S.E.L.F.
A Trauma-Informed Psychoeducational Group Curriculum

Written and Compiled by
Sandra L. Bloom, M.D.
Joseph F. Foderaro, L.C.S.W.
RuthAnn Ryan, M.S.N.

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Introduction to the S.E.L.F. Curriculum
- Describes the S.E.L.F. Curriculum as trauma-informed, why that is important, and how to use the Curriculum.

Sanctuary Philosophy
- Essay by Dr. Sandra L. Bloom, one of the founders of the Sanctuary Model®, that defines the values and belief system that is the underpinning of the Sanctuary Model and S.E.L.F. Curriculum which is one of the key implementation components the Sanctuary Model.

Introduction to S.E.L.F.
- Simple handout for clients that accompanies every lesson or group of lessons. Meant to be given out to every participant at the beginning of the group to ground them in the basic language of Safety, Emotions, Loss and Future = S.E.L.F.

S.E.L.F. Group Guidelines
- One page handout to offer some simple guidelines for group procedure

What Does S.E.L.F. Mean?
- OBJECTIVES:
  - Introduce concepts of S.E.L.F. to the group
  - Connect S.E.L.F. to the mission of the organization
  - Connect S.E.L.F. to individual client problems
- HANDOUT: What Does SELF Mean?
- RESOURCE: S.E.L.F. – A Nonlinear Framework
  - More detailed explanation of S.E.L.F. for staff with some guidelines questions for staff to use with clients

Who are You a S.E.L.F. Self-Assessment
- OBJECTIVES:
  - To learn to use the acronym, S.E.L.F. to define individual identity and pinpoint individual strengths and vulnerabilities.
  - To begin the process of developing self-knowledge and knowledge about others in the group.
- HANDOUT: Using SELF to Introduce Myself
- RESOURCE: Why Do We Have Emotions?
  - Brief essay on the role of emotions in our lives, why we have them and the problems we can encounter trying to successfully manage them.
• Putting the Pieces Together: What Trauma Does to the SELF
  o OBJECTIVES:
    ▪ To graphically demonstrate how trauma can be experienced as a disintegration of one’s sense of self and identity
    ▪ To show that the key domains of beginning the process of recovery from trauma involve focusing on Safety, Emotions, Loss, and Future.
  o HANDOUT: Effects of Traumatic Experience
  o RESOURCE: Understanding the Impact of Traumatic Experience
    ▪ An extended explanation about what psychological trauma is and some of the ways traumatic experience can influence the way people think, feel, and behave.

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SAFETY

• It’s All About Survival: Fight-Flight-Freeze
  o OBJECTIVES:
    ▪ Understand the basic human stress response and how it interferes with safety
    ▪ Be able to identify one’s own typical response to stress
    ▪ Assess the effectiveness of one’s own stress response
  o HANDOUT: How Do You Respond to Stress?
  o RESOURCE: Fight-Flight-Freeze or How Not To Get Eaten
    ▪ Essay explaining the basic stress response and the ways it impacts the body and the mind.

• SELF Begins With Safety
  o OBJECTIVES:
    ▪ Introduce basic ideas about what “safety” really is
    ▪ Define Safety as: Physical, Psychological, Social and Moral Safety
  o HANDOUT: What Does Safety Mean?
  o RESOURCE: Safety- The First Pillar of Sanctuary
    ▪ Brief essay about what it means to create safety within any environment.

• What Does it Mean to Be Physically Safe?
  o OBJECTIVES:
- Introduce four kinds of safety: Physical, Psychological, Social and Moral
- Focus on physical safety as the most basic form of safety
- Explain and encourage use of the Five-Step Safety Plan to maintain physical safety
  - HANDOUT: What is Physical Safety?
  - RESOURCE: Safety and Adversity in Childhood
    - Explanation of PTSD and the Adverse Childhood Experiences Study

- What Does It Mean to Be Psychologically Safe?
  - OBJECTIVES:
    - Focus on defining psychological safety
    - Explain and encourage use of the Five-Step Safety Plan to maintain psychological safety
  - HANDOUT: What is Psychological Safety?
  - RESOURCE: How Shocking! Thinking, Feeling and Acting Under Stress
    - Essay on the ways in which our thinking is affected by stress, how acute dissociation protects us in the short-term, and how we are likely to act under stressful conditions.

- What Does It Mean to Be Socially Safe?
  - OBJECTIVES:
    - Focus on defining social safety
    - Explain and encourage use of the Five-Step Safety Plan to maintain social safety
  - HANDOUT: What is Social Safety?
  - RESOURCE: The Social Response to Danger
    - Brief essay exploring the social response to danger grounded in our need to attach from cradle to grave, and some of the potential negative consequences including trauma-bonding and scapegoating.

- What Does It Mean to be Morally Safe?
  - OBJECTIVES:
    - Focus on defining moral safety
    - Explain and encourage use of the Five-Step Safety Plan to maintain moral safety
  - HANDOUT: What is Moral Safety?
  - RESOURCE: Moral Intelligence
    - Brief essay that reviews the concept of moral intelligence and how it is defined.
• The First Language of Safety: Yes, No, Uh-oh, Ouch
  o OBJECTIVES:
    • Develop greater awareness of boundaries and what it means to be safe
    • Increased awareness of personal signals for various kinds of danger
    • To help people recognize a psychological injury when it happens
  o HANDOUT: What Do We Mean by Boundaries?
  o RESOURCE: Creating Sanctuary: The Active Development of Nonviolent Environments
    • Essay describing the Sanctuary Model as a trauma-informed, whole-systems approach to creating nonviolent environments.

• What Does It Mean to Trust? Social Safety
  o OBJECTIVES:
    • To explore that it means to trust oneself and other people
    • To discuss the obstacles to trusting other people
    • To develop awareness of when and when not to trust
  o HANDOUT: What Does It Mean “To Trust?”
  o RESOURCE: Attachment, Trust and Trauma
    • Essay on basic attachment research and the effects of disrupted attachment on subsequent development

• Fences Make Good Neighbors: What is a Boundary?
  o OBJECTIVES:
    • Introduction to concept of boundaries and the importance of boundaries in people’s lives
    • Assessing functionality of interpersonal boundaries
    • Demonstrating other styles of creating and maintaining boundaries
  o HANDOUT: Fences Make Good Neighbors
  o RESOURCE: Implementing S.E.L.F.
    • More detailed explanation of S.E.L.F. with some examples of practical applications

• Living Without the Terrorist Within
  o OBJECTIVES:
    • Identifying self-defeating and self-deprecating thoughts
    • Creating safety within oneself and developing positive self-regard
    • Enhancing self-respect
  o HANDOUT: Do You Have A Terrorist Within?
  o RESOURCE: When Victims Become Bullies
    • Essay on bullying behavior in children and in adults
EMOTION

• Volume Control
  o OBJECTIVES:
    • Teach how to appropriately match emotional reactions to the realities of the situation
    • Provide tools for thinking about emotional reactions that precipitate action
  o HANDOUT: Volume Control
  o RESOURCE: Fear Conditioning & Volume Control
    • More detailed information about emotions, emotional management and the way fear interferes with normal emotional and cognitive function

• Introduction to the World – and the Words – of Emotion – Mad, Sad, Glad, Scared, Shamed
  o OBJECTIVES:
    • Develop ability to identify emotions in a situation and match appropriate emotion to that situation
    • Develop ability to verbally communicate emotional states
    • Desensitize individuals to self-sharing in a group
    • Develop recognition that emotions can be used to create different outcomes
  o HANDOUT: The Words of Emotion: Mad, Glad, Scared, Sad, Shamed
  o RESOURCE: I Don’t Want To Talk About It: Numbing and Addiction to Stress
    • Essay that explores emotional numbing, alexithymia, the relationship to health, addiction to trauma and endorphins, the social role of emotions and emotional contagion.

• Problem Solving
  o OBJECTIVES:
    • Provide a logical, S.E.L.F. approach to problem-solving
    • To provide a tool that can help make problem-solving more manageable
  o HANDOUT: Problem Solving Worksheet
  o RESOURCE: The Problem of Evil
• Philosophical essay exploring how the notion of evil has been defined and how understanding the nature and consequences of traumatic experience may alter those notions and potentially lead to different response to people who do bad things

• To Connect or Disconnect: That is the Question
  o OBJECTIVES:
    • Explore the ways in which intensely disturbing or traumatic experiences may cause us to disconnect from our bodies, emotions, thoughts, and memories
    • To develop an understanding of what dissociation is and how it relates to previous trauma
  o HANDOUT: Do You Disconnect?
  o RESOURCE: Dissociation
    • Essay defining dissociation, offering examples of dissociation, and exploring some of the long-term effects of chronic dissociation

• How To Stay Grounded
  o OBJECTIVES:
    • Explore the natural inclination of the mind to emotionally and physically disconnect from disturbing or traumatic situations
    • Describe simple methods for getting grounded in order to reconnect and reorient mind and body to present reality
  o HANDOUT: How To Stay Grounded
  o RESOURCE: Memory and Dissociation Under Stress
    • Essay describing the memory disturbances that frequently accompany traumatic experience, including flashbacks and post-traumatic nightmares

• SELF-Soothing and Stress Management
  o OBJECTIVES:
    • Identify stress responses in mind and body
    • Differentiate between soothing behaviors that are maladaptive and those that promote healing
    • Select behaviors and responses that can decrease emotional arousal
  o HANDOUT: Managing Emotions
  o RESOURCE: “But I Just Can’t” Perception, Learned Helplessness and Attention Problems
    • Essay exploring the helplessness associated with trauma, learned helplessness and interference with cognitive and behavioral function.
• **Hurt People Hurt People**
  o **OBJECTIVES:**
    • Normalize discussion about the contagiousness of violence
    • Demonstrate how aggressive behavior begets aggressive behavior
    • Explore different ways that people respond to the stress response
  o **HANDOUT:** Are You a Puffer or a Shrinker?
  o **RESOURCE:** *Hurt People Hurt People*
    • Essay that explores the ways in which victims can become victimizers with a special emphasis on domestic violence and child abuse

• **Addictions, Safety and Self-Soothing**
  o **OBJECTIVES:**
    • Discuss the ways addictive and compulsive behaviors are played out in everyday life
    • Develop understanding about the connection between addictive behavior and problems with emotional management
  o **HANDOUT:** The Primary Colors of Emotion
  o **RESOURCE:** *Double Trouble – Substance Abuse and PTSD*
    • Brief essay relating substance abuse and post-traumatic stress disorder

• **Resolving Conflict**
  o **OBJECTIVES:**
    • Develop awareness of the ways in which conflict resolution can be blocked and the different kinds of conflict resolution styles available
    • Review list of guidelines for managing or resolving conflict
  o **HANDOUT:** Guidelines for Managing Emotions and Resolving Conflict
  o **RESOURCE:** *I Like To Play With Fire: Risk-taking, Suicidality and Aggression*
    • Essay exploring the connections between a past history of trauma and a variety of risk-taking behaviors including sexual promiscuity, suicidal and aggressive behavior.
• What Do We Mean By Loss?
  o OBJECTIVES:
    • Define broad category of loss
    • Teach the various ways of showing grief and unresolved grief
  o HANDOUT: The Many Faces of Loss
  o RESOURCE: Sexual Assault
    • Essay on the nature of child and adult sexual assault

• Using SELF To Work Through Loss
  o OBJECTIVES:
    • Demonstrate the ways in which the components of S.E.L.F. can provide a guide for working through loss
    • Explore barriers to working through loss in order to move on into a different future
  o HANDOUT: Losses Associated with Childhood Adversity and Trauma
  o RESOURCE: The Grief That Dare Not Speak Its Name
    • Essay about the many losses associated with abuse and deprivation in childhood

• Never Having to Say Goodbye- Reenactment
  o OBJECTIVES:
    • Understand the ways in which the self-limiting roles they are currently playing are a result of past experiences
    • Recognize the ways in which reenacting past self-defeating roles reproduces helplessness, abusive power, and a tendency to be revictimized
    • Recognize how reenactment roles affect identity and reproduce loss
  o HANDOUT: Is It the Same Thing Over and Over
  o RESOURCE: Traumatic Reenactment
    • Essay describing in more detail the dynamics of traumatic reenactment as it manifests in behavioral reenactments and self-harming behavior
Learning to Let Go

OBJECTIVES:
- Recognize that working through loss is vital to creating a different future
- Describe the meaning of “letting go” and a process for completing it

HANDOUT: Learning to Let Go Worksheet

RESOURCE: *Give Sorrow Words: Emotional Disclosure and Physical Health*
- Brief essay describing research on using writing to promote both emotional disclosure and improved physical health

How To Lose Your SELF: Turning People Into Chameleons

OBJECTIVES:
- Learn how to set boundaries to better define one’s self
- Understand the impact of peer pressure
- Demonstrate how easy it is to lose one’s sense of identity in interaction with others

HANDOUT: Do You Ever Lose Yourself?

RESOURCE: *The Neglect of Neglect*
- Essay describing the ways in which childhood neglect contributes to adult problems

Habits and Resisting Change

OBJECTIVES:
- Learn about the automatic nature of forming habits and what it takes to change bad habits in order to achieve safety
- Recognize that changing habits requires managing difficult emotions
- Recognizing that changing habits involves facing fears and enduring loss in order to create a better future

HANDOUT: What Are Your Habits & My Plan for Changing Habits

RESOURCE: *Revictimization, School Failure and Substance Abuse*
- Essay about how revictimization, failure in school as a child, and substance abuse as an adolescent and an adult all relate to each other and precipitate reenactment behavior.

What We Resist Persists

OBJECTIVES:
- Recognize the fears that are aroused as barriers to change
Inform participants about the Stages of Change theory
- **HANDOUT**: Loss, Fear and Stages of Change
- **RESOURCE**: *Barriers to Recovery and Stages of Change*
  - Essay reviewing the Stages of Change theoretical framework and some reasons why it is so difficult for practitioners to address the impact of trauma on their clients.

**FUTURE**

- **One Step At a Time – Is That All You Need to Know?**
  - **OBJECTIVES**:
    - Demonstrate how direction, vision and future planning are essential parts of change
    - Demonstrate that we can influence our own future through the choices that we make
  - **HANDOUT**: Five Steps to a Better Future for Myself
  - **RESOURCE**: *The Bystander Effect*
    - Essay that explores the ways in which victimization and perpetration are influenced by everyone else – the social context within which events unfold.

- **How Does Change Happen?**
  - **OBJECTIVES**:
    - Demonstrate the ways in which we can influence our choices that determine the future by understanding the patterns of the past
    - Recognize how important it is to learn from the past
  - **HANDOUT**: Autobiography in Five Short Chapters
  - **RESOURCE**: *Chaos, Complexity and the Process of Change*
    - Essay that attempts to simplify the emerging concepts of complexity as it relates to the ways in which people change

- **Empowerment**
  - **OBJECTIVES**:
    - Differentiate between destructive and constructive forms
of exercising power

- Become familiar with direct and indirect methods of exercising power
- Recognize previously untapped sources of personal power

- **HANDOUT**: Exploring What Power Really Means
- **RESOURCE**: *Retributive vs. Restorative Justice*
  - Essay that explores the difference between justice that is based on retribution and justice that is based on restoring the integrity of the community

**How To Influence the Future: Self-Fulfilling Prophecies**

- **OBJECTIVES**:
  - Understand how we play a role in determining how other people treat us
  - Guide participants in a method for altering the roles we automatically play so that people will treat us differently

- **HANDOUT**: Self-Fulfilling Prophecies
- **RESOURCE**: *How Labels Determine Reality*
  - Essay describing the ways in which we tend to label things, including people, and how those labels can become self-fulfilling prophecies that actually determine how reality is defined.

**Relapse Prevention**

- **OBJECTIVES**:
  - Identify situations which compromise sobriety – from substance abuse or destructive behaviors – while attending to the emotions that accompany change
  - Define strengths that allow individual to successfully resist relapse

- **HANDOUT**: Relapse Prevention Worksheet
- **RESOURCE**: *Caring for the Caregiver: Vicarious Trauma*
  - Essay on “vicarious trauma” describing the cumulative transformative effect on the helper of working with victims of trauma.

**Moving On and Giving Back**

- **OBJECTIVES**:
  - Introduce the idea of a survivor mission
  - Describe successes people have had in struggling with challenging life experiences
  - Develop understanding for how giving back is an integral part of growth, recovery and personal development

- **HANDOUT**: Survivor Mission
- **RESOURCE**: *Social Transformation of Trauma*
  - Essay describing various ways that people transform traumatic experience into something of value for themselves and for others

- **Imagining A Better Future**
  - **OBJECTIVES**:
    - Introduce the idea of living a balanced life
    - Exercise the skills necessary to envision a better future
  - **HANDOUT**: Inventory of Recreation Activities
  - **RESOURCE**: *The Sanctuary Model of Organizational Change*
    - Brief essay on why trauma-informed services are so important and what it actually means for an organization to be trauma-informed
There is no outpatient or inpatient mental health setting, no child protection service, or parenting program or school, no homeless shelter or domestic violence shelter that is free from the impact of traumatic experience on the clients and on the staff that serve them. In fact, studies have shown that in mental health settings, the exposure to some form of violence is in the background of a majority of the clients. And in places like domestic violence shelter, the exposure rate of the women and the children is 100%.

The fact that the clients in all of these settings had high rates of exposure to violence, child maltreatment, and other forms of traumatic experience has long been anecdotally recognized by people working in any and all of these settings. But now there is a large body of evidence that supports these observations. Perhaps most importantly, the Adverse Childhood Experiences Study also known as the ACEs Study, very possibly the most important public health study ever done and the largest study of its kind to examine the health and social effects of adverse childhood experiences over the lifespan.

The ACEs Study: Why We Need Trauma-Informed Care

The ACE Study was initiated at Kaiser Permanente in California from 1995 to 1997 by Dr. Vince Felitti and Dr. Robert Anda. Its participants include over 17,000 members who were undergoing a standardized physical examination. Survey information was combined with the results of their physical examination to form the baseline data for the study. The objective of the study was to assess the relationship between adverse childhood experiences, health care use, and causes of death[1].

The authors of the study asked study participants to categorize their experiences with childhood adversity. Each study participant completed a confidential survey that contained questions about childhood maltreatment and family dysfunction, as well as items detailing their current health status and behaviors. The categories of childhood adversity included: physical or psychological abuse by parents before the age of eighteen, contact sexual abuse by anyone before the age of eighteen, severe physical or emotional neglect as well as living in a household as a child (eighteen years of age or younger) where there was anyone who was: mentally ill, a substance abuser, a victim of domestic violence, or imprisoned. The ACEs score then represented a simple addition of the number of categories of adverse experience. In this list it is important to recognize that exposure to criminal
victimization and community violence were not part of the study and therefore the results of the study are likely to have even broader implications for an urban population.

Only 48% of this white, over-50 years of age, middle-class and educated population had an ACEs score of zero. One in four admitted to at least one category of childhood adversity while one in 16 had an ACEs score of four. Sixty-six percent of the women reported at least one childhood experience involving abuse, violence or family strife. One in six adult men reported being sexually molested as children. Women fared even worse, with one in four reporting childhood molestation, in almost all cases perpetrated by males. Among female victims, males were responsible for the abuse 94 percent of the time. Among male victims, females made up 38 percent of perpetrators, according to the study.

The authors then analyzed the respondents’ medical data and found clear and direct relationships between the ACEs score and a wide variety of physical, emotional and social diseases and disabilities. People exposed as children to adverse experiences are at much greater risk for chronic lung disease, liver disease, diabetes, obesity and hypertension. Depending on the number of ACEs categories, there was a 30 percent to 70 percent higher risk of developing ischemic heart disease in people who had an ACEs score compared to people who did not report these adverse childhood experiences. Adults who reported seven or more types of adverse childhood experiences were more than three times as likely as persons with no ACEs to report an ischemic heart disease.

Adults with childhood trauma have increased teenage pregnancy rates, divorce rates, depression, suicide attempts, post-traumatic stress disorder, alcoholism, IV drug abuse and dependence, school failure, and unemployment. As children, adolescents, and adults, people exposed to childhood adversity have a much higher probability of requiring the services of our expensive public systems including special education, child protection, mental health, health and criminal justice services.

The authors concluded that the ACEs study has demonstrated that childhood adversity appears to determine the likelihood of the ten most common causes of adult death in the United States.

Why is exposure to interpersonal violence so problematic across the lifespan? The authors of the ACEs study have proposed an explanatory pyramid to serve as a conceptual framework for understanding the impact of adversity across the lifespan. Exposure to violence in childhood frequently disrupts normal neurodevelopment. These disruptions of critical developmental pathways can result in a wide variety of social, emotional, and cognitive impairments in childhood and throughout adolescence. In late childhood and adolescence, these impairments put children at risk for the adoption of a number of health-risk behaviors like drinking, drugs, smoking, and promiscuity. Over time, these behaviors – and the lifestyles that support the behaviors – lead to disease, disability, social problems and ultimately premature death. In the past these linkages have often been overlooked because they are diverse, complex, and occur over a very long time-line.

The implications of this study are enormous. For the purposes of this project it means that there is no discrete subgroup of traumatized people in the population for
whom we can design specific and limited approaches. We have to raise the level of awareness universally. Trauma survivors are everywhere and most of them have little knowledge about how their past experience may be adversely affecting their health, their occupational identity, their relationships, and their parenting.

**What Is Trauma-Informed Care?**

The definition of what actually comprises trauma-informed care is still evolving and is somewhat variable from setting to setting. Our current understanding of the complex psychobiological nature of traumatic injuries represents a seismic shift in how we understand dysfunctional human behavior in all of its forms. The most elementary aspect of becoming trauma-informed is education. Everyone who works in the human services must be REQUIRED to understand the impact of traumatic experience on the people around them and what is required to help people fully recover from those experiences. But the need for such a vital shift is coming at a time when our health, mental health, and social service systems are under significant stress and many are in crisis [2]. So what are we to do?

Trauma recovery begins with psychoeducation. Educating people about the impact of overwhelming life experience helps to get everyone “on the same page” with a shared and coherent organizing framework that does not stigmatize the injured person but instead allows a much closer and empathic understanding between client and caregiver. Unlike most of the theoretical jargon that informs so much of mental health treatment, educating people about the psychobiological effects of serious, recurrent, and chronic stress “rings bells” for them. Even people with little education can easily grasp very complex concepts because the concepts are consistent with their own experience. Much of educating people about trauma is simply giving them words for what they already know and helping them see patterns where no patterns existed for them before.

**Background of the S.E.L.F. Group Curriculum**

Given the present strained nature of our helping institutions, it is clear that we must find simple and straightforward means of educating large numbers of people using methods that easily integrate into established practice. The S.E.L.F. Group Curriculum has been almost twenty years in the making. From about 1986 to 2001 the authors created, sustained, recreated four times, and finally closed one of the only specialty inpatient psychiatric programs for the treatment of adults who had been maltreated as children [3]. In that short-term setting that we called, The Sanctuary®, we treated people with individual, family and group modalities. But as lengths of stay shortened, and pressures for short-term treatment approaches escalated, we strengthened our group program in order to take advantage of the compounded learning experience that is typical of group interaction. Originally known as S.A.G.E., (Safety, Affect Management, Grieving, and Emancipation), these four central concepts served us as an organizing framework for our own thinking, our
treatment planning, our psychoeducational groups, and our map of recovery for our clients.

In 2000 we began applying the Sanctuary Model to the residential treatment of children and the outcome has been the beginning of a research base [4-7] and the development of a Sanctuary Leadership Development Institute at Andrus Children’s Center in Yonkers, New York. Under the terms of the original NIMH grant to study the implementation of the model at the Jewish Board of Family and Children’s Services, we created a twelve-session psychoeducational curriculum for the children and changed the acronym to S.E.L.F. – Safety, Emotions, Loss, and Future – same concepts but simpler words.

Since closing our inpatient program in 2001, we have consulted to a wide variety of social service programs – acute care inpatient units, long-term inpatient and residential programs for adults; outpatient and partial hospitalization programs, inpatient, residential, and outpatient children’s programs, parenting programs, homeless shelters, domestic violence shelters; residential and outpatient substance abuse programs; and schools. All of these settings have a number of things in common: clients with histories of overwhelmingly bad experiences, high turnover of staff, rapid turnover of clients, and decreased funding for orientation and in-service programming. Some of these settings, such as homeless shelters and domestic violence shelters have never been oriented to fully addressing the psychological problems of their clients, yet they have to contend with those very problems on a daily basis.

At every place we consulted, we recognized that there was a potent need to understand and respond to the past traumatic experiences in each client population, experiences that were continuing to exert a powerful influence on the present. In many settings, clients were still actively in traumatizing circumstances, further complicating the problems of service delivery. Trauma treatment cannot be delivered in a five-day length of stay or in the context of a parenting group. People are not ready to do “trauma work” as long as their lives are unstable and they are still in dangerous situations. And yet all of these institutions offer a unique opportunity to address the issue of trauma while the client is receiving other services. And in the case of places like homeless shelters and domestic violence shelters, where the effects of exposure to violence are frequently both the actual cause of the need for services and a major barrier to successful intervention, the need to address this issue is critically important.

In our acute care inpatient setting, we had decided that the place to begin was education. First our S.A.G.E. groups and then our S.E.L.F. groups evolved organically from our need to teach our patients how to think differently about their problems; to organize the changes they needed to make into more manageable bundles; to help them develop pattern recognition for the ways in which their present problems related to past experiences; and to help provide a roadmap for the process of recovery. This curriculum has grown out of that experience and has been adapted to the unique environments that today characterize the mental health and social service world.
The S.E.L.F. Trauma-Informed, Psychoeducational Group Curriculum

S.E.L.F. is not a staged treatment model, but rather a nonlinear method for addressing in simple words, very complex challenges. The four concepts: Safety, Emotions, Loss, and Future represent the four fundamental domains of disruption that can occur in a person’s life and within these four domains, any problem can be categorized. Naming and categorization are the first steps in making a problem manageable. Victims of overwhelming life experiences have difficulty staying safe, find emotions difficult to manage, have suffered many losses and have difficulty envisioning a future. As a result, they are frequently in danger, lose emotional control or are so numb that they cannot access their emotions, have many signs of unresolved loss, and are stuck in time, haunted by the past and unable to move into a better future.

The S.E.L.F Psychoeducational Group is designed to provide clients – and staff – with an easy-to-use and coherent cognitive framework that can create a change momentum. Because it is a model that is “round” not square, circular, not stepped, it provides a logical framework for movement. We think of S.E.L.F. as a compass through the land of recovery that can help guide individual treatment, staff decision, team treatment planning, and an entire institution. It is not constrained by gender, age, race, religion, or ethnicity because the domains of healing that S.E.L.F. represents are human universals, unbound to any time, place, or person. In our residential programs, children as young as four are comfortably using the S.E.L.F. language – and using it appropriately.

How to Use the Curriculum

The S.E.L.F. Trauma-Informed, Psychoeducational Curriculum is an important component of a larger body of work, The Sanctuary Model. In our model for creating healthy environments, Sanctuary describes the whole house, and the four weight-bearing walls are Safety, Emotions, Loss and Future. For the interested person using this curriculum, we have included the philosophical principles that ground the Sanctuary Model. For more extensive information about the model, references are included in all of the readings and more are available at www.sanctuaryweb.com.

The curriculum is divided into several sections. In the front is the introductory material including this document, the Sanctuary philosophy, the Table of Contents and the Introduction to Self and Group Guidelines – both to be given to every new member who joins each group. Next, there are two Lessons that introduce the S.E.L.F. framework as a whole and one that introduces the concept of trauma. The remaining four sections of the book contain ten lessons focused on Safety, nine lessons on Emotions, seven on Loss, seven on Future. In all there are thirty-six lessons.
The Lessons

For the most part, each lesson is independent of every other lesson and there is no fixed order within which the lessons must be taught. We arranged the curriculum this way for some very specific reasons. In the first place, the turnover rate in many settings is so rapid, that if clients are to benefit from attending only one or two groups, then each group must stand alone as a valuable lesson, without necessitating prior attendance. Secondly, we wanted the curriculum to be responsive to the immediate and pressing needs of each environment at any point in time. To accomplish this, we had to write the curriculum so that a staff member confronted with boundary violations could choose on that morning to do a group on boundaries; while on another day faced with episodes of stealing the same staff member could do a group on trust or social safety.

Although this is a trauma-informed curriculum, we do not frequently address head-on the issue of trauma, maltreatment or abuse. Again, this was intentional. These words are highly charged for many populations and frequently misunderstood. We focus instead on the results of exposure to trauma – loss of safety, inability to manage emotions, overwhelming losses, and a paralyzed imagination – experiences that are universal. As a result, these lessons can be helpful lessons regardless of whether or not the clients in the group have identified themselves as trauma survivors. Likewise, many of the lessons can be used for family groups without the need to create an atmosphere of recrimination or accusation.

Finally, we recognize that the staff members in most mental health and social service environments are stressed, frequently demoralized, frustrated, and overburdened. Many of the direct line staff - and in many cases the professionally trained staff - have little if any experience in running groups and may be intimidated by the prospect of using a group format. Unfortunately, failure to create a safe group atmosphere wastes an enormous human resource for positive change. Recognizing this dilemma, we have tried to create scripts for group leaders that will create an interactive but contained process, even while opening up painful subjects. Using an educational format with handouts, flipcharts, questions and answers, all promote a containing environment quite different from a typical process group that can be far more difficult to manage. In this way, staff members can discover the power of the group process in helping people to learn, grow and change, while simultaneously building community within the setting.

The Handouts

Every lesson is accompanied by a Handout to give to the clients. Some people in each group will make no use of it – others will value having something that is there own to use and to keep. Ideally, each program will purchase folders or notebooks for the clients to keep their handouts. This would add to the practical value of the experience but also conveys a nonverbal commitment to the importance of education in the setting where the group is being conducted.
The Resources

Accompanying every lesson and handout is a Resource. These represent a course in trauma studies should a staff member be inclined to read more about some particular subject covered or all of the subjects. It is not necessary to read the material in order to have the groups be beneficial. However, we believe that as staff members watch the outpouring of new information that will inevitably arise from the group process, their curiosity is likely to be inflamed and we wanted some material to be readily available to them. In some of the lessons we have also suggested some relevant movie titles pertaining to the topic.

Evaluation

Obviously, it is not easy to evaluate the outcome for a group process when people may come and go, or attend erratically, or only attend one or two sessions. We are in the process of designing a formal evaluation process for the group but in the meantime, we would request that at the end of every group the group leader ask the participants a single question, “What was the most important thing are taking away from the group today?” Please write down the answers to this question and feed the results back to us so that we can continue to improve and modify the curriculum.

References

2. Bloom, S.L., *Organizational Stress as a Barrier to Trauma-Informed Change*. in press, b, National Association of State Mental Health Program Directors (NASMHPD): Alexandria, VA.

1 http://www.andruschildren.org/Sanct_Lead_Dev_Inst.htm
Successfully helping people to heal from repetitive traumatic experience is demanding and complex. Likewise, this complexity demands a complex, educated, and sophisticated response from us as helpers. It’s the least we can do for children, adults and families that have already been through their own personal hell. This curriculum is designed to help you begin (or continue) the process of creating truly safe environments that promote healing. The term we use to describe the end result of this process is Sanctuary®. The practice of creating trauma-informed healing environments derives from over twenty years of experience in treating adult survivors of childhood trauma and there is already an extensive body of work describing adult treatment [1]. The S.E.L.F. Curriculum is an implementation tool of the Sanctuary Model.

The Sanctuary Model draws upon four main bodies of knowledge or keystones. The practice is grounded in Trauma Theory – knowledge gained over the last several decades about the biopsychosocial and existential impact of prolonged exposure to trauma on individual human beings and human groups. Social Learning is a term used to describe “the little understood process of change which may result from the interpersonal interaction, when some conflict or crisis is analyzed in a group situation, using whatever psychodynamic skills are available” [2] and encompasses much that has been learned over the past century about therapeutic communities and the conscious and unconscious dynamics that exist in groups. Moral Intelligence and Democracy provides a framework for civic engagement, collaborative interpersonal relationships, social justice and the establishment of true safety in any environment [3]. Complexity Theory describes how living systems change and is critical in understanding how it is possible to deliberately design environments that stimulate the creative changes so necessary for healing from traumatic experience.

The process of “Creating Sanctuary” begins with getting everyone on the same page – surfacing, sharing, arguing about, and finally agreeing on the basic values, beliefs, guiding principles and philosophical principles that are to guide our decisions, decision-making processes, conflict resolution skills and behavior. There are no shortcuts here. Trauma-informed change requires a change in the basic mental models upon which thought and action is based and without such change, treatment is bound to fall unnecessarily short of full recovery or fail entirely. This change in mental models must occur on the part of the clients, their families, the
staff, and the leaders of the organization. Mental models exist at the level of very
basic assumptions, far below conscious awareness and everyday function and yet
they guide and determine what we can and cannot think about and act upon [4]. This
introduction provides a basic summary of the mental model themes that comprise
the Sanctuary Model. Before you go any further in deciding to commit yourself to the
process of Creating Sanctuary, we want to be as honest as we can with you about our
basic assumptions as we currently understand them.

Life and the Sacred

In Sanctuary we make some basic assumptions that underlie virtually
everything else that we think and do. Out of these basic assumptions we develop a
mental model of the world that we then try to replicate in our individual settings, a
mental model we hope will eventually be adopted by the larger world we live in.
The most basic assumption we make is that life is valuable, even the lives of
beings that we don’t like, don’t approve of, or find offensive, even frightening. We
view Life as an ecological whole, existing in a natural balance that has been evolving
for millions of years and that because of our limited perspective we can only ever
have partial vision of the Whole. We believe that this Whole is in some way the best
way to describe “God” and that every part of the Whole therefore is sacred. As a
result, any action we take in the world either helps or harms the Whole and therefore,
helps or harms that which is sacred. Defining helping and harming, of course, is
astonishingly difficult and perhaps can only be understood by referring to restoring or
destabilizing the balance of nature and the self-sustaining nature of Life. For us,
therefore, Creating Sanctuary is sacred work, not just a job. It involves a commitment
to restore the balance of life in every individual we work with to the extent of our
ability to do so.

Responsibility and Free Will

Action entails a huge responsibility that cannot be avoided by non-action
which is itself an action. Living means making choices all the time and the choices
we make determine whether we help or harm the whole. There are no ultimate
guides, religions, books, teachers, or laws that can free us from this awesome
responsibility of choice that has been known through the ages as “free will”: the
ability to select a course of action as a means of fulfilling some desire. It has become
increasingly apparent in the world of quantum science, as it has been for eons in the
realms of religion, politics, and the arts, that human intention may be constantly
determining the nature of reality, that we may be far freer to choose the path of
history than we have ever understood before.

Through the choices we make today we are determining the course of the
future in our individual lives and in our collective life experience. But because it is so
difficult to see the whole, we are largely unaware of the total impact of our choices as
we make them. We make most of these choices in small ways that appear
inconsequential until they accumulate and geometrically compound over time. In our houses of government, on Wall Street, in our businesses, schools, and homes, we are deciding every day who is going to live a life of pleasure and who is going to suffer. We are deciding whether or not the human species – and all living things – are going to survive or perish. In our treatment programs every day, we are making choices that are either going to further the healing of the people in our care – or not. But we remain largely unaware of how we are making these choices or what kind of future we are actively creating.

Considering the enormity of such responsibility is it any wonder that so many people turn to fundamentalism? Most human beings develop a conscience and accompanying that conscience is a need to see ourselves as “right” and avoid doing “wrong”. Doing what is right makes us feel good and we expect other people to reward us for doing right. Doing what is wrong makes us feel guilt - a terrible feeling - and evokes the fear of being hurt by others for doing was is wrong. Many of us long for and seek out a superior person (king, president, expert, guru, pope, savior, teacher, therapist), or a set of laws (religious, political, social), or a book (Bible, Koran, self-help book, etc), or scientific evidence (evidence-based practice, manualized treatment) that will tell us exactly what to do in any situation. If we can find an appropriate “how-to” guide than we can always do what is right and never do what is wrong. We can always feel good about ourselves and never be punished.

The problem of course is that even the most superior people remain people and therefore fallible because they are incapable of seeing, much less comprehending, the Whole and even the most superior people die and can no longer be counted on for advice. Inevitably, laws are created at a specific time, at a specific place, to meet specific needs and seemingly only certain laws of nature (gravity, death) may be immutable. Books too, even those tomes that are filled with wisdom, are bound to their own time, place, and persons and though the wisdom within them has much to teach about how to avoid making the same mistakes repeatedly, they may have little to offer at critical moments when remarkably new situations require similarly new choices.

As a result, fundamentalist beliefs, though understandable and seductively useful in the short term, are inevitably and irrevocably dangerous in the long-term because they prevent us from being free to respond to changing, unique, or entirely new situations. Likewise, their tendency to emphasize, control, obedience to command and punishment for disobedience discourages the human capacity to learn from our mistakes and change course based on continuous feedback as we move into the future.

In light of the dangers of fundamentalism, we don’t want Sanctuary to become a fundamentalist belief. We use words like “creating” and “practicing” and “living” and “leading” because these are word forms that indicate the process of getting there rather than the fact of arriving. Sanctuary is always being co-created or it is not and our goal is to increase the amount of time we spend doing it, and minimize the time we spend doing anything else. We have a bumper sticker that declares, “Sanctuary: Not Just A Place”, because the people in our care, the staff that care for them, the families they return to and the society they grow up in need to figure out how to engage in creating Sanctuary all the time, everywhere we go.
Making Mistakes

Whenever we make a choice we take a risk that we will be wrong, that we will make an error, a mistake. Action inevitably leads to consequences. These consequences may have no impact on existing conditions, may make things better, may make things worse, or may make some things better and some things worse. Errors happen, sometimes intentionally, sometimes unintentionally. Whether conscious or unconscious, motivated by an intention to do harm or not, mistakes will be made.

As humans mature we are supposed to become increasingly better at predicting the outcome of the choices we make and based on those predictions, increasingly better at making better choices. The younger the person is, and therefore the less experienced they are in predicting the future the more likely they are to make mistakes. Childhood should comprise a steady, intensive, progressive and sheltered process of making mistakes and learning from those mistakes. There is however, no end to the making of mistakes because reality keeps changing and previous experience does not necessarily prepare us to deal with new experiences. In this way we all remain immature, maturity being only a relative concept.

Adults can help children learn from their mistakes by deliberately constructing consequences for mistaken action. As adults, we can do the same for each other. The goal of administering consequences for someone else’s – or one’s own – mistakes should be to create an increased likelihood that the same mistake will not be made again. Unfortunately, administering consequences for mistakes usually falls under the general rubric of “punishment”: to subject a person to something negative for an offense, sin, or fault. All too often, the punishment is disconnected from the consequences of the punishment and does not meet a standard of helping to reduce further mistakes. This is particularly true when the punishment is designed more to serve the needs of satisfying the vengeful desires of those harmed than to serve the needs of the person who has made the mistake.

In Sanctuary, we believe that punishment for mistakes, as it is presently understood and meted out in our society is a foolhardy waste of time, energy, and ability that brings far more harm than good. If punishment does not bring about more positive outcomes – if the person does not learn from their mistakes but instead becomes even more likely to make more mistakes, then the punishment itself is a mistake. We believe that as living organisms we are designed to learn from our mistakes in order to get increasingly better at making choices that help and do not harm the whole. It is therefore vital that we constantly create for each other learning opportunities that reduce the likelihood of recurrent mistakes and that increase the likelihood of growth, change, and maturation.

Learning from Mistakes

However, important as it is to be constantly learning from our mistakes, learning consumes energy and it is in our best interest as living beings with limited
life spans, to make as few mistakes as possible. We believe that there are many ways of reducing the odds of making a mistake whenever there is a choice that must be made. We see science, religion, knowledge, teachers, experience, and laws as eternal methods that human beings have evolved for reducing the risk of choice and banking the odds that an action will have a positive outcome. Unfortunately, over the course of history, human beings often have tried – and go on trying – to use these wisdom sources as an opportunity to avoid both individual and collective responsibility and in doing so, our greatest strengths frequently become our greatest weaknesses. Our sciences, our religions, our books, our teachers, our laws, and even our experiences become excuses to go on doing things that harm the whole because they become excuses to stop learning from our mistakes.

The process of creating and maintaining Sanctuary serves the endless effort of humanity to learn from our mistakes. In Sanctuary we describe methods to create safety between and among people, sufficient safety to allow us to take risks that are necessary for change to happen; to learn from the mistakes that inevitably follow at least some of those risks; and to reduce the harm to the whole, whether that whole is the body of an individual, the immediate social body, the natural environment, or the world as a whole. We do not provide easy solutions. There is no how-to cookbook for Sanctuary. Life is far more complex and changeable than that. Instead, we are attempting here to describe and lead behavior change toward basic processes that we believe are necessary to create the container within which change, even transformation, can occur with an acceptable balance of risk and safety.

**Safety in Numbers: The Power of the Group**

Our experience has demonstrated to us that there is indeed safety in numbers. Under the right conditions, group decision-making and problem-solving helps to reduce the number of mistakes made by individuals and speeds up the process of learning from mistakes because that learning can be rapidly distributed among the group instead of having to be learned each time anew by every individual. The right conditions include sufficient safety and freedom to allow individuals within a group to freely express their opinions; full participation of the individuals within a group; shared values and goals; a shared framework of meaning and practice; a clear and agreed upon vision for the future; a commitment to the well-being and integrity of the group as well as the individuals within the group; free-flowing and accurate information flow; strong but non-authoritarian leadership; educated and emotionally mature individual group members; group norms that prohibit violence and other coercive tactics; and a shared ability to manage intense emotional states, even under stress. Under these conditions, group problem-solving is usually far superior to even the brightest and the best individual expert opinion [5].
Harming and Helping

For us, harming the whole is anything that impedes the growth, development and health of a living being. This apparently simple definition, however, is deceptive in that actually trying to define a satisfactory state of health is something that has challenged many find minds throughout the ages. The definition becomes ever more complex the more one tries to see the Whole. Individual human bodies are nested within families, communities, nations and the Earth. Human beings can only survive if we maintain the health of the multiple and diverse interdependent species of insects, birds, mammals, amphibians, fish, and plants upon which our life – and all life - depends. This describes a world of such complexity, such unceasing conflict and yet such interactive balance, that the human mind staggers under the weight of responsibility and choice.

So frightening, awesome, and overwhelming is this “free will” that early in our development, human beings began using our intelligence to master the other parts of the whole that surrounded us. We developed tools to help us – machines, philosophies, religions, laws – that we hoped would help us stay alive, reduce risk to ourselves, and reduce the anxiety of choice and responsibility. And these tools seemed to work so amazingly well in some ways that we forgot our limitations and we blinded ourselves to the ways in which these same tools were doing immense harm. Like drugs, the tools we developed produced immediate results that we liked, while the long-term results were easier to avoid noticing. Similar to drug abuse and the short-term pleasure and long-term toll it exacts, our addiction to controlling every part of nature has led us into a deteriorating spiral of self and other destructiveness that guarantees annihilation if we continue failing to learn from our mistakes. We have turned into control freaks and it is killing us.

When humans intervene in the delicate, amazing, miraculous balance of nature that is the Whole, we have a history of making choices that often result in harming not helping and historically we have buttressed our bad choices with any number of rationalizations instead of learning from our mistakes. Instead of learning how to live in harmony with nature – including our own nature – we have attempted to control, master, overpower and rule nature. We have come to treat each other and everything around us as a machine instead of a living being and the predictable results are indeed predictable. If you treat a living being as a machine, it will die – or it will kill you. Raising children by using very controlling measures produces children who replicate this ultimately destructive preoccupation with control. And trying to treat children who have been already traumatized by external efforts to simply control behavior is doomed to failure.

Authoritarianism is the manifestation of this controlling, mechanistic behavior directed at human beings by other human beings. People who are highly authoritarian tend to believe that there is one “right” way to do things and that whoever is in a position of authority knows and prescribes that “right” way for everyone else to follow. They believe that authority figures must be obeyed because they are authority figures and that disobedience should be punished with physical punishment if necessary. In their minds, the way things have been traditionally done
in the past are generally better than any new suggestions. Anyone who disagrees with established authority is wrong and has opened themselves to well-deserved punishment and therefore it is relatively easy for an authority figure to direct the aggression of other authoritarians toward someone targeted for such punishment. They view any criticism of established authority as divisive and subversive, a sign that things are getting “out of control”. People high in authoritarian traits tend not to learn how to examine evidence, think critically, or reach independent conclusions because they have been so indoctrinated to unquestioningly accept the word of established authority [6].

By its nature, authoritarian behavior can be, and frequently has been, extremely dangerous to the well-being of individuals and to the Whole. Obeying a knowledgeable authority figure in an emergency can be life-saving because group obedience to a single commander promotes unified and rapid group response. But authoritarian behavior is extremely destructive to the health and well-being of a complex, constantly changing environment. The resort to traditional means and methods for addressing problems so frequently preferred by authoritarians does not necessarily provide any useful guides for dealing with challenges that have never existed before. No single authority source or authority figure can hope to sufficiently respond to the great complexity of a globally interconnected world, a constantly changing system, or even a single seriously troubled individual. The inclination to punish disobedience discourages the experimentation and risk-taking demanded by the challenges of complexity. The inability of authoritarians to exercise critical and discerning faculties that represent the best of human cognitive ability puts them at an extreme disadvantage in a world that demands such a high level of reasoning skill and thoughtful engagement with others. Most importantly, perhaps, authoritarian cognitive deficits make it highly unlikely that those with an authoritarian temperament will be able to dive below the surface of human behavior in order to understand conscious and unconscious motivation individual and group motivation and that is a dangerous deficiency.

In the Sanctuary Model we see the leveling of hierarchy as a critical component to creating and sustaining a healthy environment. We strongly discourage authoritarian behavior under normal circumstances while recognizing that in an emergency, resorting to a command structure may be vital. To create Sanctuary, leaders must be strong, able to take charge when they must, expecting accountability from others and holding themselves to the same standards, but who prefer to lead a democratic, participatory group of responsible and intelligent adults who refuse to simply be “told what to do” and who enjoy the challenges of constant innovation.

Conscious and Unconscious

Not only do we human beings all too often treat ourselves, our systems, and other living things as machines, but we act in the world as if we actually understand these machines. We do so by largely focusing on and vastly oversimplifying the external manifestation of what are extremely complex, multidetermined, interactional, ever-changing processes that are flowing within each human being and
every human system. Conscious awareness is only a fragment of what is happening in the individual and the group mind at any point in time. Imagine you are in a very large room and you have no idea how large the room actually is because it is dark and all you have is a small flashlight. When you turn on the flashlight and the light picks out an object ahead of you, that point of light is all you can see. The spot of light represents our consciousness and the room – which may actually be of infinite dimensions – represents the rest of reality, our individual and collective unconscious – all that remains a mystery.

Our motivations, desires, feelings, thoughts, and actions spring from the complex interaction that occurs when environment interacts with human conscious and unconscious intentions. This complexity separates us from machines that have no conscious or unconscious awareness. Machines can be ordered, precise and controlled. Life is messy, changeable, unpredictable, and not nearly as precisely ordered (at least on the surface) – though far more complicated - as any machine. It is this flexibility that allows living organisms to adapt to almost infinitely changing circumstances, something that machines cannot do.

In Sanctuary, a critical goal is to be constantly working together to make that which is unconscious, conscious. The children in our care enter treatment engaging in acts of destruction affecting themselves and others, but their behavior and the motivation behind the behavior is largely unknown to them. We must help them become known to themselves and to us. To do this as staff, we must become known to each other and ourselves. Only when the formerly unknown is known can we be said to actually be able to exercise free will. Unconscious choice can determine reality but because it remains unconscious it remains potentially dangerous, susceptible to the forces of repetition and reenactment that so often determine the course of individual and group history. Our mission is to equip staff and children with the means for understanding, absorbing, working through and changing the trajectory of the children’s lives and to do so we must wake them up into conscious awareness of all the choices that they are capable of making. Only then can we expect them to assume responsibility for the choices that they make.

**Human Beings and Human Systems**

Human beings are not machines. We are living, constantly changing forms of energy. Like individual human beings, human organizations are also living beings. Some people believe that the twentieth century gave birth to a new species – the corporation – and if they are right, organizations are young, and therefore immature beings that still have a great deal to learn from individuals – even though individuals still have a lot to learn - about how to live in harmony with the rest of the living world, how to survive and thrive without damaging the whole [7].

Human social evolution began within small kin groups and eventually, larger tribes. Tribal cultures worked out more-or-less democratic, largely peaceful methods for making decisions, resolving conflicts, and generally working out reasonably safe relationships between and among the generations and the sexes within the tribe. But as human populations swelled, as people settled down and began to claim
property as their own and not the shared property of the group, the reciprocal, interdependent, mutually responsible relationships between individuals so characteristic of small groups, broke down. It became possible for individual frailty, previously contained by small group social obligations and a sense of belonging and attachment, to become unbalanced and out of control. The unleashing of these frailties – a lust for power, greed, aggression, detachment, and other unruly emotions - have led on the one hand to many of civilizations greatest achievements, but on the other hand have also led to the imminent possibility of total annihilation of all life on this planet.

The Sanctuary Model teaches some basic skills necessary to treat an organization as a living entity. We recognize that a new identity emerges within any group that represents more than the sum of the individual parts, as a newborn child represents more than the simple sum of two parents. This emergent being can potentially develop a healthy identity or, like individuals, it can become deviant. The creators of the movie, The Corporation, describe the modern capitalist corporation as sociopathic, checking off all of the characteristics of this diagnostic category as mentioned in the DSM-IV. In Sanctuary, we are endeavoring to describe methods for helping the emergent group identity to develop a healthy sense of self-in-the-world instead of geometrically magnifying the worst aspects of human frailty as so often happens. To do so requires a working knowledge of the group unconscious mind as well as the group conscious mind. Investigators in the fields of organizational dynamics, group dynamics, and most especially for our purposes, therapeutic community, have been describing visible manifestations of the collective mind for many years and in Sanctuary we draw upon this established wisdom to help us to understand how to engage in healthy group process.

**Human Frailty**

We all seek to overcome the extreme helplessness of human infancy and thus human beings are predisposed to seek power and when not properly contained, this need for empowerment can easily turn into a desire, even an addiction to exert power over others, leading to a seemingly endless cycle of oppression and revolt. The treacherousness of early human survival primed us for a high level of aggression that is easily aroused by any sort of threat. Exposure to inadequate protection in childhood, overwhelming stress, experiences of terror all lend themselves to styles of relating to others characterized by detachment, dissociation, and a loss of empathy that can easily result in cruelty directed at others. The lack of emotional fulfillment that can only come from being loved and respected by family and friends frequently results in the substitution of possessions and money for love and this manifests as a greed that can never be satisfied. The internal life and external behavior of boys and girls, men and women are profoundly affected by these forces, although often in very different ways. Both genders have adjusted over the centuries in so many pathological ways that denial of helplessness and its attendant grab for power; unharnessed hatred and aggression; and a lack of loving fulfillment tends to characterize the species. Now, after several thousand years of indoctrination urging
us to believe that this situation is entirely normal, there are very strong injunctions not to even imagine anything other than what exists now.

In Sanctuary we want traumatized people to become empowered to change themselves and change the world for the better. To teach children and adults how to use power for good, we have to figure out how to do use the power we have as adults in service of the good. Children use adults as role models, listening to what we say only if what we say and what we do is consistent. That means that the adults in the environment have to become comfortable with wielding, understanding, discussing, resolving conflicts about, and sharing power in ways that we want children to mimic.

**Need to Control “Basic Evil” and Self-Fulfilling Prophecies**

In many subtle and overt ways, as we are growing up and enter adulthood, we are told that there is nothing that can be done about the human longing for power, greed, aggression, detachment and all the other human frailties. This is one of the fundamental justifications for authoritarian behavior, particularly right-wing authoritarian behavior. We are told that human beings are basically evil, or if not exactly evil, then certainly unremittingly vulnerable to nefarious urges and therefore always in need of control from “higher” – meaning more powerful and presumably knowledgeable – authorities. At work, at school, at home – people must be told what to do, kept under close supervision, held to a rigid set of standards, punished for disobeying these standards. They must learn to ignore their own feelings, intuitions and perceptions if these are in conflict with established authority to whom they are to be obedient. From childhood on most of us live, learn and work within hierarchical, authoritarian systems that punish us, often harshly and without forgiveness, for any mistakes we make and that fail to teach us how to constructively learn from our mistakes. Many of us grow up, go to school, and then continue to work and live within systems that represent the extremes of oppressive authoritarianism, environments that are overtly abusive and within which we are repetitively traumatized.

Regardless of whether we live, learn, and work within “normally” authoritarian or abusively authoritarian environments, the price we pay is a high one. Many of us do not learn to think critically, we do not learn how to challenge basic assumptions about ourselves, other people, and the world, and we do not learn how to successfully resolve conflicts. Instead, what we are told to believe about the results of human frailty become self-fulfilling prophecies. We go into new situations with negative assumptions about ourselves and others and hence automatically self-protect from the presumed harm that others may inflict. The others perceive our self-protective behavior and then react to it by assuming that we intend to harm them. Based on that interpretation, the others adopt negative beliefs about our intentions, styles and behaviors and act in ways designed to protect themselves against us. We perceive this self-protective behavior on the part of others as aggressive, confusing, frustrating, or irritating and perceive it as an attempt to block us from getting what we want. Based on this sequence of events, we become even more convinced that the negative assumptions we made about the others are correct.
Authoritarian systems, once established, work to keep things just the way they are. They fundamentally view change as a threat to the established order and to established power and systematically keep out new information that could contradict the self-fulfilling prophecies that are accepted as truth because given by a higher authority. They do their best to keep the system isolated from any influences that could foster change and in doing so they actively discourage creativity, innovation, and the questioning of established wisdom. Such systems actively engage in equilibrium-seeking processes that emphasize control, order, planning and prediction and the job of leaders in such systems is to dampen and screen out any threat to this equilibrium. They seek to maintain stability at all costs [8].

Stability of course, is not a bad thing. We all seek some degree of predictability and stability in life. Constant change can be frustrating, even maddening. The human ability to predict – and therefore avoid – danger is an evolutionary adaptation that has served us well in the past. However, life seems constantly to be presenting us with paradoxical choices and at a certain difficult-to-define point, our search for stability and predictability becomes itself pathological and non-adaptive. When a situation demands change we must engage powerful forces and allow new information into our systems and these are inherently destabilizing and unpredictable. If they were not so, they could not help to bring about change. The demands for rapid change and adaptation to new circumstances in the modern world have multiplied geometrically and the old, established, authoritarian mechanisms for dealing with change do not allow us to adapt rapidly enough to these changing demands. In a closely connected, interactive environment, change itself is complex. A positive change in one domain can easily result in a negative change in another – or a dozen others. Patterns of change and interaction under such conditions are much better described by systems that function at far-from-equilibrium conditions as described by chaos and complexity theories. Authoritarian systems are poorly designed to adapt to change since they are designed to steadfastly resist change.

If there is one thing in common that people who seek help from our social institutions share it is the need for change. In Sanctuary, we recognize that our primary goal is to bring about change. We must find ways to control the destructive manifestations of human frailty that people habitually engage in while allowing, encouraging, and even propelling change. This means that as a whole system we must constantly juggle the forces of stability and adaptation, risk and movement, creativity and unpredictability. To do such fearsome work, we must therefore develop different means of containing individual and group fear that do not rely on rigid, slow-moving, top-heavy, hierarchical authoritarian methods for coping with unpredictability.

Effects of Trauma

Life and choice is difficult enough without the added complication of traumatic events. When human beings are exposed to overwhelming fear, and particularly when exposed to episodes of repetitive fear, there are many adverse
short-term and long-term consequences among which are some that are pertinent to this discussion. They become less able to learn from the past and to predict future outcomes of action; they are less capable of recognizing and modifying mistakes; they become excessively frightened of grappling with unconscious motivation; the free exercise of their will may become severely constrained by the compulsive reenactment of a traumatic past; they feel themselves separated from other people, themselves, meaning and the Whole. These negative consequences of traumatic experience are compounded if the trauma occurs in childhood because children are still learning the basic elements for predicting future events. The traumatic learning interferes with normal learning thereby skewing and distorting normal developmental pathways.

In Sanctuary, we recognize that behavioral symptoms, cognitive distortions, emotional dyscontrol, and failures of conscience are all manifestations of injury, rather than indicators of sickness or badness – the two current explanations for deviant behavior. Because of our complexly integrated minds and bodies, human beings can be injured in an almost infinite variety of ways, along a long continuum of severity, and as a result, every child responds differently and has a different constellation of symptoms. Nonetheless, they all begin as injured children and injury requires a bilateral approach. On the one hand, the person must learn enough about the nature and course of the injuries to enable him or her to assume responsibility for helping those injuries to heal. On the other hand, the person’s social group - represented by individual adults, family members, treatment environments, and society as a whole – must do whatever is necessary to remove obstacles in the way of each person’s recovery of maximum function, allowing for whatever disabling conditions the child has already endured.

As a consequence of the ways in which exposure to trauma may systematically distort a developing child’s personality, it is critical and urgent that we create the possibility of different life choices for every individual and that we engineer experiences that will maximize the possibility of the person making choices that do not reenact the past. This turns out to be a difficult process since all human beings resist change. But additionally, traumatized people resist change as if their lives depended on not changing even though reality insists that their life often depends on exactly the opposite – on quite radical change.

In order to help people change, it is vital that every staff member, every client and family member understand the ways in which negative life experiences have shaped the thoughts, feeling, behavior, and brain of the person. In Sanctuary, we spend a great deal of time educating everyone about Trauma Theory. In this way and armed with such knowledge, staff members and clients become much more able to respond to injured children in ways that enact different life scenarios rather than reenacting the traumatic past.

**Parallel Process and Collective Disturbance**

If we are to help traumatized people heal then we must create environments to counteract the effects of trauma and such environments cannot themselves be
traumatizing. We must design, create and maintain organizations that actively respect the balance of Nature and the integrity of the Whole and that do no harm. Unfortunately, in many organizations today, the exact opposite happens – harm does occur. Instead of counteracting and helping to resolve the damage left by exposure to traumatic experience, individual helpers and helping systems frequently compound the damage by engaging in behavior that actually parallels the original damaging circumstances.

In Sanctuary we focus a great deal of attention on parallel processes. We believe that there are complex interactions between traumatized clients, stressed staff, pressured organizations, and an oppressive political, social and economic environment for the work that we do. The result is that our systems frequently recapitulate the very experiences that have proven already to be so physically and psychologically toxic for the children we are supposed to treat. For the most part, these parallel processes occur at an unconscious group level.

Rarely do individual staff members intend to hurt or stifle the growth of the people in their care. And yet it happens all the time as staff members get drawn into reenacting traumatic experiences with the clients without even recognizing that they are doing so, and administrators are similarly drawn into reenacting damaging previous experiences with staff. In a similar way, our treatment environments are embedded within larger service delivery systems that inadvertently create regulations, assert demands, and inflict punishments that are double-binding, ineffective, and sometimes even destructive. These measures are frequently undertaken by the larger service delivery systems in response to financial and legal pressures, inadequate understanding and communication, and even abuses of power and control deriving from regulatory bodies, local and state government, and national government.

In authoritarian systems, those at the top of the authority hierarchy exert control over those below. When the exercise of power is contradictory, inefficient, ineffective, unfair, or abusive there is little that those below can do except pass the abuse down to those below them in each successive level. Since authoritarian systems discourage critical thinking, punish dissent and reward obedience, feedback systems – frequently called “quality assurance or quality improvement methods” – cannot function effectively and are frequently of minimal use. Because authoritarian processes discourage the very kind of feedback that is necessary to truly enhance and self-correct performance, quality assurance programs frequently fail to ensure true quality while providing the pretense that steady improvement is occurring.

Destructive parallel processes usually originate at the top of a hierarchy with some unspoken conflict between mental models and basic assumptions at the level of organizational purpose and leadership and spread downwards through the staff and into the clients. The clients, as the most vulnerable members of the community, act-out the conflicts from above that then merge with their own internal conflicts. Since the emotional charge that is influencing the client’s behavior is happening at the level of the group unconscious, the staff can easily be deceived into thinking that the client’s behavior is unrelated to the treatment environment and is purely a sign of individual pathology. This unconscious emotional charge can precipitate a collective disturbance unwittingly involving many members of the community and fueling
repetitive crises while the real causes of the crises remain outside of conscious awareness.

In our present service delivery environments, collective disturbance is almost universal. As pressures to do more and more, with increasing speed, and fewer resources have significantly magnified the stresses placed upon individual programs and providers, underlying conflicts between and within professions and fundamental and long-standing contradictions in the delivery of mental health services have also become magnified, while little if any time is allotted to resolve these conflicts. Since the typical human reaction to stress is fear and since fear elicits measures to exert control, the reaction of human systems to stress is to become even more authoritarian, more controlling, more punitive, more reactive, and — stupider. Just when environmental stress creates a need for even more integration, more critical thinking, better integration of diverse points of view, and more effective and efficient methods for responding to complex demands.

The methodology involved in creating Sanctuary is specifically designed to minimize the damage caused by destructive parallel processes and to maximize the creation and maintenance of positive parallel processes. We believe that the failure to resolve conflicts in a timely and constructive fashion at leadership levels from top to bottom is the major contributor to the development of vicarious trauma or secondary stress on the part of the staff, as well as to treatment inadequacy and failure. Sanctuary requires all members of the community to share an understanding of how trauma impacts us all and of how every individual and every group is motivated by both conscious and unconscious desires and fears. We believe that the universe is comprised as a hologram, meaning that regardless of the level of analysis we pursue, parallel processes are occurring and that the whole is reflected in all of its parts [9, 10]. We also contend, along with many quantum scientists, that at a deeper level of reality, all things in the universe are interconnected.

This interconnection, including emotional interconnectedness, helps to explain why in a therapeutic milieu, a conflict between two staff members could be connected to a suicidal gesture on the part of a client that neither staff members are even working with. At the intimate level of treating traumatized children and adults, this means that creating change on one level of reality can affect change in other layers of reality. It has been our experience that increasing the health, integration, well-being, knowledge, and enjoyment of the staff changes the overall environment. Placing an injured person in such an environment helps the person to heal even if the environment lacks other resources as long as the response of the staff is sufficiently sophisticated that the staff members know how to avoid reenacting traumatic scenarios with the children.

Why Democracy Matters

There are a number of reasons why in Sanctuary we insist on the embrace of democratic processes. Democracy is the most successful method of nonviolence that groups of people have ever evolved. Even groups as large as nations do not engage in armed combat against each other when they are practicing democracy [11].
Democracy is designed to minimize the abusive use of power and level the command hierarchy that so easily emerges in groups of people who are under stress [12].

When we use the word “democracy” in Sanctuary terms, we do not mean the simple act of voting but instead mean an attitude, an underlying organizational philosophy, what others have termed “deep democracy” or “strong democracy”. Benjamin Barber has been writing extensively about democratic processes and he describes strong democracy as:

“a distinctively modern form of participatory democracy. It rests on the idea of a self-governing community of citizens who are united less by homogeneous interests than by civic education and who are made capable of common purpose and mutual action by virtue of their civic attitudes and participatory institutions rather than their altruism or their good nature. Strong democracy is consonant with – indeed it depends upon – the politics of conflict, the sociology of pluralism, and the separation of private and public realms of action.... Because democratic politics makes possible cooperation and an approximation of concord where they do not exist by nature, it is potentially a realm of unique openness, flexibility, and promise. It is in fact the quintessential realm of change that, while it is occasioned by conflict and by the inadequacy of man’s higher nature, becomes the occasion for mutualism and the superseding of his lower nature. This is perhaps why John Dewey was moved to call democracy not a form of associated life but ‘the idea of community life itself’ (p. 117-119) [13].

Barber has captured in his description a number of the key points about democratic processes that are so critical even in the microcosm of a treatment setting. In such a setting, a number of people with different backgrounds [gender, ethnic, religious, racial], training experiences, knowledge bases, and roles are brought together with a common goal – to help children, adults and families recover from traumatic experiences including the trauma of mental and physical illness. But having a common goal does not mean that the treatment staff automatically share a common framework for getting to that goal and without a shared framework of meaning and implementation, treatment is likely to founder on the shoals of dissension. A treatment program is a small community that must provide a healthier environment for the people it is designed to treat, than those families and communities within which the person has already suffered. If the treatment community is not healthy, the staff will be vulnerable to engaging in destructive reenactments with the clients and with each other.

Establishing a common framework of meaning and implementation for treating psychologically injured people requires an extraordinarily high level of cooperation, flexibility, compromise, tolerance of conflict and an ability to set aside personal positions in favor of finding a workable group solution to complex problems. Such an atmosphere can be encouraged, supported, and promoted by leaders but must be self-organizing. At seven o’clock in the evening, a staff member cannot be dependent on calling in the Chief Operating Officer to settle a dispute or engage in a
therapeutic intervention with a client. That staff member must be sufficiently embedded in a community of meaning that he or she has some framework for making decisions and can be reasonably sure that the decision will be in line with the overall goal of helping the child to heal.

This self-organizing methodology is in place because the staff member has had the opportunity to adopt the basic values and guiding principles of the program by routinely participating in decision making, problem-solving, and conflict resolution since the first day on the job. If the intervention fails to help or even escalates the problem, the staff member must remain confident that help will be available from other members of the treatment team and that even if he or she has made an error in timing, judgment, or policy implementation, that he or she will have the learn from the mistake, rather than simply being punished or excused. In such an environment, that staff member can also be confident that the more complex the presenting problem, the more likely it is that a plurality of opinions will be sought and synthesized in order to formulate a creative, effective and complex response.

References

Safety

• **SAFETY** is taking care of your body and your Self: Physically, Psychologically, Socially, and Morally
  - **Physical Safety**: Being safe in your body and safe in the world
  - **Psychological Safety**: Being safe with yourself
  - **Social Safety**: Being safe with other people
  - **Moral Safety**: Being safe with a guiding value system

• **SAFETY** is about setting appropriate BOUNDARIES
  - Saying YES only when you mean it
  - Saying NO (and sticking to it) when you mean it
  - Knowing the UH-OH or warning signals of “danger ahead”
  - Knowing and experiencing the OUCH of having your boundaries violated or violating the boundaries of someone else
We are all born with emotions and then we must learn to manage our emotions throughout our lives.

Feelings are NOT the enemy! Our challenge is to learn how to use our emotions to inform our thoughts without letting our emotions determine our behavior.

Learn how to identify and USE your feelings!

GLAD   MAD   SAD   SCARED   SHAMED

It’s important to have “volume control” - connecting the appropriate level of the appropriate emotion with what the situation calls for

Feelings: 0-----3-----5-----7-----10

Situation: 0-----3-----5-----7-----10

Remember: You have the power to understand and to manage your emotions without being CONTROLLED by them!
Loss

- Loss is about recognizing and then managing the losses that come with living.

- Losses are a part of everyday life; but a life that has had too much violence or trauma has many more unexpected losses:
  - Loss of people
  - Loss of opportunities
  - Loss of one’s childhood (the experiences AND the years)
  - Loss that is associated with Addictive Behaviors: People, Places, and Things
  - Loss of feeling whole

- To experience Loss is to experience all of the emotions: Glad, Mad, Sad, Scared, and Shamed. That is why it is not easy to do, and often can make a person feel UNSAFE.

- All change, even changes for the good, mean having to give up something, let go, and move on.
Future

- Future is about managing the FREEDOM and the RESPONSIBILITIES that come with the power to make choices in one’s life – choices that are not determined by the past.

- CHOICES:
  - To create a better life for oneself and one’s children
  - To stop the cycle of addictive/compulsive behaviors
  - To stop the patterns of violence in the family
  - To lead by example
  - To stop repeating the past

- To learn how to use the power of IMAGINATION to design and then create a new future for yourself!

*It is one of the most beautiful compensations of life, that no man can sincerely try to help another without helping himself.*

Ralph Waldo Emerson
American Philosopher
Welcome to SELF Group. We would like to thank you for taking time out of your day to sit down with others and talk about those matters of importance to you that are creating problems in your day-to-day life.

The language of SELF – Safety, Emotions, Loss, and Future – will be familiar in some ways. But we are going to teach you a way of translating the everyday problems in your life into a new way of organizing and understanding them so that you can resolve those problems more effectively.

In order to make this group most helpful we need some basic guidelines that all of us must respect:

- This group will occur on _________________ at ______________ AM/PM
- Try to attend every session
- Do your best to arrive on time,
- Participate to the best of your ability,
- Turn off cell phones, or if you are expecting emergency calls, ask someone who is not attending the group to monitor your calls, or put the phones on vibration-only
- You have to be sober to make any use of the group, so do not use intoxicating substances before (or during) the group.
- If this is a successful group, disagreements and spirited discussions will occur – please commit to disagreeing respectfully.
- Most of us find it hard to keep to a schedule, especially when we are too tired, too frustrated, too sad, too bored or when things are just too much – make yourself come to the group anyhow.
- It is important for us to respect each other’s privacy and be able to trust each other. What is said in the group stays in the group.

We look forward to an interesting and helpful group experience.

*Human group life is an essential condition for the emergence of consciousness.*

George Herbert Mead (1863-1931)
American Philosopher