

Psychoeducation: As an Aid in Navigating the Impact of COVID 19-

Session 1: Naming the experiences & beginning to cope

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Agenda for Opening Module

- Introduce ourselves & our audience
 - Attending to/considering needs of participants
- Goals for this module on Psychoeducation
 - Introducing the model & modelling the content
 - What is psychoeducation?
 - Principles & theory
 - Why psychoeducation?
 - Why now?
 - Key elements
 - Structure
 - Content
- Review goals CSSW Covid19 Action Team
- Embedded session on stress & coping
- Q & A throughout

Topics of Focus: CSSW COVID19 Action Team Psychoeducation Series

- Stress & Coping (this module)
- Fear, stigma, discrimination
 - Professors Amy Kapadia & Samantha Winter
- Interpersonal violence
 - Professor Louisa Gilbert
- Uncertainty, exhaustion, helplessness, sleep interruption
 - Professor Carmela Alcántara
- Social support
 - Professor Susan Witte
- Many forms of loss & grief
 - Professor Kathy Shear
- Recognition & naming
- Planning, application, outreach, advocacy
- Additional Covid Action Team efforts

WHAT ARE WE FACING?

Social & Structural Challenges

- Exponential illness & mortality rates
- Rippling economic devastation
 - Disproportionate impact on communities of color
 - Exploding unemployment
 - Struggle for survival
 - Economic & food insecurity
- Social distancing as privilege
 - Crowding/noise/multiple demands of parenting, teaching & maintaining order
 - Lack of/no resources or privilege to work or study remotely
- Fear, anxiety & loss across multiple systems & levels
- Increased frustration, interpersonal violence (IPV) & conflict
- Ongoing struggle between prioritizing public & economic health
- Inability to or uneven access to PPE (masks, hand sanitizer, soap) etc.
- Stigma & blaming
- Inconsistent & changing communication & messaging

First steps to counter this...

- Share resources, skills, experience, knowledge & ideas *without* perpetuating relationships based on hierarchical power.
- "Everyone has something to teach and something to share. And we all need assistance at times. We seek to acknowledge, challenge and subvert perceived and actual power imbalances, and use any privileges we have—including access to material resources, freedom of movement, skills, knowledge, experience, and decision-making influence— to support people’s self-determination and survival in crisis and their long-term resilience afterwards, ultimately bridging the gulf between ourselves and “others”.
- <https://mutualaid disasterrelief.org/guiding-principles/>

What is psychoeducation??

How does it differ from education??

Psychoeducation

- Provides collaborative opportunity for participants & facilitators to exchange knowledge & learn together about an area of concern
- Creates synergy -- educational & psychotherapeutic interventions
 - Remove barriers to learning
 - Promotes transformative learning
- Evidence-based/evidence-informed
- Principle based
- Typically follows a guide or manual
- Identifies practical strategies for coping in face of challenge

Critical Components

- Present-focused
- Flexible scheduling
- Strengths-based
- Co-learning approach

Theoretical Framework

- Range of complementary theories & models related to education & clinical practice
 - ecological systems theory
 - trauma & recovery models
 - narrative interventions
 - bearing witness
 - group theory
 - social support
 - social learning theory
 - cognitive behavioral theory
 - skills based (i.e. problem solving/planning)
 - motivational interviewing
 - active & reflective listening

Psychoeducation Principles

- Knowledge as power*
- Clear communication
- Well-being in the face of trauma or stress
- Individual, family, & community strength & support
- Collaborative community of care
- Cultural relevance & context (history, cumulative trauma)
- Builds on social justice & anti-oppressive practice
- Identify & build on individual & collective strengths & hope

*Freire, 1970

Care

(Linehan, 1993; Meichenbaum, 1985; Najavits, 2002; Pearlman, 1995; Saakvitne, 1996)

- Includes self, family, community
- Strategies to improve & sustain health
 - Emotional
 - Physical
 - Relational
 - Spiritual
 - Occupational

Supports Hope (Farran, Herth & Popvich, 1995)

- Way of feeling, thinking, & behaving
- Revitalizing, strengthening, moving forward
- Positive expectation of the future
- Culturally bound
 - Co-learning through learning exchange

Psychoeducation: Associated Values/What do we consider & integrate?

- Social justice & anti-oppressive lens
- Assumption that psychoeducation...
 - leads to change, action, awareness & advocacy
- Learning styles
- Life Stage

Aspects of Self Affected through Challenges

Saakvitne & Pearlman (1995; 1996)

- The way we understand:
 - Our world
 - Politics
 - Identity
 - Spirituality

HOW DOES PSYCHOEDUCATION HELP?

- Builds capacity to take action
- Assists in building awareness, self-determination, identification of resources & strengths
- Exemplifies shared leadership
 - Opportunity for co-facilitation
 - Exchange of professional & lived experience, ideas, skills, knowledge, empathy
 - Cultural humility & literacy
 - Clear language & explanation
 - Attention to practical application
- Builds community & social support
- Highlights stories, voices & power of participants

• Q & A?

Building Connections

- Presence -- the person, how the person is experienced by the other, spirit or feeling, the atmosphere
- Communication – listening & connecting through words & body language
 - Some silence is okay
 - People participate in different ways
- Power, Position, Privilege, Race – who we are in society or the world, what we represent
 - Who is in the room?

Psychoeducation process leads to..

- Vicarious strength & perspective
- Hope
- Meaning
- Recognition of patterns/anticipation of triggers/mitigation
- Community care, perspective, advocacy

- Overarching question: how do we accomplish goals of psychoeducation?
 - Requires attention to facilitators & barriers
 - Involves shared language & understanding
 - Promotes shared knowledge
 - Professional knowledge ↔ Experiential knowledge
 - Respect & humility
 - Time
 - Attention to confidentiality, willingness, accessibility
 - Involves education about process → mental health & health literacy

What do we consider?

- Timing
 - Content
 - Who, what, when, where, why, how
- Mindfulness & grounding
- Recognizing patterns of stress
- Context
 - Power & privilege

CREATE COMMUNITY AGREEMENTS TO GROUND THE LEARNING EXCHANGE

Examples: Community Agreement to Set Stage for PE Process

- Respect
- Openness
- Participation
- Exchange
- Support

Technique builds on...

- Structure
 - Group
 - Individual
- Co-facilitation
- Content
 - Workshop format
 - Curriculum modules
- Process
 - Working in the moment
- Active engagement/use of self
 - Active collaboration with participant/group
- Social justice

Changing the question....

- *From:*
 - What is the problem?
- *To:*
 - What is the story?
- OR
- *From:*
 - What is wrong with you?
- *To:*
 - What happened to you?

Facilitator & Participant Contributions

Facilitator

- Professional knowledge
- External patterns
- Knowledge of coping skills
- Crisis/stress management
- Modeling
- Identify common response patterns

Participant

- Experiential knowledge
- Individual strengths
- Individual awareness of patterns & subtle changes
- Continuity of interest/ongoing support
- Cues/triggers/structure
- Interactive feedback

PSYCHOEDUCATION AS COLLABORATIVE MODEL: shifting a paradigm

- Participants & facilitators *all* serve as:
 - educators
 - students
 - translators
 - consultants
 - facilitators
 - advocates
 - monitors

How do we think about mental health in the context of psychoeducation & COVID 19?

Mental Health as “Flourishing”*

- **Emotional Well-Being**
 - Positive affect
 - Avowed quality of life
- **Psychological Well-Being**
 - Self-acceptance
 - Personal growth
 - Purpose in life
 - Environmental mastery
 - Autonomy
 - Positive relations with others
- **Social Well-Being**
 - Acceptance
 - Actualization
 - Contribution
 - Coherence
 - Integration

• *Keyes, 2007

Trauma Symptoms

- Affective
- Behavioral
- Cognitive

General types of emotional stress injury

- **Trauma**
 - Acute stress disorder, PTSD
 - Long-term hyperarousal, dissociation, damage to the belief system
- **Fatigue: wear & tear injury, cumulative stress**
 - Depression, generalized anxiety, panic
 - Civil War: “soldier’s heart”
 - WWII: “shell shock”, “battle fatigue”
- **Grief, loss**
 - Preoccupation, nightmares, sleep disturbance

Possible Features

- Damage to belief system
- Hyperarousal
- Shame, guilt, damage to self-esteem
- Anger, fear, anxiety, irritability
- Immobilization
- Personality changes
- Isolation & loneliness

Counteracting Personal & Systemic Effects of Cumulative Stress & Trauma*

- attachment: belonging
- containment: safety
- communication: openness/consistency
- involvement: participation & citizenship
- agency: self-efficacy & personal power

The establishment of safety is the starting point for all efforts at healing.

Bloom & Reichert, 1998

*Bearing Witness:
Violence & Social Responsibility*

How do we move towards recovery & rebuilding during ongoing crisis?

- Safety--

- how to rethink this construct in the face of covid-19 & ongoing crisis, stress & trauma

- Affect (emotional) management

- Bearing witness through shared stories

- Attention to grief & loss

- Attention to physical reactions

- Advocacy & planning

- Hope & meaning making

- Transformative learning

- Individual or collective coping

Let's Reflect: Any thoughts or questions so far?

Q & A

Possible Structure for PE Session

- Welcome
- What is psychoeducation (explanation of process)
- Community agreements
- Mindfulness &/or grounding exercise
- Critical psychoeducational content & exchange
 - Stress & coping, trauma response, grief & loss, support, stigma
 - Prompts & questions for discussion
- Shared narratives/stories → Co-learning
- Problem solving or other skills component
- Mindfulness &/or grounding exercise
- Wrap-up & reflection exercise

What we are doing next...

To consider:

- privilege
- possible triggers
- universality

Session 1: Naming what we experience in time of Crisis

- Goal • To build strength & safety through naming the experience to build awareness & increase insight

Facilitator Note : Consider timing • Be sensitive to the group's energy/mood as you prepare to discuss stress & trauma reactions • Consider holding a moment of silence in honor of participant experiences • **To reflect that, let's take a moment now...**

- Define Community Trauma
 - Events or circumstances, brief or on-going, that threaten the community's existence, purpose, focus, or goal • May involve death of community members • Discuss how community trauma relates to individual & family trauma • Food insecurity • Unemployment • Fear • Unknown?

- Unique & common challenges among participants • Grief & loss • Stigma • Discrimination & racism • Anger & violence • Lack of resources & support • Loneliness & isolation
- Unique strengths of participants • Shared traditions & values • Collectivism (prioritizing interests of group over self-chosen goals) • Cultural Component
- Discuss – Naming the experience in time of COVID 19 ...
 - How do you, your family, your community define what is going with COVID 19? • **Can you define it?** Describe feelings and reactions? Let's think about this together **Q & A**
- Facilitator Note: Transitioning from discussing community trauma to trauma signs & reactions, you can ask the group how they feel about discussing community trauma. Their physiological & emotional responses demonstrate the range of effects of trauma & open the door to identifying more.

II. Stress & Trauma Reactions (personal, familial, community)

- **Typical Reactions to Stress & Trauma** • People react to stress & trauma in many ways including physical, mental, emotional, behavioral, and spiritual • Sometimes we don't realize that what is happening to us is a common or "typical" reaction
- **Common Signs and Signals of a Stress Reaction**
 - **Body** Fatigue • **Insomnia** • Elevated blood pressure • Headaches • Thirst Hunger Shaking • Rapid heartbeat • Aching joints and muscles • **Difficulty breathing** • Intestinal upset
 - **Mind** **Tendency to blame others** • Confusion • Poor attention • Inability to make decisions • Poor concentration • Forgetfulness • **Increased or decreased awareness of surroundings** • Poor problem-solving • Loss of sense of time/place/person • Nightmares • **Suicidal ideas** • Disbelief • Change in values
 - **Feelings** Anxiety • Survivor guilt/self-blame • **Grief** Denial • Fear of loss/of going crazy • Uncertainty • **Loss of emotional control** • Depression • Lack of capacity for enjoyment • Intense anger • Helplessness • Mistrust • **Feelings of worthlessness/apathy/boredom**
 - **Actions** Changes in normal activities • Change in speech • Withdrawal from others • **Emotional outbursts** • Suspiciousness • **Inability to rest** • Substance use/abuse • Antisocial acts • Pacing • Decreased personal hygiene
 - **Spirit** Inability to connect to previous spiritual resources • **Loss of a sense of meaning** • Inability to be inspired Inability to do previously common spiritual activities (meditate, pray, sing, etc.) • **Loss of optimism or hope**

Coping *

- How do we “survive” & keep on going (behaviorally, emotionally, spiritually, etc.) through/after a community trauma?
- Part of surviving includes the following:
 - Confronting adversity
 - Caring for self, family, & community
 - Finding meaning that is comforting &/or strengthening
 - Creativity, arts, music, dance
 - Personal & community advocacy
- *The ability of a community to keep on going (Williams, Zinner, & Ellis, 1999)

More on Coping

- **Addressing Adversity:** **Recognizing Strengths & possibility** in face of adversity, trauma, tragedy, threats, or even significant sources of stress, such as family & relationship problems, serious health problems, or workplace & financial stressors • Accessing small business loans • Applying for unemployment
- **Care for Self, Family, and Community** • Promotion of well-being across self, family, & community systems • **Recognizing tiny successes & pleasures** • Identifying resources (food banks) • Care in many areas: emotional, physical, mental, occupational, relational, & spiritual (Pearlman & Saakvitne, 1995; Saakvitne, 1996)
- **Finding Meaning that is Comforting and Strengthening** • Reorganizing/reframing one's understanding (psychoeducation) • Arts & music • Exercise • Being in nature • Practicing faith & spirituality (O'Leary, Alday, & Ickovics, 1998) **Q & A**

Possible Grounding or Mindfulness Exercises

- Progressive relaxation
- Various breathing exercises
 - “square” breathing
 - belly breathing with counting
- Focused mindfulness & grounding
 - “5, 4, 3, 2,1” exercise
- Other examples from our participants?

Healing in four directions*

- From Native American Traditions
 - Spiritual
 - Community
 - Environment
 - Self

*Portman & Garrett, 2006; Marsh et al, 2018

In sum, psychoeducation offers...

- Learning Exchange
 - Resources
 - Ideas
 - Information
- Time to think & reflect together
- Opportunity to build resource “ portfolio” or “backpack”

- Aiming for
 - Strengths perspective
 - Social Justice & anti-oppressive lens
 - Empathy, generosity, dignity & connection
 - Collective care & advocacy

Discussion & exchange

- How do you, your family, & your community continue to cope & keep on going?
- Have you found a meaning for this crisis that brings you comfort &/or strength?

Wrap up & Q & A

Thank you to:

- All of you
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 - <https://blogs.cuit.columbia.edu/cssw-covid19resources/>
- Tiffany Rasmussen & the Office of Professional Excellence team, CSSW
- Anna Balakrishnan for your energy & technical support

& In honor of all the providers, first responders, essential workers & people struggling to survive & cope in this unprecedented time