smaller in size, ran by a licensed counselor, and available more widespread across regions, would potentially have more impact. It would allow for more support and guarantee of access. The purpose of the group, Coping with PTSD for Veterans, is to acquire coping skills to create a smoother transition into civilian life and to live a fulfilled, successful life post-war.

Group Goals

Group goals serve to guide each group session and can factor into group evaluation. The goals for Coping with PTSD for Veterans are: Develop skills to positively cope with challenges and difficulties transitioning to civilian life, connect with and create supportive relationships with other group members, process and gain insight on living a successful and fulfilled life with PTSD.

Planning for Screening

Screening is important to this particular group because the population is quite specific. This presents another benefit to this group as well, seeing as though the VA might not have the means to screen its members before the start of the group. To plan for screening, the leader should conduct interviews with each potential member to get a sense of identity and functioning. Although it may seem obvious, it is important that each member is in fact a veteran. If not, veterans may feel like their experience in combat is much different and unrelatable than other traumatic experiences. It provides a sense of cohesion and camaraderie. A screening interview would also determine if the member is functioning at level where the group experience would be useful, rather than retraumatizing (Jacobs, Schimmel, Masson, Harvill, 2015). The interview screening process will allow for the leader to determine the variety of members, creating diverse and rich group environment. By selecting members of different ages, combat experience, and insight, the members can offer encouragement and support to others.

The leader must also determine if the issue of substance use will be addressed within the group and use this to screen its potential members. According to Miller, Reardon, Wolf, Prince, and Hein, veterans diagnosed with PTSD are twice as likely to abuse alcohol compared to those without the diagnosis (2013). The leader must take into account when screening if there is a dual diagnosis within the potential member before making any decisions.

Pre-Group Preparation

Before the group begins, there needs to be substantial preparation on account of the leader. Because the topic is intense and heavy, the leader must assume responsibility in becoming adequately educated on the subject of PTSD, especially within veterans. The leader should be a licensed counselor, but trained to understand the disorder to ensure the members will be subjected to an effective group.

Also, the group needs to be well advertised to ensure that veterans will know that this group is available. The leader should assume this responsibility and place informational sheets in targeted areas. More than 68% of veterans with mental health needs receive their services from the VA (Crawford, Elbogen, Wagner, Kudler, Calhoun, Brancu, Straits, 2015), making this a great place to get the word out to potential members.

Conceptual Framework and Techniques

Coping with PTSD for Veterans will be a small support group, comprised of 6-10 members, meeting for 10 sessions with the potential to extend into an ongoing group. Each session will run for one hour.

The first session is the most important as it will set the tone for the remainder of the group. The leader should use this time for introduction activities and/or ice breaker activities to begin the formation of a supportive, connected environment. To support this, the tone of the leader should be welcoming, warm, and friendly to all members, allowing them to feel comfortable from the beginning. The first session should also include creating a list of "rules" that should be established with the cooperation of all members, not just the leader. With their input, it will create a sense that this is their group, not just a group they attend.

As far as each session, the leader should plan accordingly ahead of time. With the guidance of the overall group goals, each session should be directed by specific goals for that time. These specific goals will help keep the group focused and ensure that the time is being spent effectively.

In terms of techniques, the leader must be skilled in active listening and drawing out members. The group will be most effective with adequate discussion and by active listening, the leader can pick up nonverbal cues and gestures that will help influence and guide discussion.

Drawing out members can be a difficult but effective skill. Although it is crucial not to "spotlight" any member, by encouraging members to speak allows for a deepening of the focus and more engaging discussion.

The leader will also want to plan activities and exercises for the group and use them at their discretion. One exercise technique that may be beneficial is the use of psychodrama. This would allow for members to become engaged within one another, step outside of their comfort zone, and see through different perspectives. Group members can learn about their own reactions

by being apart of other's process and can offer assistance to peers and help each other overcome conflict (Hinkle, 2008). This is a unique and engaging technique to get discussion going.

Ethical Considerations

The most important ethical consideration for the leader, as well as other members of the group, is confidentiality. What is shared in group sessions and even who attends, is to not be discussed outside of the group. This ensures the confidence of all members to share and feel comfortable, as well as the validity of the group as a whole.

Another consideration for the leader in particular is the ethical consideration of "do no harm." The topic of PTSD and veteran experience can get intense and heavy. It is the responsibility of the leader to halt discussion or even refer members elsewhere if the topic leads into something that is not of familiarity with the leader. In addition, it is up to the leader to be as well educated as possible on PTSD to be ethically suited to run this group. An uninformed leader may unintentionally do harm by giving false information or hurtful advice.

Issues of Diversity

A diverse set of members has the potential to create an interesting and engaging group, but it is important to keep in mind how diversity can have its effects. A group can only be effective if members feel comfortable, safe, and welcomed in the group environment. The leader must be informed of the differences of the group members to understand different perspectives, while also being sensitive everyone's needs. In addition, the leader must be trained and educated on how to handle issues of diversity if they arise in the group setting. This may include diffusing

INDIVIDUAL GROUP PROPOSAL

8

certain situations between group members of different viewpoints, or even asking a group member to leave if their behavior is harmful to the rest of the group. The leader must also keep in mind cultural considerations, which can be acknowledged through the initial process of screening.

Strategies for Evaluation

Evaluation is important in order to make changes and adapt the group if need be to ensure that it is most effective. The leader should do a short, informal evaluation at the end of every session, asking reflective questions such as: Were the goals accomplished for this session? What is something each member got out of this session? Did I stay on task as a leader? These short and simple questions provide quick feedback to improve future sessions. A more formal evaluation can be given at the end of the whole group, preferably at the last session. Due to the nature of this support group, the leader would want to focus the evaluation on how the group impact the lives of the members. The evaluation can be a written one, passed into the leader before exiting the group asking questions such as: Do you feel as though the group goals were accomplished? What is one thing you will take away from the group? Was this group effective? What is something you would change about the group? What is one thing from group that stood out to you? Etc. Feedback is always useful for the leader to improve and can aid in a self evaluation as well.

Strategies for Translating Learning from Group to Community

9

This support group's main focus and goal is for it's members to acquire skills in order to fulfill and achieve a success life after combat. The leader must work to ensure all activities and discussions are focused on providing meaningful skills and tools. Leaders can also be sure members are connecting group to home life/community by summarizing each session and asking members what one thing they can take away from this session to their home would be. In order to achieve this, the leader must stay on task and work towards always accomplishing desired group goals.

By creating a trusting, supportive, and comfortable environment, members have the opportunity to form meaningful relationships with one another for added guidance and support.

These relationships can surpass the group setting and carry out into their everyday lives, being a useful tool in itself.

References

- Crawford, E. F., Elbogen, E. B., Wagner, H. R., Kudler, H., Calhoun, P. S., Brancu, M., & Straits-Troster, K. A. (2015). Surveying Treatment Preferences in U.S. Iraq-Afghanistan Veterans With PTSD Symptoms: A Step Toward Veteran-Centered Care. *Journal Of Traumatic Stress*, 28(2), 118-126. doi:10.1002/jts.21993
- Hinkle, M. G. (2008). Psychodrama: A Creative Approach for Addressing Parallel Process in Group Supervision. *Journal Of Creativity In Mental Health*, *3*(4), 401-415. doi:10.1080/15401380802527464
- Jacobs, Edward E., Christine J. Schimmel, Robert L. Masson, and Riley L. Harvill. *Group Counseling: Strategies and Skills*. Boston, MA: Cengage Learning, 2016. Print.
- Miller, M. W., Reardon, A. F., Wolf, E. J., Prince, L. B., & Hein, C. L. (2013). Alcohol and Drug Abuse Among U.S. Veterans: Comparing Associations With Intimate Partner Substance Abuse and Veteran Psychopathology. *Journal Of Traumatic Stress*, 26(1), 71-76. doi:10.1002/jts.21773
- Mott, J., Barrera, T., Hernandez, C., Graham, D., & Teng, E. (2014). Rates and Predictors of Referral for Individual Psychotherapy, Group Psychotherapy, and Medications among Iraq and Afghanistan Veterans with PTSD. *Journal Of Behavioral Health Services & Research*, 41(2), 99-109. doi:10.1007/s11414-013-9352-0