

START NOW

Facilitator Manual

Version 3.0 05-24-2018



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Acknowledgements

Version 3.0

START NOW has evolved substantially since it was first implemented in 2007. Many people have subsequently been involved. Sincere thanks are due to the contributions of Cheri Hartman PhD, David Hartman MD, Emily Painter MA, Heather Saunders NP, Anders Sylvester-Johnson NP, and Albert Truong.

Original Version

This document is based on the work, input and contributions from several other people including: Kelly Beckom, Paul Chaplin, Rocio Chang, Marisol Cruz-St. Juste, Karen Davis, Jennifer Faloretti, Julian Ford, Cynthia Garrett, Andrew Goldberg, Catherine Gonillo, Megan Goodfield, Joseph Grzelak, Jane Harrison, Nancy Hogan, Amy Houde, Marc Levant, Christopher Innes, Andre Ivanoff, Linda Kersten, Karen Kesten, Phil Magaletta, Alix McLearn, Daveon McMullen, Michael Nicholson, Stacey Rich, Deborah Shelton, Patricia Sollock, Amy Stomsky, Cara Sullivan, Malini Varma, Jesse Wagner, and Sarah Wakai. This presentation was supported by funds from the National Institute of Justice (#2002-IJ-CX-K009). We gratefully acknowledge those at the Connecticut Department of Correction who contributed to our research in evidence-based therapy for offenders. We also thank the offenders at those institutions who were study participants.

Introduction to START NOW

START NOW integrates research, theory and clinical experience. It is designed to be a strengths-based approach, focusing on an accepting and collaborative clinical style. At the same time, this approach places the primary responsibility for change on the participant. This intervention was also designed to take into account the pragmatic factors of a variety of care delivery settings, which frequently face limited treatment resources. Originally developed for correctional environments, it has been adapted for use in other settings that face similar resource constraints and extensive need for effective, reliable manual guided treatment for individuals living with impairments of impulse control, emotion regulation, and management of interpersonal relationships. The underlying theme is that while many of the people to whom we provide care present in different environments at different times in their lives, they have skills deficits that can be addressed wherever they may present.

The purpose of this Facilitator Manual is to provide a theoretical and practical background to START NOW and to present detailed “lesson plans” for each START NOW session. The intent is to support efficient implementation and sustainability utilizing (typically) masters-prepared clinicians as group facilitators.

Correctional Settings

The START NOW Skills program was originally designed for use specifically in correctional facilities to treat offenders with behavioral disorders and associated behavioral problems. It was developed to meet the needs for a situationally and cognitively appropriate broad-ranged, manual-guided treatment for behaviorally disordered offenders. Correctional systems currently find themselves at a challenging crossroads between the trends to downsize prisons and budgets (Patel, 2011) while reducing recidivism rates, and providing effective care for mentally ill offenders once cared for at state mental health facilities. Although the process of deinstitutionalizing individuals with mental illness began in 1955 (Fagin, 1985), this process continues today with an increasing number of these individuals involved with the criminal justice system and no indication of a decline in that trend (Thigpen, 2007). Based on data obtained from the Bureau of Justice Statistics, there are over 320,000 (about 16 percent) mentally ill offenders in the nation’s prisons and jails in need of mental health treatment. The need for mental health treatment among the incarcerated is great; however, treatment resources within correctional settings are often quite limited (Trestman, Appelbaum, Metzner 2015). There is a need for effective and economical therapies to treat incarcerated individuals with significant mental health issues.

Forensic Psychiatric Hospitals

In collaboration with the Forensics Executive Committee of the National Association of State Mental Health Program Directors, we adapted START NOW for use in forensic psychiatric hospitals. A separate version of the Participant Workbooks now exists for

that purpose, with vignettes specifically adapted for those environments. Most notably, a Mixed Gender Group version was developed for this context.

Community Version

In 2017 and 2018, work was conducted at Carilion Clinic and the Virginia Tech Carilion School of Medicine to adapt START NOW for use with community populations, notably those in outpatient based opioid treatment programs. Focus groups were held with participants in a pilot trial of START NOW to optimize this version. A parallel set of Participant Workbooks is available for use in those settings. Given the nature of ambulatory settings, only one set of Workbooks is provided; gender-specific issues are to be addressed as appropriate by the Facilitators.

Development of START NOW

START NOW is an integrative evidence-informed model of treatment that grew out of a National Institute of Justice-funded study (2002-IJ-CX-K009), which tested a version of Dialectical Behavior Therapy (DBT) adapted for correctional settings. DBT was originally developed to treat people diagnosed with Borderline Personality Disorder, targeting associated impulsive and self-destructive behaviors (Linehan et al., 1991). McCann, Ball, and Ivanoff (2000) suggest that DBT is well suited for the treatment of a forensic population given the high incidence of personality disorders, and the priority of managing and reducing aggression in forensic environments. Several correctional facilities have implemented DBT (Berzins & Trestman, 2004), however the costs of maintaining such programs can be prohibitive in some correctional systems (Shelton et al., 2009). In the study of correctional-modified DBT, the first phase of treatment provided skills training groups alone, and participants showed reduced aggression and disciplinary infractions, and improved mood and coping (Shelton et al., 2009). Given these findings and given the typical resource limitations within many mental health care settings, a work group was formed to develop a relatively cost-effective manual-guided intervention for justice-involved individuals with behavioral and emotional disorders.

An essential initial step was to create a solid evidence-informed intervention prior to attempting to pilot and test the resulting product, with many sub-steps entailed in this process. Relevant literature was reviewed, and a panel of clinicians and researchers with expertise in correctional mental health treatments was included in the process of both brainstorming and reviewing the planned intervention (see Acknowledgements). Given that the purpose of START NOW is to teach participants a range of coping skills, various members of the panel contributed to the process of developing a list of which types of coping skills need development and strengthening within this population. In addition, Dr. Diana Fishbein, a cognitive neuroscientist focused on cognitive issues among inmates (Fishbein et al., 2009) was consulted at numerous points in the development process to tailor the intervention, taking into account research findings.

The resulting intervention utilizes group therapy as the primary treatment approach to increase the cost-efficiency of treatment, and to allow participants to provide support

and feedback to each other. Group therapy is often considered more convenient and cost-effective than individual therapy, which is viewed as more idiosyncratic and allows for increased confidentiality (DiFazio, Abracen, & Looman, 2001). One source explained, “Highly individualized one-on-one cognitive-behavioral therapy, provided by clinical psychologists or other mental health workers, is simply not practical on a large scale within our prison system” (Wilson, Bouffard, & Mackenzie, 2005). Since its development, START Now has been utilized in over a dozen different correctional systems and multiple forensic psychiatric hospitals in several countries. Results from an evaluation of over 850 participants in the Connecticut correctional system demonstrated significant improvement in the risk of disciplinary infractions and psychiatric inpatient bed days (Kersten et al 2016; Cislo et al 2016).

Therapeutic Approach:

The START NOW Skills program is an integrative model of treatment, based on several theoretical approaches. These approaches were chosen for a number of reasons: research evidence, suitability for treating individuals with behavioral disorders, and appropriateness for integration with other aspects of the planned intervention.

Cognitive behavior therapy (CBT) is the key theoretical underpinning of the START NOW approach; behavior is understood in the context of its antecedents and anticipated consequences, i.e., through “functional analysis”. Also, CBT emphasizes the primary role of understanding cognitive processes in determining both mood and behavior; thus behavioral and emotional responses are not determined simply by what happens, but by how a person interprets what happens. This overall formulation facilitates many opportunities for participants to gain increased understanding and control of their behavior, including recognizing and coping with triggers, modifying cognitions, and substituting alternate behaviors that serve similar functions. CBT involves learning and practicing new skills both within and between therapy sessions (Monti, Kadden, Rohsenow, Cooney, & Abrams, 2002).

There are positive indications for using CBT, not just with community-based populations, but with those who are institutionalized. Incarcerated or institutionalized individuals treated using targeted cognitive behavioral approaches have made significant positive changes, including: reduced depression (Wilson, 1990); reduced vengeful attitudes (Holbrook, 1997); and improved self-esteem, along with reduced anxiety and aggressive traits (Valliant & Antonowicz, 1991). Incarcerated women treated with CBT for substance use disorders and posttraumatic stress disorder (PTSD) reported high levels of client satisfaction with this intervention, and significantly reduced PTSD symptoms (Zlotnick, Najavits, Rohsenow, & Johnson, 2002).

Cognitive-behavioral therapy (CBT) has emerged as the “predominant psychological method of treating not only mental illness, but a broad spectrum of socially problematic behaviors including substance abuse, criminal conduct, and depression” (Thigpen, 2007). There has been much debate regarding the effectiveness in rehabilitating

criminal offenders; however, “a consistent theme in numerous reviews of the rehabilitation literature is the positive effects of cognitive and cognitive-behavioral approaches for treating the offender population” (as cited in Wilson, Bouffard, & Mackenzie, 2005). Several meta analyses have been conducted illustrating the value of cognitive-behavioral therapy as an effective tool in reducing recidivism (Pearson, Lipton, Cleland, & Yee, 2002) and group-oriented cognitive behavioral programs for reducing criminal behavior as much as 20-30 percent compared to control groups (Wilson, Bouffard, & MacKenzie, 2005).

Typically, cognitive-restructuring, coping-skills, or problem-solving therapies have been the primary cognitive-behavioral approaches employed with individuals dealing with impulsivity, emotional instability, and interpersonal relationship disturbances. The cognitive-restructuring approach considers problematic behaviors to be a result of dysfunctional or maladaptive thought processes (Ross & Fabiano, 1985). Most cognitive-behavioral programs developed for justice-involved individuals tend to fall into the cognitive-restructuring category, focusing on cognitive deficits and distortions (Henning & Frueh, 1996), and are provided primarily in a group format.

CBT meets the criteria for an intervention that is pragmatic, because counselors trained in CBT have shown high levels of skillfulness in implementation, confidence in their ability to use the approach successfully, and satisfaction with CBT training (Morgenstern, Morgan, McCrady, Keller, & Carroll, 2001). Also, CBT is frequently conducted in group psychotherapy, which is practical given the economic limitations of many real-world settings (Morgan, Winterowd, & Ferrell, 1999).

START NOW helps participants begin to view their own actions using a CBT framework through a number of strategies:

- In-session exercises and discussions to reinforce concepts and encourage trying out new skills, including CBT procedures such as role-play, brainstorming, problem-solving, and behavior shaping.
- An “ABC system” for functional analysis of behavior (described in facilitator instructions for session 4).
- Practice exercises, in which participants are asked to complete tasks between sessions that allow them to practice new skills.

Motivational Interviewing (MI) or motivational enhancement therapy (MET) is a client-centered approach designed to address ambivalence and elicit motivation for change (Miller & Rollnick, 2002). MI complements the overall CBT approach of START NOW. This combined approach was selected because MI can develop motivation to change maladaptive behaviors (Chambers et al., 2008; Howells & Day, 2006), and CBT provides the tools to effectively carry out this change. CBT and MI have been combined in other effective treatment interventions (Dennis et al., 2004; Diamond et al., 2002; Steinberg et al., 2005). A number of studies support the use of MI with justice involved individuals. Incarcerated veterans who received feedback with MI, compared to a non MI control group, were significantly more likely to schedule follow-up addictions

treatment appointments, and trended toward increased treatment retention at three months post-incarceration (Davis et al, 2003). MI has increasingly been recommended for use by probation officers (Clark et al., 2006); offenders supervised with an MI approach have shown more significant positive changes in crime-related attitudes, as well as reduced endorsement of substance related problems (Harper & Hardy, 2000). In another study (Stein et al., 2006), incarcerated adolescents were randomly assigned to a brief (two-session) intervention of either MI or relaxation training. Post incarceration, those receiving MI had lower rates of drinking and driving, and of riding in a drinking driver's vehicle. In a quasi-experimental study, incarcerated participants offered a brief MI intervention were compared to those receiving treatment as usual (Antiss, Polascek & Wilson, 2011); at two year follow-up, those in the MI condition showed significantly reduced rates of reconviction (57% vs. 78%). At the same time, research assessing the impact of MI on justice involved individuals is still in the early stages; in McMurrans's 2009 review, she found that MI can lead to improvements in reported readiness for change, but that the results regarding behavioral change were mixed.

The following aspects of MI are included in START NOW:

- The assumption that ambivalence about change is normal; this is reflected throughout the participant workbook and facilitator manuals;
- Multiple opportunities to elicit change talk & work through ambivalence are built into discussions and exercises;
- Numerous opportunities to support self-efficacy and affirm positive behaviors are also presented throughout the therapy.

Given this, facilitators providing START NOW need to be prepared to utilize the following MI strategies:

- **Express empathy and acceptance** both non-verbally, through eye contact, body position, & facial expression, and verbally, through reflective comments.
- **Develop discrepancy** by helping the participants observe and describe the discrepancy between the results their current behaviors produce and the results they would like to get.
- **Roll with resistance.** Don't get rattled when participants argue against the possibility of change and try not to pressure them into positive change. Alternative facilitator responses to resistance include:
 - **double-sided reflections**
Comments acknowledging both sides of the resistance
 - *“You’ve been telling us that using drugs has caused you a lot of problems like the arrests and problems with your family, and at the same time you like the feeling you get from them.”*

- *“You want your life to get better, but you feel it may be too late to change.”*
 - **comments emphasizing personal choice**
 - *“Whether or not you give these skills a try is your choice.”*
 - *“Only you can decide what you want for your future.”*
 - **empathic reflections**
 - *“It sounds like doing this real life practice exercise was pretty frustrating for you.”*
 - *“I hear that it’s hard to concentrate on this when you’re so worried about your son.”*
- **Support self-efficacy** using a couple of different approaches:
 - Reinforce any expression of willingness to hear information from you, to acknowledge the problem(s), and/or to take steps toward change.
 - Make the connection between previous successful change and the potential to change the current problem.
- **Open-ended questions** and statements inviting elaboration are preferred to closed questions or directive communications.
- **Affirm the participants** as people by expressing understanding and appreciation of their positive qualities.
- **Elicit change talk** by asking questions and making comments that encourage the participant to tell you why change is desirable, rather than you trying to convince the participant.
- **Summarize**, through reflective comments, what the participants said about their mixed feelings about change, particularly focusing on reasons for change.
- **Offer feedback** in such a way that acknowledges that it is: 1) the participants’ choice whether or not they implement the ideas; and 2) any associated consequences are their responsibility.

Neurocognitive-Modifications of the Clinical Approach were incorporated into START NOW. Studies reflect that a significant number of justice-involved individuals have had traumatic brain injury (Williams et al., 2010), and standard therapies may fail if these impairments are not taken into account (Fishbein et al., 2009). Consequences of TBI may include reduced verbal capacity and shortened attention. START NOW is designed to take into account such limitations, given consultation with Dr. Fishbein. The participant workbook is written at a fifth grade reading level, with little or no jargon, and includes many iconic images throughout to enhance understanding and retention. Repetition of key concepts and real-life practice of skills is emphasized throughout the intervention.

Dialectical Behavior Therapy (DBT), developed by Linehan (1993a), is a cognitive behavioral treatment combining behavioral principles, Eastern mindfulness concepts, and a “dialectic” between present acceptance and preparation for future change. DBT was originally developed to treat people diagnosed with Borderline Personality Disorder, targeting associated impulsive and self-destructive behaviors. It has become the first empirically supported treatment for Borderline Personality Disorder (Linehan, Armstrong, Suarez, Allmon, & Heard, 1991; Linehan, Tutek, Heard, & Armstrong, 1994; Miller & Rathus, 2000). McCann, Ball, and Ivanoff (2000) suggest that DBT is well suited for the treatment of a forensic population for a number of reasons: the high incidence of personality disorders among incarcerated individuals, previous findings of efficacy of CBT interventions in forensic environments (that is, psychiatric hospitals for people diverted from jail or prison by the courts because of their mental illness), the priority of managing and reducing aggression in forensic environments, and their findings that DBT implementation on a forensics unit was associated with reduced burnout of unit staff.

START NOW is compatible with some key concepts from DBT:

- Emphasis on acceptance of dialectics, for example, the idea that “*having reduced freedom is difficult to accept **and** it’s time for me to face my legal consequences.*”
- Mindfulness as a fundamental skill. Mindfulness is a broad skill with a long history in Eastern spiritual practices. DBT innovatively combined mindfulness practices with CBT to improve emotional coping. START NOW incorporates a narrower subset of mindfulness skills- “Focusing”. Focusing makes greater use of external stimuli and structured activity linked to those external stimuli. Focusing is utilized in START NOW, rather than mindfulness, for a number of reasons:
 - A higher percentage of individuals within the justice system have a history of learning and cognitive difficulties, and so may benefit from an approach that is somewhat more concrete and structured than general mindfulness.
 - START NOW is a fairly brief 32 session therapy, designed to take place over the course of 16 to 32 weeks. Focusing is likely to be more readily learned in this relatively short time frame, compared to general mindfulness skills.
 - Participants vary in their capacity for abstract thinking, and those with limited current capacity for abstraction are more likely to understand and successfully use Focusing compared to mindfulness.

Trauma Sensitive Care is an approach that takes into account the impact of traumatic experiences on individuals, as well as on the therapy process. One of the assumptions of trauma sensitive care is that some behaviors that are not currently helpful began as attempts to adapt to highly stressful situations; this viewpoint has been incorporated into the START NOW approach. START NOW also utilizes some concepts and terminology from the trauma sensitive program, Trauma Affect Regulation: Guide for Education and

Therapy, abbreviated as “TARGET” (Ford & Cruz-St. Juste, 2006a&b). Some of these included concepts are:

- Focusing skills as an alternative to automatic trauma-based reactivity.
- Self-monitoring as a skill for self-regulation.

START NOW can be provided as a stand-alone intervention. Alternatively, in the case of populations presenting with a high incidence of trauma histories and related symptoms, it may be employed in combination with TARGET. In such cases, it is recommended that these interventions be provided sequentially with participants first participating in TARGET, then in START NOW.

The Overall Approach of START NOW. Given this integration of approaches, the overall START NOW approach includes the following points, which are reinforced throughout the treatment protocol: 1) Reinforce personal responsibility for behavior; 2) Look for multiple opportunities to teach the connections between thoughts, feelings, and behavior, including the following key points: 2a) “Slow down and think before acting”; 2b) “No one makes you feel a certain way- it’s how you look at things”; 2c) “Your feelings don’t make you act a certain way- you choose how you respond to situations”; 3) Identify strengths & build on them; and 4) Appreciate and respect individual differences, capabilities and limitations.

Gender-Responsive Facilitation of START NOW

While it is expected that the general treatment approach and parameters of START NOW are maintained across groups, facilitators are encouraged to adjust their approach in relation to the gender of group participants, given that the psychosocial needs and treatment responses of male and female participants tend to differ. There are gender specific participant workbooks, with images and language corresponding to the gender of the participants. In addition to this, the introduction section of each of the four START NOW units includes a summary of specific gender-related findings and facilitator strategies that apply to the area of functioning addressed within that unit. Also, the session-specific facilitator instructions include tips for gender-responsive facilitation of each START NOW session. This information serves as a general guide, and facilitators are encouraged to use their clinical knowledge of individual participants to further tailor their intervention style.

Gender Differences among Justice-Involved Individuals. Fundamental to the successful treatment of male and female group participants is an understanding of gender-specific differences. A first step to gender-sensitive treatment planning is to acknowledge gender-based offense-related and demographic characteristics, as well as differing factors that influence female versus male behavioral patterns (Grande, Hallman, Underwood, Warren & Rehfuss, 2012). A brief overview on the most recent and distinct findings of research on gender-related differences will therefore be provided.

With regard to offense-related factors, a number of studies have found that female offenders are less likely to commit violent offenses and more inclined to commit drug or property offenses (Sorbello, Eccleston, Ward & Jones, 2002). Furthermore, violent offenses have been identified as the major growth factor for the male prison population, whereas drug offenses represent the largest source of growth for female offender populations (Bartlett, 2006; Bloom Owen & Covington, 2003). The incarceration of both genders has been associated with drug dependency issues, however, specifically women were found to present with a higher likelihood of being addicted to and/or under the influence of substances when committing a crime (Lemmon, 2008). While drug use is generally higher for female offenders, alcohol abuse is more often seen in males (Bloom et al., 2003). In addition, male offenders tend to have longer prior criminal histories and higher recidivism rates when compared to their female counterparts (Hubbard, 2007; Jiang, David, Min & Ing, 2013).

Distinct demographic characteristics of the two gender groups further evoke different pictures. Female inmates tend to be at disadvantage with respect to several factors. In general, these women tend to be undereducated and unskilled, placing them at high risk of experiencing poverty (Ney, Ramirez & Van Dietsen, 2012). Although these factors also characterize a high number of criminal justice involved men, criminal justice involved females tend to present with these attributes to an even greater extent (Covington, 1998). Not surprisingly then, women under correctional supervision are characterized by more serious health problems than males, including poor nutrition, inadequate health care, and drug use (Owen, Wells, Pollock, Muscat & Torres, 2008). A high proportion of female offenders have at least one underage child (approximately 70%); few of these women ever receive visits of their children during their period of incarceration (Bloom et al., 2003). Furthermore, research on female offenders has identified a high rate of physical and/or sexual abuse histories, predisposing these females to develop mental illnesses such as PTSD, major depression, anxiety disorders and/or substance abuse (Owen et al., 2008; Women's Advocacy Project, 2007). A higher incidence of mental health problems, as well as a high likelihood of suffering from concurrent disorders, characterizes the female offender population (Lemmon, 2008).

Diverging behavioral patterns of male and female offender populations have also been established within research. Whereas men are more inclined to focus on themselves while incarcerated, women are more likely to maintain relationships to significant others such as parents and/or children (Bloom et al., 2003). These relationships continue to play an important role with respect to these women's sense of identity, self-worth, and purpose in life (Bloom et al., 2003). The Relational Model, first introduced by Miller (1976), offers more insight into the importance of interpersonal associations to women's emotional well-being. The model postulates that connection represents women's primary motivation throughout life, whereas men's emotional development is defined through a process of separating from others (Miller, 1976). Female emotional development is thought to be dependent upon interpersonal relationships, and experience of disconnection or isolation will lead to feelings of anxiety, disempowerment and depression (Owen et al., 2008).

Differences in male and female communication styles also factor in. In mixed group settings, men have been found to talk more than women and interrupt more frequently, while engaging in less self-disclosure when compared to their female counterparts (Bloom et al., 2003). Women, on the other hand, tend to ask more questions, challenge authorities and decisions, and show a great need to engage in discussions (Bloom et al., 2003). Whereas men are more likely to receive disciplinary tickets for violent infractions, women are more prone to receive tickets for less serious rule violations (Owen et al., 2008), with some of these infractions related to questioning and challenging authority. Finally, women have been identified to show more empathetic behaviors and to be more adept at understanding nonverbal behaviors (Bloom et al., 2003).

When considering these above-mentioned findings, it becomes evident that facilitating a male versus a female group will sometimes require different degrees of emphasis on certain topics and/or skills in order to tailor the intervention to the specific needs of the participant group. For instance, whereas men may require more help identifying and responding to emotions, women may need more opportunity to recognize and process interpersonal relationships. When facilitating START NOW groups with female participants, facilitators need to be prepared to address the particularly high rate of psychosocial adversities and comorbid problems faced by participants. Each gender group may also bear its own prevailing challenges. Whereas it may be harder for facilitators to elicit self-disclosure in male participants, it may be more difficult to limit rounds of discussions within female groups. Throughout this manual, gender-responsive considerations and tips will be provided to help tailor the START NOW approach to the specific needs of its target group. Similar skills are required to create balance in mixed gender groups, creating space for women to share and participate appropriately.

Structure & Design of START NOW

Use in the Correctional or Forensic Psychiatry Inpatient Environment. This program was first developed for use in a structured and supportive environment, or milieu. This means that, in addition to the clinical or education staff being trained in this approach, uniformed custody staff or other support staff should be both familiar with START NOW and open to reinforcing the approach in their interactions with participants. Developing staff buy-in is critical to program success. Tips will be provided for increasing the likelihood of staff engagement in this process.

While implementing START NOW requires staff commitment and resources, this skills training program was designed with awareness of many of the pragmatic factors of these settings (for example, varying lengths of stay and frequent staffing limitations). Awareness of pragmatic factors is one of the reasons skills groups are employed as a primary modality in START NOW: multiple participants are seen simultaneously. Group therapy is also utilized because participants benefit from structured peer interaction that provides opportunities for support, feedback and skill practice. If there are clinical or

pragmatic reasons to provide these sessions individually, however, this is a reasonable option.

Use in Community Settings. Many of the same resource limitations present in institutional settings persist in the community. START NOW programs adapted for community settings allow for similar cost-effective implementation, and are intended to enhance overall clinical engagement and active adherence to treatment.

Criteria for Group Admission. The START NOW program is designed to treat individuals demonstrating a pattern of frequent maladaptive behaviors and limited coping skills. Participants are referred by health care professionals and staff members who identify these behavioral patterns and their respective coping deficits. Individuals who should be particularly considered for this program are those who:

- Have mental health issues that call for an outpatient or higher level of care
- Present with a history of suicidal or parasuicidal behaviors
- Have significant substance use disorders, disorders of impulse control, or emotional instability

The vocabulary and reading level of the participant manual has been designed to be appropriate for participants who may have cognitive limitations. The participant workbook is written at a fifth-grade reading level, with simplified vocabulary and numerous visual cues. The written examples and pictures were chosen to be context appropriate for incarcerated, forensic, or community-dwelling individuals. Participants who comprehend and speak English, but who are fully or partially illiterate have been able to participate in START NOW. This includes non-native speakers as well as those for whom English is their first language, but who have difficulty reading or writing English. In such cases, these individuals participate verbally. Like the rest of the group members, they are asked to practice the skills taught between sessions, however, they either do not complete the written practice exercises, or do so with help from others, depending on the availability of assistance.

The participant workbook is also available in Spanish to make this treatment accessible to those for whom Spanish is their primary language. These Spanish participant workbooks may be useful in two contexts: 1) Spanish-speaking facilitators provide the intervention in Spanish; or 2) When the group is provided in English and the participants can speak and comprehend English, but would benefit from working with the Spanish version of the participant manual as a written supplement.

Group Facilitators. The group sessions are facilitated or co-facilitated by people trained in the START NOW program, and who are willing and able to implement this structured, collaborative approach as described above. Facilitators should have knowledge and appropriate clinical experience, be trained in counseling, and have interest and experience with constructive interventions for behaviorally disordered individuals.

The START NOW program can be facilitated appropriately with one facilitator; however, co-facilitation of the groups may be indicated in groups comprised of more members, higher risk group members, or for educational purposes.

Intervention Design & Parameters. START NOW is provided through thirty-two group therapy sessions focused on development and reinforcement of new coping skills. Each session is expected to take seventy-five minutes. Although the program was designed to be provided twice per week, due to the logistical and pragmatic concerns, alternative options with regard to the frequency include once per week and two times monthly, every other week.

There are four skills units: My Foundation, My Emotions, My Relationships, and My Future. The intervention is designed such that participants may earn a certificate of completion upon finishing each unit. Prior to initiating START NOW, supervisors should check with administration regarding the policy and procedures. If certificates are going to be used, excess unexcused absences disqualify participants from receiving a certificate. Participants are eligible to earn a certificate upon completion of each unit provided they have had no more than two unexcused absences during Unit 1, or no more than 1 unexcused absence during Units 2 through 4.

Some participants may accrue several excused absences during a particular unit due to factors outside of their control like court dates, legal visits, or valid medical absences. When circumstances permit, arrangements may be made for participants to catch up on missed materials through a briefer individual review and doing some reading and practice exercises on one's own. In the case of several excused absences during a unit, facilitators should make a clinical decision about whether the participant is eligible for a certificate, i.e., if that participant has shown a concerted effort to learn and practice the skill covered within that unit. Other participants have been asked to repeat a particular unit with another group. Copies of the certificates for each unit are shown in Appendix 8, and electronic versions of these forms are available.

START NOW Group Frequency & Structure. The sessions of the four skills units are designed to take place twice weekly so that, when provided as designed, the entire sequence is expected to take 4 months. Each session is planned to be 75 minutes in length. There is a logical progression to the sessions. Ideally, new participants are able to start at the beginning of the first unit, and then progress through the sessions. At the same time, this therapy was designed to take into account offender transfers within and between correctional facilities.

Open vs. Closed Groups. Each group develops its own unique personality. Adding additional members will likely change the dynamics of the group and careful consideration by the group facilitators must be taken when deciding whether or not to allow additional members to join. When appropriate, there may be pragmatic reasons to bring participants into the group at any point in the sequence. It is recommended that

whenever possible, group members are added at the beginning of a Unit and not while a unit is in progress.

START NOW Units.

Unit 1- My Foundation: Starting with Me (10 sessions)

This unit is focused on developing and increasing the participant's self control and ability to cope with stressors. Elements of this unit include identifying a treatment goal, increasing wellness skills, developing acceptance of self and situation, enhancing spirituality, sense of values, and personal boundaries.

Two Primary Skills are taught early in this unit: 1) Focusing and 2) ABC. These skills are then reinforced through subsequent practice throughout the remainder of the skills training. Here is a description of these two primary skills:

1. Focusing- This skill involves actively paying attention to what is happening in the present, by using one's senses and being attuned to one's surroundings. Focusing increases the likelihood that participants will be proactive rather than reactive and impulsive. As they participate in the START NOW program, ongoing practice and reinforcement of the Focusing skill is intended to increase their capacity to learn these new skills.

2. ABC System for Functional Analysis of Behavior- ABC involves using a structured method to break down patterns of behavior in such a way that increases the participant's opportunity to think before acting and develop increased control. "ABC" stands for "Activator", "Behavior", and "Consequence". Participants use the sheet shown in Appendix 1 to look at their behavior in a systematic way, with the aims of increased recognition of triggers, ability to anticipate consequences, and thought before action. First, participants are introduced to this way of understanding their own behavior; the therapist helps them to "break it down"; reviewing recent episodes of behavior, focusing on both maladaptive and constructive behaviors. After developing familiarity with using the ABC System, participants are asked to regularly use this skill to break down their own behaviors. Each week, the therapist allots a portion of the session to ABC presentations. Participants are asked to use the ABC system to break down recent behavioral problems. Even though methods of functional analysis are used in some therapies primarily to understand maladaptive behaviors, positive behaviors are also encouraged as the focus of ABC's, for a number of reasons:

- To illustrate that adaptive behaviors do not just happen, but are determined in the same manner as maladaptive behaviors;
- To reduce the likelihood that participants will see doing the "ABC System" as a punishment for acting out;

- To provide opportunities to underline and reinforce positive behaviors.

Unit 2- My Emotions: Dealing with Upset Feelings (8 sessions)

This unit focuses first on helping participants understand emotions. Included in this is the understanding of how one's interpretation of situations influences one's emotions, learning ways to recognize and verbalize emotions, and understanding the functions of emotions. Next, participants learn two general areas of skills for coping with emotions- coping through actions and coping through thoughts and imagery. In the final four sessions of this unit, participants learn to apply these skills to specific emotional difficulties including depression, anger, anxiety and grief.

Unit 3- My Relationships: Building Positive Relationships (8 sessions)

This unit focuses on developing and increasing positive relationship skills, especially centered on improving a variety of communication skills: listening skills, assertiveness, setting boundaries, asking for support, and receiving positive and negative feedback. In addition, participants learn to recognize and deal with destructive relationships, and with feeling rejected.

Unit 4- My Future: Setting & Meeting my Goals (6 sessions)

This unit focuses first on developing hope for one's future, then on helping participants learn skills to head toward a more successful future. This unit includes setting goals, breaking down the steps to meeting educational, vocational and other goals, and problem-solving skills to address barriers to meeting goals.

Orientation Protocol for New Admissions. When using rolling admissions, the orientation protocol for introducing new participants is as follows:

- Review the group rules
- Establish a treatment goal with each participant to be entering the group
- Introduce the 2 primary skills of focusing & ABC functional analysis to them prior to their coming into the group

Materials Needed to Provide START NOW. The following materials are needed:

- **Participant workbooks**
These workbooks provide a written overview of the START NOW skills to be provided each week, with a workbook corresponding to each START NOW skill unit. Please see Appendix 2 for directions for printing and binding the START NOW workbooks. It is recommended that these workbooks be distributed and collected by the facilitator(s) each session and that participants be asked not to write in these books, given the investment made to produce them.

- **Real life practice exercise pages**
There is a real life practice exercise corresponding to each session; these pages are to be distributed at the end of each session.
- **Facilitator manuals**
Each facilitator will need a copy of the facilitator manual which provides the instructions for conducting the START NOW sessions.
- **Blank copies of the ABC System pages**
These should be distributed as needed (participants may find that they can be tucked into the back of the workbooks).
- **Writing instruments**
Consistent with facility policy and procedure, bring writing instruments (pencils, pens, etc.) to the group session that participants may use during the group meeting.
- **2 white boards, with colored erasable markers and an eraser**
One of these white boards should be blank. A flipchart or blackboard, with corresponding markers or chalk, may be substituted for the white board. The other white board should have the ABC system drawn on it in permanent marker, as per the instructions in session 4 of this facilitator manual. The latter board may either remain in the group room, or may be brought to alternate sessions (those which include practicing the ABC System).
- **Any material required for the Focusing practice**
Focusing practice is conducted on alternate weeks, as per the instructions in Session 2 of this manual. On the weeks this is done, bring any materials needed to conduct this exercise (for example, pictures, puzzles, etc.), and which conform to the guidelines of your facility.
- **An Enclosed Group Room**
This room should provide safety and security for the facilitators and participants, according to the policies of your facility. Also, the room should allow sufficient quiet and privacy to facilitate communication and concentration. Given that participants have various opportunities to write during the group meeting, ideally they will have chairs with attached desks, or be seated at tables. The facilitators will also need tables or desks. Facilitators may choose to sit or stand, and should be situated where they can each see all the group members.

*If you are arranging to print these workbooks from electronic files, please see Appendix 2 for information and recommendations for printing.

Components of Each START NOW Session are described below and summarized in Appendix 3.

- **Welcoming New Members**
If your facility is incorporating rolling admissions into this program, welcome any new group members, just as you would be likely to do in any other psychotherapy group.

Ask the new participants to briefly tell the group what they would like to get out of treatment, and ensure that they are familiarized with the rest of the participants in the group and with the group rules. It is helpful to post these rules and expectations in the group room. This portion of the session is expected to take five minutes or less.

- **Review of Previously Assigned Practice Exercise**

This portion of the group is planned to last fifteen to twenty minutes. The therapists review the participants' experiences regarding the practice exercise assigned in the previous group session. Many of these practice exercises involve trying out a skill taught during the previous session. Other exercises encourage group members to personalize some of the ideas introduced in group. Many of these exercises are designed to build motivation for change, e.g., asking participants to describe possible benefits of change, or asking them to describe what change would look like for them. When reviewing participants' responses to the real life practice exercise, the emphasis is on reinforcing any attempt to apply and practice skills learned in the START NOW groups. There are a number of purposes for reviewing the practice exercise:

- 1) It provides an opportunity to review and reinforce the concepts covered in the previous session.
- 2) Receiving praise and feedback increases the likelihood that participants will think about and practice the skills.
- 3) Practice increases the likelihood that skills will be used more frequently and may generalize to their everyday life.

There are two possible methods for reviewing participant responses to the previously assigned real life practice exercise: 1) through large group discussion; 2) through individual review followed by large group discussion. The first method, the large group discussion method, is likely to be the preferred method for groups in which impulsive aggressive behaviors are of particular concern because this method entails less proximity to group participants. When using this method, the facilitators invite participants to share their responses to the exercise. As each participant describes his response to this exercise, the facilitators and other group participants offer feedback. The downside of this method is that participants who did not understand the exercise or who are unable to write in English could be at a disadvantage because they may feel embarrassed to share these difficulties in front of the entire group. Here are some strategies that can be used to help participants with such difficulties:

- Be sure to re-state the instructions for the practice exercise before inviting participants to share their responses.
- Invite participants to share their verbal responses to the exercise during the group even if they have not written the response.
- Brainstorm options for participants with comprehension difficulties to get help doing the exercise between sessions. Such options may include checking in

- with one of the facilitators, or getting help from another group member or another facility staff member.
- If any given participant declines to share a response to the exercise, primarily use a roll with resistance type of response and continue moving around the group. Occasionally, let participants know that there are options for help with completing these exercises. Other than this, avoid getting into power struggles around either doing the exercises or sharing one's responses. The idea is to reinforce positive participation, through attention.

After giving all of the group participants a chance to share their responses to the exercise with the group, briefly conduct a general discussion of the topic. For example, if the exercise was focused on using "active listening" as a skill, you might ask the group questions like:

- "So, what did you notice about how it was for you all to try out 'active listening' skills?"
- "In what way does it appear that using 'active listening' affected the reactions people in here got?"
- "What, if anything, made it difficult to use 'active listening' skills?"

In some cases, facilitators may choose to use a second alternative method for reviewing responses to the real life practice exercise. This method involves review of each participant's individual responses, followed by group discussion. The facilitators walk around the room at the beginning of the session and briefly review each participant's responses to the previously assigned practice exercise. This method for reviewing the real life practice exercise may be used when safety and security issues of your facility and group are such that a greater extent of proximity to participants is deemed sufficiently safe. As in the previous method, a strengths-based approach is used in doing so, i.e., reinforcing any efforts shown and focusing on what is positive in the participant's response. After primarily focusing on the positive, a brief suggestion for improving the response may be shared. If the participant has not completed the exercise, briefly attempt to find out why not, and attempt to use a problem-solving approach to address any barriers. If the reason is lack of motivation, the facilitator is encouraged to "roll with resistance", i.e., to make an empathic reflection of understanding the participant's lack of motivation to do this exercise, along with a brief hopeful comment that the participant might be open to doing some of these practice exercises in the future. Then move on, to keep from providing secondary reinforcement of noncompliance. Avoid lecturing or getting pulled into a debate about doing the exercise. The idea is to primarily reinforce, through positive attention, those participants who have completed the exercise.

After the review of individual responses, lead the group in an overall discussion of their reactions to this practice exercise, similarly to the follow-up discussion described above for the first method of practice exercise review. Also, when you reviewed the practice exercise responses individually, you may have seen a particular example that may provide a helpful illustration for the rest of the

participants. Ask that participant if he would be willing to share his example during the group discussion. At times you or he may write his example on the board; other times you may have him share his example verbally.

Review of the previously assigned practice exercise provides the facilitators an opportunity to collect completed ABC forms and/or to highlight examples to use in the In-session ABC group exercise. (Note: check out whether the participant is willing to share that experience with the group.) If such an opportunity arises, the group facilitators could use the participant's example to illustrate the ABC skill, and how that participant's behavior resulted in either a positive or negative outcome.

- **Primary Skill Practice & Reinforcement: Alternating between Focusing & ABC**
After review of the practice exercise, the next part of the session allows for practice and reinforcement of one of the 2 primary skills: Focusing or ABC. This practice segment begins once these skills have been taught in Session 2 (Focusing) and Session 4 (ABC). This portion of the group lasts 10 to 20 minutes, with the Focusing practice typically requiring less time than the ABC practice. The directions for facilitating this practice are provided in the discussions of Sessions 2 and 4 later in this manual.
- **Introduction and Rationale for New Skills Topic**
At this point, attention turns to the new skills topic shown in the participant's workbook for that session. The introduction of each new topic is facilitated through pictures and written materials in the workbook, as well as tips included in the facilitator manual. Covering this introduction is expected to take approximately 10 minutes. Here are some general tips for introducing each new topic:
 - Use a Socratic approach, i.e., by asking relevant questions that get the participants thinking. Let them be in the expert role and allow them to come up with the rationale for the skill, whenever possible.
 - To increase perceived relevance, attempt to link the skills topic to recent situations that group participants have described. Try to include examples that closely pertain to participants' lives.
 - Try to find a balance between enthusiastically presenting the new topic and rolling with resistance. Avoid pressuring the participants to embrace the new skill. Remember that it is normal for participants to have mixed feelings about learning these new skills. Reasons may include:
 - Multiple experiences of failure and disappointment may have led them to feel that positive change is impossible.
 - Many participants have cognitive and learning difficulties that may lead them to feel pessimistic about their ability to learn new skills.
 - Change can be anxiety provoking, given that it involves going into unknown territory.

- They may feel pressure from peers and family to continue current behaviors, even though those behaviors may be causing problems. Such behaviors include substance abuse, gang activity, aggressive behavior, other criminal activities, etc.
 - Their behaviors, on some level, may be getting them what they want.
- Many of the introductions to the skill sessions include opportunities to discuss and begin working through ambivalence. At various points in the sessions, you will be presenting open-ended questions to the group, including the following examples from the participant workbook:
 - “Not focusing can be a problem. How?”
 - “How are clear boundaries helpful to countries?”
 - “Just as with all the other emotions, anger can be positive & useful. How?”
 - “How can anger be a problem?”

Try to encourage participation by looking for something accurate and constructive in the various answers participants offer and reflect on that. If a particular response violates the group rules, set a limit and remind the participants of that rule.

- **In-session Discussion Topic or Group Exercise**

After the introduction, each session includes some type of in-session discussion topic or group exercise. This portion of the group session is expected to last 20 to 25 minutes. Frequently a portion of this time focuses on reviewing skill sheets that explain how to use the specific skill being taught. Try to involve the participants as actively as possible in these in-session discussions and exercises, by encouraging their active involvement in reading some of the materials (if they are able and willing to read out loud), discussing them, and participating in practice exercises.

There are numerous opportunities during the START NOW groups for participants to write their own reactions and notes in their workbooks. Here are some tips pertaining to this process.

- Let participants know that writing such notes during group is optional. Tell them that this workbook will be theirs to keep, and that some people like to look back on some of these notes to remember what happened in group. Add that because such notes are for their own use, it's not necessary to worry about spelling or grammar, etc. Let them know that it's ok to even sketch or draw things that represent what was discussed. This is for a number of reasons:
 - To encourage a range of expression for individuals who are limited in their written expression.

- To increase the likelihood that participants will feel ownership over their work in the group

Some facilitators may be concerned that inviting expression through drawing or sketching during group sessions may lead participants to “doodle” in such a way that is disruptive. This does not tend to be a problem, especially when the verbal discussion is conducted in a manner that is inviting and engaging. Some individuals, especially those with impairments of concentration or verbal processes, find that they can concentrate and learn more effectively when they draw or sketch while listening.

- At the same time that making notes during sessions is encouraged, do not criticize participants who choose not to do so. Roll with resistance instead. This fits with the MET approach that individuals are most likely to make positive change when the motivation comes from within.

- **Assigning New Practice Exercise**

In the final 5 minutes of the group session, distribute the practice exercise for that session. Review the instructions for the exercise, answer any questions, and ask for participant agreement to complete this exercise. Let the participants know the main purpose of these exercises is to practice the skills taught in group, strengthen their understanding of the ideas presented in group, and learn more about themselves.

Communicate enthusiasm and positive expectancy that participants will complete these practice exercises. Remind them that this is one of the expectations reviewed in the first group session. When participants do not complete these exercises, first attempt to find out if there were any pragmatic barriers that prevented them from doing so. If there were, attempt problem-solving to address such barriers. For example, if the participant has reading and writing limitations, there may be someone who can help them between sessions, including a staff person, another group participant, or a friend. Another possibility is that the participant may be able to receive additional help understanding the directions of the exercise at the conclusion of the group session and may be able to use alternate modes of expression to respond to the exercise, including drawing or writing in a native language other than English.

As with written participation during in-session exercises, let the participants know that the focus is not on how well they can write these responses. Emphasize that the most important practice between group meetings is actually trying out the skills in real-life situations through how they think about and respond to challenging occurrences. Beyond the written practice exercises, the most important thing is that they have an open attitude to thinking about the skills

taught and how they can use them in their lives. Communicate that writing or sketching their responses is simply a way to reinforce that learning.

Procedures for Successful Implementation: Training, Certification, Quality Assurance, & Outcome Tracking

This section describes the procedures for training, certification, quality assurance, and outcome tracking.

Training & Certification

The following procedures for training START NOW providers are recommended. Facilitators and their clinical supervisors are asked to read the START NOW facilitator manual and corresponding participant workbook prior to attending live training. They then participate in two full days of live training, covering the following areas:

- The overall START NOW approach and principles, and how this affects what the facilitator does
- Maintaining safety and security
- Session procedures
- Pragmatic information about START NOW implementation
- Quality assurance procedures.

A variety of training methods are employed including lecture, discussion, demonstration (through live roleplay or video examples) and practice exercises.

On day two, all prospective clinical supervisors and facilitators also conduct a role-play practice group of a START NOW session. Anyone who has been previously certified in START NOW need not complete this requirement. The certification process is described in a section below.

On the last day of training, all participants complete a written test of the concepts covered in the training.

There is a two-day “Train the Trainers” curriculum available for START NOW, including a training agenda, trainer’s slides, supplemental handouts to be used alongside this facilitator manual, and recommended practice exercises. Candidates to become START NOW trainers are licensed mental health professionals who have previously completed START NOW training and have provided at least one complete START NOW group.

When delivered in an institutional setting, facility staff who will not be directly providing START NOW, but who have contact with participants of START NOW, optimally receive a three hour introductory exposure to START NOW concepts. The co-facilitators provide this training, with materials provided by the START NOW trainers. The purpose of this training is to introduce staff to the rationale and overall approach of START NOW, so that they can reinforce participants’

efforts. This training participation also helps build collaboration between the facilitators and other facility staff.

Quality Assurance

Clinical Supervision Structure

Clinical supervision of START NOW is conducted by a lead licensed mental health professional trained in START NOW, or by another clinician certified as a START NOW trainer. Recommended formats for START NOW supervision take into account that START NOW facilitators probably have a wider range of clinical responsibilities for which they require supervision. Recommended formats include: supervision every other week dedicated to START NOW, focusing a subset of one's general weekly supervision meetings on START NOW, providing an additional supervision for START NOW solely on top of facilitators' regular supervision, or group supervision including only START NOW facilitators.

Quality Assurance (QA) procedures are employed to increase the likelihood that the intervention is provided as designed. "Fidelity monitoring" is the form of QA most frequently used in implementation of manual-guided clinical interventions. Fidelity means faithfulness or reliability. Fidelity monitoring for QA is a way of tracking the extent to which implementation is consistent with the manual. Just as the overall approach of START NOW is to be strengths-oriented when working with participants, this orientation is applied to QA of group facilitation. The primary focus is to identify and develop strengths in the facilitators.

In many settings, the QA of manual-guided interventions is conducted by reviewing taped sessions. In most correctional facilities however, taping of sessions is not generally permitted because of concerns regarding security and potential litigation. Direct observation of therapy sessions is another suggested method for QA and fidelity monitoring (Powell, 2004), and is the method recommended for START NOW.

The facilitators tell the participants that their supervisor will be coming in periodically to observe the group. They indicate that the supervisor is focused on what the facilitators are doing, to help ensure that they are doing good work with the group. Let them know that the supervisor will be following the same policy of confidentiality for the group. When this periodic observation is presented matter-of-factly, participants tend to be accepting and comfortable with it.

It is recommended that the START NOW supervisor employs a coaching model of supervision, pointing out and reinforcing positive skills demonstrated by the facilitator, offering specific constructive suggestions, and using methods like

modeling or role play practice to enhance the facilitator's skills. Some traditional supervision meetings become almost exclusively focused on "analyzing the patient"; that is not the desired approach here. While facilitators are likely to seek help regarding working with particularly challenging inmates, the focus is on supporting and further developing the START NOW facilitator's skills in providing effective treatment and utilizing the approaches described in this manual. The supervisor should take notes while observing the group, in order to provide the facilitator(s) with specific examples. Jot down what the facilitators said and did, and which interventions were particularly effective. Also, write down ideas of things to say or do to make the session more effective.

When the group is complete, the facilitator(s) and supervisor each complete the Quality Assurance Forms provided in Appendix 5. Please note the following:

- If there are two facilitators, the supervisor just completes one rating sheet in relation to the combined work of the two facilitators, rather than rating each facilitator separately. This is because their efforts are designed to be complementary- each facilitator may take the lead during different sections of the group. Each of the two facilitators complete a rating sheet which also rates their combined effort.
- Ratings are **not** expected to be mostly 5's, for "very effective". There are many skills and procedures to be implemented with multiple participants in a fairly limited amount of time. It is unrealistic to expect that all of the skills will be implemented very effectively all of the time. It is much more realistic that the ratings of skilled facilitators will range from 3's to 5's. Utilizing a range of ratings provides much more information about facilitators' relative strengths.
- Here is clarification about the ratings outside of the 1 to 5 range:
 - **0 = Not covered**
This rating is given when a skill or procedure that is expected to be covered in that session is missed or skipped in error. For example, the facilitators may forget to conduct a brainstorming exercise included in a session, or they may not verbally reinforce and affirm participant efforts toward positive change. When this occurs, the rating is 0.
 - **9 = Not applicable**
This rating is given when a skill or procedure shown on the rating sheet does not need to be provided given the circumstances of the group. A particular procedure may be unnecessary given the clinical presentation of the group. For example, in the rare case that no resistance was presented, there would be no need to roll with resistance.

A rating of “9” also applies if the facilitators must skip certain procedures due to situational factors. For example, sometimes group sessions must be shortened due to facility events such as codes, lockdowns, extended count times, etc.

If at all possible, take some time right after the group session and the QA forms are complete to discuss the group with the facilitators. Ask the facilitators how they felt it went and address any questions or concerns they raise. Next, go through your notes of observations, reinforcing strengths and suggesting enhancements. Finally, the supervisor and facilitators review their ratings, comparing and discussing them, again reinforcing strengths and making constructive suggestions. Pay particular attention to ratings that show a greater than one-point discrepancy, as such discrepancies suggest that clarification of the clinical procedures is needed.

These forms are used to monitor QA as follows.

The following is the recommended schedule for supervisor observation and rating.

Phase 1- Pre-Group Training and Practice. At the end of the START NOW training, the prospective co-facilitators and trainers conduct a role-play practice group of START NOW session 1. This should be both self-rated and supervisor/trainer rated. Any ratings of “0” or “1”, or two or more ratings of “2”, signal the need for the facilitators to receive additional coaching and practice of the associated skills prior to beginning facilitation of the group. Following that, another role-play practice group is conducted and rated again. Repeat, as needed, until sufficient competency is reached prior to beginning the actual group.

Those playing the role of group participant receive instructions about the personality of the participant they are playing (withdrawn, appropriate, or loud and oppositional are three typical roles); otherwise, many trainees tend to prefer playing the role of loud oppositional characters. Immediately after each role-play group, those who facilitated the group receive feedback from those in the role of participant. The trainer emphasizes that the feedback should be focused first on what the facilitators did well. Then the participants add feedback about what could further improve the facilitators’ performance.

Phase 2- Pre-Certification Status. The facilitators conduct the first two sessions without supervisor observation, in order to

establish some leadership and rapport with the participants prior to observation. The supervisor then comes in to observe and rate the next group session. If all of their ratings of that session are 3 or higher, and as long as they have met all certification criteria (see section below), the facilitators are considered to be certified in providing START NOW. If this rating criterion is not yet met, the supervisor provides coaching and continues to observe consequent until all ratings are at a 3 or higher, and certification of the facilitator(s) is met.

Phase 3- Certification Status. Following certification of the facilitators, the supervisor observes and rates one group session per unit. If the facilitator receives any ratings of “0” or “1”, or two or more ratings of “2”, the frequency of observation and coaching should be increased to monthly, until two consecutive groups receiving all ratings of 3 or higher occur again.

Certification Criteria for START NOW Facilitators & Supervisors

All of the following requirements need to be completed for certification as a START NOW facilitator or supervisor:

1. Read and understand the START NOW facilitator and participant workbooks.
2. Attend the START NOW training. To train new hires (but not for initial start-up), this requirement may be met by viewing a video recording of the initial START NOW training. If so, practice exercises that are conducted during the training should be done by the trainee with a colleague or supervisor on site.
3. Pass a written test of START NOW concepts and procedures with a score of 75% or higher.
4. Co-facilitate a role-played practice group in which all ratings by an observing supervisor are above a 1, and no more than two ratings are 2’s.
5. Co-facilitate two consecutive START NOW groups in the correctional facility in which all ratings are at 3 or higher (facilitators only).

Some of these requirements will be explained further in the sections below. Appendix 4 provides a number of materials associated with the certification process. The first document is a certification tracking log, on which the dates that facilitators in training complete each of the certification requirements. The next document is the objective test for facilitators, and its corresponding answer sheet. Finally, the last document is a blank certificate for facilitators to receive upon completing certification requirements.

Outcome Tracking

This section describes the type of information most likely to be both useful and feasible to collect for outcome tracking. It is recommended that this information be obtained regarding each participant:

- **Correctional Settings**

- Date of initial incarceration
- Length of sentence
- Diagnostic information, if available
- DOC classification scores
- Dates of group attendance, including reasons for absences from group

For each participant it is recommended that you tally the following behaviors in the four months prior to group, during the four months of group participation, and in the four months after completing group:

- The number and type of disciplinary tickets received within the facility
- Number of days spent in administrative segregation
- Number of days spent in an IMHU (inpatient mental health unit) or infirmary for mental health

If the participant leaves the group prior to completion of the group, or in the months of data collection after completing the group, the following information should be recorded:

- Date of release, or date of transfer to another facility
- Reason for leaving the group

- **Forensic Psychiatric Settings**

- Date of admission
- Diagnostic information
- Dates of group attendance, including reasons for absences from group

For each participant it is recommended that you tally the following behaviors in the (up to) four months prior to group, during the four months of group participation, and in the four months after completing group (should the participant remain in the facility):

- Frequency of needed interventions
- Frequency of self-injurious or aggressive behaviors

If the participant leaves the group prior to completion of the group, or in the months of data collection after completing the group, the following information should be recorded:

- Date of release, or date of transfer to another facility
- Reason for leaving the group

- **Community Settings**

- Date of admission to group

- Diagnostic information
- Dates of group attendance, including reasons for absences from group

For each participant it is recommended that you tally clinically relevant behaviors in the (up to) four months prior to group, during the four months of group participation, and in the four months after completing group (should the participant remain in treatment). These may, for example, include:

- Frequency of needed interventions
- Frequency of self-injurious or aggressive behaviors
- Frequency of substance use (self-reported or tested)

If the participant leaves the group prior to completion of the group, or in the months of data collection after completing the group, the following information should be recorded:

- Date of last group
- Reason for leaving the group (if known)

Also, it may be helpful to include clinically appropriate self-report measures before and following group participation. Examples include the Buss-Perry Aggression questionnaire (Buss & Perry, 1992) which assesses 4 dimensions including physical aggression, verbal aggression, anger, and hostility; the Barratt Impulsivity Scale (Stanford et al 2009); the Index of Interpersonal Problems (Horowitz 1988); the Drug Use Disorders Identification Test (Voluse et al 2012); and the Treatment Effectiveness Assessment (Ling 2012).

Unit 1:
**My Foundation:
Starting with Me**

Gender-Responsive Facilitation of Unit 1

My Foundation: Starting with Me

This unit is focused on developing and increasing the participant's self-control and coping skills, so it is important to bear in mind the underlying life circumstances of the participants that may contribute to their experience and quality of stressors as well as their lack of coping mechanisms. For example, the justice-involved population is generally characterized by minimal education, lack of professional skills, and a very low-income/poverty (Lemmon, 2008). While both gender groups are affected by these challenges, female participants tend to experience them to an even higher degree than males (Bloom et al., 2003). In addition, justice-involved women are more likely to have grown up in single parent houses, experienced physical and/or sexual abuse in childhood as well as adulthood and display more serious health problems than males in terms of poor nutrition, inadequate health care, and drug use (Covington, 1998; Ney et al., 2012). These women are also more likely to have mental health problems such as depression, PTSD, and/or substance abuse (Sacks, McKendrick, Hamilton, Cleland, Pearson & Banks, 2008). Furthermore, justice-involved women are particularly likely to be primary caregivers of young children, experiencing high degrees of parental responsibility (Bloom et al., 2003). All these characteristics represent and act as severe life stressors. Perhaps it does not come as a surprise then, that a high number of justice-involved women in deal with issues of self-esteem and self-efficacy (Covington & Bloom, 2007).

Several elements within this unit deal with the identification of treatment goals, the development of acceptance of one's self and one's situation, the establishment of personal values as well as the formulation of personal boundaries. In addition to considering the aforementioned aspects it may be helpful to recognize gender-specific coping strategies. Whereas men are prone to concentrate on themselves, separating from their social networks, women are likely to maintain close relationships to their significant others (Bloom et al., 2003). In connection with the relational model, it can be anticipated that a woman's self-concept will, resultantly, incorporate many interpersonal features, whereas a man's self-concept may primarily be based on himself in isolation of his surroundings (Miller, 1976). These tendencies may also influence the topics that will be raised when helping the participants accept their current situations. Promoting self-reliance and acceptance in men may involve a much more individualized focus than when working with females. Values as well as personal boundaries can also be expected to differ to some degree between the two genders, as delineated in the sections for these respective sessions. Establishing respect and safety policies for START NOW groups is important for both genders. Considering the presented characteristics of justice-involved women (and women with serious mental illness in general), a greater emphasis on safety within the groups is essential for female participants to feel understood and motivated to engage in therapy.

My Foundation: Starting with Me

Session 1

Understanding START NOW Therapy & Why It Starts with Me

The focus of this session is on orienting participants to this therapy, establishing and reinforcing group rules, and developing motivation for change.

Gender Responsive Facilitation of this Session

As stated in the overall Unit 1 Gender Responsive overview, starting off by establishing a safe and respectful group is essential for groups of either gender, and particularly for women given the high incidence of trauma histories.

The early part of this session also focuses on developing motivation for change, leading toward helping participants establish their treatment goals. Female participants are more likely to identify a variety of motivators related to interpersonal connectedness, including maintaining/improving their roles as a mother, romantic partner, daughter, etc. When this is a goal, help them to verbalize to the group what types of positive changes they can make in *themselves* to accomplish this. Male participants are more likely to verbalize desired changes that will give them more power or autonomy, such as earning more money. There is a risk that they may focus primarily on the end point and may benefit from being helped to picture a constructive route to that end.

START NOW vs. Resisting Positive Change

Ask a volunteer from the group to read this section and elicit responses from the group. Lead the group in a discussion of some of the reasons why and ways in which people resist change, writing these on the board as they are suggested. Try to set a tone to convey that mixed feelings about change are okay and are usually present in each of us as we consider and attempt change. Try to help the group generate a variety of reasons, including a number of the following areas:

- Fear of the unknown
- Waiting for our luck to change
- Not believing in ourselves
- Believing it will cause us to lose relationships
- Giving up
- Waiting for someone else to fix it
- Feeling angry & stubborn
- Being tired & discouraged
- Being stuck in a rut
- Going from crisis to crisis, never having a chance to get out of alarm mode
- Assuming something different will be something worse

- Feeling comfortable or complacent with your current situation

Help the group identify a range of reasons that many of us resist change, and then discuss what they notice about these reasons. Also let the participants know that, if they'd like, they can list some of their own reasons in their participant workbooks. Let doing so be optional. Pressuring people to write is unlikely to result in positive change.

Look for examples in the list the group has generated, as you discuss the following points:

- Often when we resist change we are waiting for someone or something outside of ourselves to make things better.
- Change, even positive change, is often difficult & involves hard work.
- Usually, we only do the hard, personal work to make positive changes because we are unhappy with our lives right now.

The START NOW Approach

Discuss the points listed in this section, encouraging participants to put a star or other mark in front of those items to which they relate. Here again, there is no pressure to choose one or more statements. The purpose of reviewing these points is to present a perspective of personal responsibility and optimism for change.

Optional: The following discussion is especially helpful if you notice that many participants have been placing marks in front of some of the items. Invite participants to share with the group which items they've endorsed, and to say a bit about what it is about those items that "fit in with how they see things". Doing so helps to reinforce attitudes of personal responsibility and optimism for change. If other participants disagree with what someone says, acknowledge that each person may see things differently. Limit debate of which is right. Tell the group that there is no right or wrong about this, and that the goal is to respect each person's opinion. Also, if some participants have not chosen any items that they relate to, communicate acceptance, e.g. saying, "I'm sure there are many valid reasons for the way you see things."

Review the 4 START NOW Skills Units

This part is generally self-explanatory. Generally, go over the content of this section with the goal of checking out participants' understanding of the material, answering questions, and attempting to generate hope for change.

Review the "Welcome to the START NOW Skills Group" Page

The information and expectations are read aloud by either the facilitator or group members. You may add additional guidelines specific to your setting. Invite group members to ask questions or make comments about the guidelines. Also, invite the participants to suggest any additional rules, which may contribute to the safety of the

group, which may be added upon mutual agreement among the facilitators and participants. Ask group members for a verbal commitment to these guidelines. If a group member expresses unwillingness to comply (Note: based on our experience, this is likely to be very rare), do not get into a power struggle during the group. Discuss the issue and possible responses afterward with your co-facilitator and supervisor. Most often, the recommended response is a brief individual meeting with that participant to explore his resistance and to talk about how the guidelines are intended to maintain a safe group for all participants. If the participant remains unwilling to commit to compliance with the guidelines, that individual cannot be included in future sessions.

Ask Participants to do the Practice Exercise: “My START NOW Personal Goal”

Remind the group members that they’ll be asked to do some type of “practice exercise” between each session. Review the assigned exercise. Explain to participants that putting a goal in writing or stating it out loud can strengthen the likelihood of success. Tell them that the goal should be something that they can work toward while they are participating in START NOW. Discuss what it means to make it specific. Ask participants for agreement to complete this exercise and bring it to the next group session.

My Foundation: Starting with Me

Session 2 **Focusing Skills**

The goal of this session is to teach group participants one of the primary START NOW skills- focusing, which is tuning in to what is happening right now. This session teaches participants that focusing improves with practice, and how to begin practicing, and thus improving, their focusing skill.

Gender Responsive Facilitation of this Session

It's been observed that a higher percentage of male participants, especially younger males, tend to display some resistance to focusing exercises, especially those involving breath and/or imagery, associating some activities with those that females are more likely to do, such as yoga or meditation. Acknowledge their resistance and encourage them to "just give it a try". Also, be sure to mention that it is *optional* to keep one's eyes closed during such focusing exercises. This is especially important for participants who have experienced traumatic incidents in the past.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice Exercise "My START NOW Personal Goal"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real-life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review the participants' responses to "My START NOW Personal Goal". If the participant has completed this page, keep the focus on generally reinforcing completion of the practice exercise by mostly making positive comments (unless the goal is blatantly inappropriate). If the goal is generally positive, but quite vague, help the participant to think of a way to make it more specific. Ask them how they would know if they achieved their goal or what it would look like. Invite the group members to react to each other's goals and express support.

Introduce Focusing Skills

Read, or have a participant read, the statement in the participant workbook "Focusing is tuning in to what is happening right now." Ask the participants what they think this means. Also point out the statements in the thought bubbles- "Focusing is easy, right?",

etc., and encourage them to discuss their reactions. The point of these statements is that we often assume that focusing is easy, and don't even realize when we're not focused. Facilitators may wish to share with participants that while alcohol and drug use impairs focusing, sobriety can help the brain regain focus with practice.

Encourage the participants to think about the difference between when a person **is**, vs. **is not**, focused or tuned in. Attempt to engage them in discussion about how we sometimes just go through the motions, going through life on "autopilot". Share examples of this with the group, as well as attempting to elicit examples of this from them. Here are some examples that may help clarify the difference between focusing & not focusing:

Examples of Not Focusing:

- Going to another room to get something, and forgetting what you went there to get
- Telling a story and forgetting the point you were making
- Watching a movie and realizing you were thinking about something else and don't know what's happening now
- Setting something down without thinking, then not being able to find it
- When walking or driving somewhere, realizing you've hardly noticed the past few blocks (if walking) or miles (if driving).

Examples of Focusing (being especially focused):

- Athletes "in a zone"- their mind & body is completely tuned into the sport
- A martial arts master
- A cook or chef who is on top of their game preparing food
- A musician who's in a zone

Present the question, "**Not focusing can cause problems. How?**" Elicit various responses from the group members and write them on the board. Tell them that, if they'd like, they can write some or all of these in their own workbooks.

Review the "About Focusing Skills" Sheet

Before the group meeting, you may want to write the 3 main points from this sheet on the board to use as a visual aid. Review the information included for each point, attempting to actively engage group members in that discussion

Review the "Focusing: How to Practice It" Sheet

Help the group to review all the points on this sheet, eliciting questions and comments from the group.

Focusing Practice Exercise

Next, tell the group that you are asking them to try out this skill during the group meeting. Each week, one of the two weekly group sessions will start off with a Focusing exercise. Appendix 6 provides suggested exercises as well as tips for conducting these practice exercises. Appendix 7 offers two versions of a focusing exercise tracking sheet. Some exercises may not work in all settings given local policies and restrictions. Choose those that best fit your population. You may also add additional Focusing exercises that you learn from other sources, or that you design for your setting. Here are some general tips for leading these Focusing practice exercises:

- Tell the group how long the exercise is expected to take.
- Keep your instructions as clear and simple as possible.
- Give participants instructions about what to do when they lose focus.
- Provide a wide array of Focusing exercises, varying the sensory modalities (hearing, seeing, touching, smelling, tasting), cognitive tasks, and other elements included.
- When presenting non-visual Focusing exercises like listening to music, make closing one's eyes optional. Tell the participants that some people prefer to do these exercises with their eyes closed, and others prefer to choose a focus point, which is usually best somewhere low in the room, like a spot on the floor, etc. It may be helpful to indicate that if they use a focus point, it shouldn't be on someone else, like on their shoe, since that would be likely to make that person uncomfortable.
- Ask whether anyone has any questions before starting.
- Give participants a clear signal when the exercise is to start. For example, by saying "ok, begin", and when it is over, e.g., by saying "ok, done."
- When there are co-facilitators: Each time, one co-facilitator takes the primary responsibility for leading the exercise, including presenting instructions, visually monitoring the group's participation, starting and ending the exercise, and tracking the time. The other group facilitator attempts to try out the Focusing exercise at the same time as the participants, utilizing a focus point rather than closed eyes. This allows the facilitators to get some additional information about what worked, and did not work, regarding the exercise. Of course, at times of heightened safety concerns, both facilitators monitor the group visually.
- After the exercise, invite the participants to describe their reactions to the exercise. Many groups fall into a pattern of "going around the room", with each member sharing their reaction in turn. This often works out fine. However, if someone wishes to "pass", just move on to the next person. It is rarely, if ever, productive to insist on a response. Rolling with resistance generally results in less resistance in the long run.

Focusing Exercise: Count your Breaths

Time: 2 minutes

Focus on: Counting your Breaths

Tell the participants they will be focusing on counting their breaths for two minutes. Tell them to breath normally and ask that each time they breath out to silently say to themselves a number (“one”, “two”, “three”, “four”, “five”), then start back at “one”. Remind them of the point just discussed on the “Focusing: How to Practice It” sheet: that it’s likely that most or all of them will get distracted by other thoughts and lose their focus on counting their breaths. Tell them that when that happens, they just need to turn their attention back to counting their breaths. Tell them that some people prefer to do this exercise with their eyes closed, and others prefer to choose a focus point. Ask if anyone has questions. After answering any questions, begin the exercise by saying something such as “ok begin”. After two minutes, let the group know the exercise is complete by saying something such as, “ok, done”. Invite the participants to share their reactions to doing this exercise, with a particular focus on normalizing any difficulties they may have experienced.

Next, tell the participants that, once a week, the group will be doing a Focusing practice exercise at the beginning of the group meeting. Say that this will begin after the group has been introduced to each of the primary skills of Focusing (which they’ve already learned) and ABC, which they’ll learn next week. Remind them that practicing their Focusing skills will strengthen this ability. Tell them that this is a skill they can also practice on their own between sessions to get better at Focusing.

Assign “Practice Exercise: Focusing”

Direct the participants’ attention to the Practice Exercise on the last page of this session in their workbooks. Remind them that they will be asked to complete a practice exercise between sessions. Ask for a volunteer to read the exercise to the group. Summarize the main points of the exercise and see if anyone has any questions about it. Ask for agreement to complete the Focusing exercise, write down their reactions, and bring them to the next session.

My Foundation: Starting with Me

Session 3

Open & Balanced Attitude

The goal of this session is to encourage group participants to assess and adjust their own attitudes to increase their openness to positive change.

Gender Responsive Facilitation of this Session

The first part of this session focuses on contrasting an open vs. closed attitude. The relational model of female development points out women's acculturation to give quite a bit of consideration to the needs and opinions of others; as a result, female participants are more likely to show some of the characteristics associated with an open attitude, such as showing interest in different opinions, and seeing things from other points of view. Male participants are likely to be affected by societal pressures to show their masculinity by being in control, which is one characteristic of a closed attitude. Given both of these factors, male participants may be more resistant to adopting an open attitude. The key for facilitators is not to pressure or debate participants of either gender into changing their attitudes. Doing so would be all the less productive with male participants, who could then respond to this challenge by underlining all the reasons it's better to stay closed.

This session illustrates an open versus closed attitude using the metaphor of a sports coach. Some older female participants, who were children prior to the passage of Title IX, are less likely to have participated in organized sports and to have had a sports coach. If this is the case, encourage these participants to think about either their child's team coach, or about another area of their life in which they have had a coach or a mentor, such as an employment coach, a spiritual mentor, or a recovery sponsor.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice Exercise: Focusing

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each participant's responses to the focusing practice exercise. Positively reinforce any attempts to complete this exercise with positive comments and attention. If the page is not completed, briefly ask about

what got in the way. If the participant indicates that he just did not want to do the exercise, roll with resistance and move on. If he reports that something else got in the way, like difficulty writing or forgetting, briefly attempt some collaborative problem-solving to address this concern. Attempt to engage the entire group in a discussion of their experiences of completing the Focusing exercise.

Facilitate Focusing exercise: “Small Words from Long Words”

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 3 is “Small Words from Long Words” and it is a Cognitive-Verbal type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the materials needed for this exercise are the participant handouts and writing instruments.

Introduce “Starting with an Open & Balanced Attitude”

Review the text in the introduction to this session, talking about the importance of attitude in determining success. Invite participants to discuss their ideas about how attitude affects athletes’ success. Also, discuss what is meant by the word “attitude”. Since discussion of the next pages in the participant workbook will further illuminate the meaning of attitude, and the distinction between an open and closed attitude, the discussion here need not be lengthy. Here are some possible meanings, based on both traditional definitions and common use of the term “attitude”:

- How a person approaches things
- How open someone is to feedback & direction
- The kind of energy someone projects- positive or negative
- Your outlook on things- looking for solutions or looking for problems
- Believing you can shape your own life versus life just happening to you
- Positive attitude = winning ways, a “can do” spirit, believing in oneself, cooperative ways, an upbeat stance, willing to listen to ideas and feedback
- Negative attitude = acting like “downer” or a “loser”, bitterness, having “a chip on your shoulders”, a tendency to blame, defensiveness, always ready to argue or criticize, closed-minded, quick to shoot down the ideas or feedback of others

Review the “Closed vs. Open” Page

Ask for volunteers to read this material and solicit the group’s reactions. Be cautious not to convey a judgmental attitude, as though people who are closed are bad, and people who are open are good. Instead, it is helpful to point out that, often, people who utilize closed behaviors may have developed many of these in response to extreme stress, as an attempt at self-protection. It may be helpful to add that we are most likely to be able to show an open attitude and approach to life when we feel safe and supported. Invite the group members to talk about ways that they have been closed or

open in their attitudes, and how they think that has affected their likelihood of success. Add that as individuals move forward in these START NOW groups, they will probably make more progress if they can be open. The group can help with that by maintaining a safe atmosphere.

Lead the In-Group Exercise

The exercise now returns to the example of the role of attitude between an athlete and coach. Let the participants know that, even if they have not participated in sports, many of them may follow some sports on television, etc., and have observed such interactions that way. Draw boxes on the board like the boxes in the manual, and have the group share their ideas aloud as they discuss their reactions to this exercise. As with other in-group exercises, let participants know that writing in their own workbooks is optional. After filling in these boxes as a group, ask the participants the following questions:

- “Do you believe that one of these attitudes might lead the athlete to be more successful? If so, which one? Why?”
- “How might having an open vs. closed attitude affect participants’ likelihood of success in START NOW?”

The intent is to present the idea that having an open attitude is likely to increase your chance of success. Try to make this point simply by attempting to elicit it from the group rather than imposing it. Roll with any resistance you encounter.

Review “A Balanced Attitude”

Present and discuss the information on the top of the page, which is generally self-explanatory. Tell the participants that people are even more likely to show “all or nothing” thinking when feeling upset. Write some additional examples of all or nothing thinking on the board. Here are some:

All	Nothing
“Everyone likes me.”	“No one likes me”
“I’ll be out of here in a flash.”	“I’ll never get out of here.” (Point out that this example doesn’t apply to those facing a life sentence.)

Invite the group participants to come up with additional examples, if possible.

Present the question-

“In what ways can just focusing on one extreme side of the story be a problem?”

Invite the participants to verbalize their reactions. Attempt to elicit, reinforce, and provide the following points:

- It can keep you from understanding the whole situation.
- If you just look at the negative side, you can get too discouraged and give up.
- If you just look at the positive side, you might get a false sense of confidence and stop trying.
- If you just focus on your side of things, the other person might get angry and not want to hear your side.
- If you just focus on the other person's side of things, you might shortchange yourself.

Now review the points on the next page, focusing especially on the examples and the tips shown there.

Assign the Practice Exercise: “Open & Balanced Attitudes”

Tell the group that the purpose of this exercise is to practice finding and demonstrating open and balanced attitudes. Have a group member read the directions and encourage the group to look at the first example together. Ask the group members if they have any questions. Attempt to elicit verbal commitment to do the exercise between this session and the next. If it appears that your group participants may have difficulty with this exercise, it may be helpful to do the first of the three practice items in this practice exercise together during the session.

My Foundation: Starting with Me

Session 4 **ABC Patterns**

The purpose of this session is to teach participants a structured “ABC” method to break down their own patterns of behavior through functional analysis. This increases the participants’ opportunity to think before acting and develop increased control. “ABC” stands for “Activator”, “Behavior”, and “Consequence”. After developing familiarity with using the ABC System, participants are taught how to practice and apply this skill in their daily lives.

Gender Responsive Facilitation of this Session

The focus of this session is on learning the overall CBT-based method of functional analysis, and so in that respect the overall concepts apply similarly for participants of either gender. Gender though is likely to influence the scenarios participants focus on when applying this method, their emotional reactions to these scenarios, and the positive and negative consequences which are most salient to them. Recognize and reinforce those factors which are positive motivators for each individual, taking into account that what motivates any given individual is influenced by many psychosocial influences, including gender. As reviewed in previous sections,

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise: “Open & Balanced Attitudes”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this exercise, focusing on reinforcing completion of the exercise, getting a sense of ways group members may need clarification of concepts, and supporting any openness to positive change.

Here are some examples of open and balanced responses for item 1-

- “Talk about it. Sometimes I will wash the car regularly; other times, things may get in the way.”

- “Come up with a compromise where we each get to have it the way we prefer about half the time.”

Here are some examples for item 2-

- “Ask the boss for an example of what would have been better than what I did.”
- “Talk to someone else about how I’m upset I was.”

Here are some examples for item 3-

- “Remind myself that my getting even isn’t the same as getting ahead.”
- “I can talk to my supervisor about the disruptive co-worker. ”

As you review each participant’s responses to this exercise, look/listen for a couple of good examples showing open and balanced viewpoints and highlight these to the larger group.

Introduce “Understanding ABC Patterns”

Have the participants look at the first page of the Understanding ABC Patterns session. The discussion topics on this page are intended to begin developing motivation to look at one’s own behavior patterns. First, discuss what “Knowledge is Power” means to them. Participants may primarily focus on knowledge about external situations. Validate that this type of knowledge is helpful. Point out that sometimes it’s easier for us to see patterns outside of ourselves, but often more difficult to see our own patterns. Tell them that ABC patterns focus on understanding our own behaviors. This gives you more self-control. Present the question at the bottom of the page, “How do you think increased self-control might improve your life?” Write participants’ responses on the board and let them know that, if they’d like, they can write some responses in their own books.

Review “The ABC System” & the Examples Following

Review the points on this page with the participants. Tell them that it will probably make the most sense when they start to see examples using the ABC System later in this session and in upcoming weeks. Have them look at the next few pages of their participant workbooks. Show them that the first of these pages is a blank copy of the ABC form. Let them know that they will be asked to fill this in at various times throughout their participation in START NOW, and that the group will be reviewing these together. If appropriate, show them that the group will utilize a “write and wipe board” on which the grid of the ABC system has been written in permanent marker. Then various examples from group members will be filled in each week using erasable markers. Tell them that even if it looks confusing at first, using this system will get easier with practice.

Now review the next three pages that show completed ABC forms. Point out that the first two examples include behaviors that “did not work out well,” while the third example breaks down some constructive behavior. Both constructive and destructive behaviors

may be broken down using the ABC system so that a person can better understand what leads to, and results from, such behaviors. All of this knowledge increases one's capacity for increased effectiveness.

While the content of these examples may be interesting to discuss, a primary purpose of the initial discussion is to illustrate **how** what is written in each section fits where it does. For example, help them see that the "**Activators around me**" in example 1 is what was going on around the person, specifically **where** and **when** the situation occurred, and specifically **what** happened.

Next, focus on the next section of the ABC form, "**Activators inside me**". Point out that that section shows the person's **thoughts** and **feelings** about what happened. Many participants are likely to have difficulty identifying their thoughts and feelings. Tell them that they will be learning more about this over time. It may be helpful to direct their attention to the "How to Recognize & Talk about Feelings" page in Session 11 of the participant workbook for some help with identifying and listing feelings. Also, tell them that one way to recognize their own thoughts is "what you say to yourself in your head". They can just write down what they were saying to themselves. The ABC example 2 illustrates this as follows: "Doesn't he remember everything I did for him?" and "He's a selfish jerk."

The next section, "**Behavior**" is where they write down what action they took. This behavior is the primary focus of doing the ABC. The purpose is to see what led up to that behavior and what resulted from it.

Now, bring their attention to the "**Consequences**" section, and point out that for almost all behaviors there are both positive and negative results. The idea is to use an open and balanced attitude to look at both sides.

Finally, point out the section at the bottom of the ABC page, "**Behavior- What I can do instead-**". Read the directions for this section, shown under the picture of the hand, noting that you fill in this section when the behavior above didn't work out well. Note that since Example 3 shows some constructive behavior, the bottom section did not need to be filled out. Otherwise participants are to write in an alternative positive behavior instead of the negative action. Then they fill out what positive and negative consequences would have been likely to come from that behavior.

Now see if someone in the group would be willing to describe a recent situation in which their behavior had some positive and negative results. As they describe that situation, fill in the sections of the write and wipe board, helping the group see how you can use the ABC System to break down what happened.

Assign the Practice Exercise “Break It Down, Using the ABC System”

Point out that there is another blank ABC form at the end of that session. Tell the participants that between today and the next session you would like them to fill that in. Tell them that most often it's helpful to focus on some type of stressful situation to which they reacted in some way. Remind them to use an open and balanced attitude as they complete this exercise. Attempt to do some problem-solving with participants regarding what might be helpful to do if they run into problems completing this (for example, asking someone for help, or filling in a little bit that they can do). Try to get some verbal commitment that they will give it a try.

Instructions for Ongoing ABC Practice

Tell the participants that every other session the group will be reviewing ABC forms. Explain that the more often they see how they and others apply this way of understanding behavior, the more likely they will be to use it. Practicing this in group can help them to slow down and think before acting. Give all of the participants spare blank copies of the ABC form to keep in the back of their workbooks. Tell them that they are encouraged to fill these out when they experience a situation in which they'd like to better understand how they behaved or reacted. Suggest to the group that although such an idea often comes to mind regarding problematic or destructive behaviors, these can also be used to reflect on a positive behavior. Ask participants to bring at least one completed ABC form to the group. Let them know that it may be helpful to just keep any completed ABC forms in the back of the participant workbook. Indicate that, if they'd like your feedback, they can hand these forms in at any group session, not just on the days that the ABC system is practiced.

Any time a participant hands in an ABC form, it is essential to return it to him with some brief written feedback at the next session. This reinforces the use of these forms and practicing the associated skill. It can be helpful to use multiple colors of pens or pencils to write this feedback, to allow the feedback to have a pleasant visual impact. Try to keep your written comments fairly brief, since this will be extra work for you. The idea is to keep the work manageable enough that you can continue to deliver timely feedback.

Each week, the group will discuss one or two participant examples. Ask the participant who created it if he or she is willing to share the example. Try to avoid frequently choosing those from the most verbal participants. Sometimes you can choose an example that a participant with little writing skills talks about, and then write the written example on the board during the group session. Also vary the examples to include breaking down both problematic and constructive behaviors using ABC. Try to involve the entire group in the discussion of the example, not just the person who generated it. The aim of the discussion should not be on deciding whether or not the person did a good job, but how to use this method of understanding one's own behavior. Try to look for patterns that rest of the group members may relate to and invite people to share their reactions.

My Foundation: Starting with Me

Session 5 **Accepting Myself**

This session focuses on increasing the likelihood that participants will serve as a positive coach to themselves through the change process. A key skill introduced in this session is positive self-talk.

Gender Responsive Facilitation of this Session

When facilitating this session keep in mind that men and women tend to have self-concepts based on the differing ways they define themselves. Whereas men's self-concepts depend mainly on internal appraisals often relating to themes of power and status, women's self-concepts are greatly influenced by interpersonal relationships and expectations that other people might have of them. Thus, the themes of negative self-talk most frequently encountered are likely to vary by the gender of the group. For instance, men may be more likely to think: "I'm a loser because I still don't own a car."; or "Those other guys can lift more than me- I look weak." Women, on the other hand, may be more inclined to think: "I'm a bad mother because I'm not with my kids," or "I'm a failure because I've disappointed my parents." Both male and female groups may name drug dependency issues as contributors to their negative self-concept. Notice that the roots for drug abuse are often found to differ as well. While males tend to abuse drugs to block out or numb their feelings, or to satisfy their thrill-seeking needs, women often start to engage in drug abuse through their relationships with significant others and to cope with trauma issues.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise: "Break It Down: Using the ABC System"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. First, focus on participants' individual responses to the practice exercise. If the participant has completed some or the entire ABC page, keep most of the focus on what they have filled in accurately and/or which demonstrates openness to looking at their own behavior. Verbally reinforce these attempts with

positive comments. After doing so, you may offer some suggestions to further clarify their responses. It is likely that there will not be enough time to go through each participant's example with great detail. If no one attempted completing the ABC, explore why. If it is due to unwillingness, make a hopeful comment that they may be willing in the future to give it a try, and then move on. If noncompliance is due to a pragmatic problem, attempt some problem-solving. Remind the participants that they will be learning more and more about how to do this throughout the START NOW groups. Look for one participant that has written a helpful example, and who is willing to share it with the group. As the participant reads it, fill it in on the write and wipe board, and discuss it with the group.

Facilitate Focusing exercise: "Tuning In"

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 7 is typically "Tuning In" and it is a Music/Sound type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the materials needed for this exercise is media equipment to play music or nature sounds (vary types, as long as appropriate for a correctional setting).

Introduce "Accepting Myself"

Discuss the points in this section. Present the two questions at the bottom of the page:

- Which coach or teacher do you think will get better results? Why?
- Which coach or teacher would you rather learn from? Why?

Elicit participants' responses. The majority of participants are likely to say that they learn best from a coach who is respectful, patient and has positive expectations. If some participants do not agree with this position, simply roll with resistance and reflect what they say. Overall, the point is that most people do learn best when treated with respect. This includes showing self-respect. Discuss the points on the next page, which exemplify treating oneself with a lack of self-acceptance. Invite the participants to share their reactions and/or examples from their own lives.

Also, talk about how self-acceptance & true self-esteem differ from street pride, the exaggerated tough attitude that many individuals may develop to protect themselves in various situations. While a person with an attitude of street pride may look like someone who believes in himself/herself, it typically masks underlying feelings. It isn't clear how the person feels underneath the mask and doesn't really indicate whether the person has self-acceptance. Sometimes letting that mask down a bit, when the person feels it's safe to do so, increases the chance of positive change by letting themselves and others know their true self. Many offenders who have carried their street pride for a long time may find it hard, or even sometimes scary, to begin to let go. The point of this

discussion should not be to pressure participants to let go of street pride, but to present the possibility.

Another point that may be helpful to discuss is that most people find that the extent to which they accept versus judge others is exactly the same as the extent to which they accept versus judge themselves. Many participants may intuitively understand that although bullies appear confident, underneath they tend to be quite insecure and self-doubting.

Review the “Accepting Myself” Skills Sheet

There are two pages of “Accepting Myself” skills sheets, “part 1” and “part 2”. Review each of the points on these pages, encouraging the participants to discuss their reactions, and how they may be able to apply these skills. Point out that many of the negative self-talk examples on the part 2 page use extreme words like “idiot”, “hate”, “always”, or “no one”. Tell them that can be a clue for spotting negative self-talk in yourself, giving you an opportunity to replace that with positive self-talk.

Ask Participants to do the Practice exercise: Accepting Myself

When you ask participants to do this Practice exercise, let them know that the primary purpose of this exercise is not to focus on the negative, but instead to focus on ways they are beginning to accept themselves. Say that you’re aware that there may be some negative ways that they have treated themselves that they would prefer not to write in their workbooks. Indicate that respecting their comfort level for self-disclosure is actually a way to take care of themselves and show self-acceptance. You can add that this is true throughout their group participation, that they can respect their own comfort level regarding how much they choose to write, or not, in their workbooks. Tell them that the most important thing is whether or not they seriously think about and try out some the ideas that they’ll learn in these group meetings.

My Foundation: Starting with Me

Session 6

Accepting My Situation

When providing psychotherapy to individuals who have are justice involved, hospitalized, or addicted to drugs, much client energy can end up going into railing against their current situations, which ultimately is not productive. The purpose of this session is to help participants to start from their current situation and work forward from there. One of the key concepts is that by accepting the reality of their current situations, participants can best cope with what is happening.

Gender Responsive Facilitation of this Session

Participants of both genders tend to name incarceration or judicially required treatment as a situation they are having a hard time accepting; this is understandable, given the stresses of incarceration or mandated treatment. Similarly, the profound impact of serious substance use disorder or mental illness may create a great sense of loss and frustration. After that, facilitators have noted some gender-related themes in the types of situations that participants discuss. Male participants tend to focus on the loss of control within an institutional facility, including for example being told when to eat. The men also speak quite a bit about barriers to getting jobs. Note that these themes tend to relate to power, control and autonomy. While the female participants also touch on these situations, relational themes often emerge in female groups including losing loved ones to death, illness, loss of parental rights, and lack of visits or other social contact. In facilitating this group, be aware that these gender-specific themes may be particularly likely to illicit strong emotional responses among participants, and a corresponding need for support.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the offenders in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise: “Accepting Myself”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group members’ responses to this exercise, focusing on reinforcing completion of the exercise, getting a sense of ways in which the group members may need clarification of concepts, and supporting any openness to positive change. After that, give group members the opportunity to tell the

group what they've written; sharing their responses is optional. Allow a few minutes for observations and feedback to each other, attempting to keep this discussion in line with the general theme of acceptance.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Hard-to-Accept Situations

Point out that last time the focus was on accepting yourself, and now we're going to expand that to also accepting your situation. Have the group look at the first page of this session in their participant workbooks. Ask the group to come up with situations that can be hard to accept and write their responses on the board. Here are some possible answers:

- Death or illness of a loved one
- The end of a romantic relationship
- Getting sentenced; being incarcerated
- Getting moved to another correctional facility or within the facility
- Having some type of physical or psychological health problem or substance abuse
- Losing a job

After a number of items are listed, turn the group's attention to the question at the bottom of the page. Encourage the group to think about some of reasons we often fight against accepting the situations they listed above. Try to positively reinforce participation by looking for something to agree with in the participants' comments. Then go to the next page and review the reasons listed under "Why some situations are hard to accept-." Focus particularly on any reasons not already generated by the group.

Now discuss the statement, "*NOT ACCEPTING THE REALITY OF OUR CURRENT SITUATION CAN TAKE A LOT OF ENERGY & HOLD US BACK.*" Here are some of the ways that fighting reality takes a lot of energy:

- Staying very busy & distracted keeps us from feeling our emotions
- Finding and using drugs & alcohol to block reality takes a lot of energy

- Constantly pushing against something is exhausting!
- A lot of fighting reality comes out as constant arguing & debating, which can be tiring.
- Not accepting reality blocks out the information we need to begin coping.

How is Accepting my Situation Helpful?

Review & discuss the points on this page. As you discuss these points, tie them in with the examples of hard-to-accept situations generated earlier by the group. For example, you can focus on the example of having a health problem like diabetes. You can fight accepting it by not being willing to listen to what the doctor or nurse tells you. When you stop fighting it, you can start to learn how to manage it with diet, exercise and medication.

Review the “How Can I Accept My Situation?” Skills Sheet

Review & discuss the points on this skills sheet. Encourage the participants to describe their reactions. Particularly invite them to share any examples of ways in which they may have used the skills listed here.

Ask Participants to do the Practice exercise: “Accepting My Situation”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about how this topic applies to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Foundation: Starting with Me

Session 7

Self-Care Skills

This session is one of the cornerstones of the “My Foundation” unit, with its emphasis on overall wellness skills to promote physical and mental wellness. This session also includes a component to help participants who are taking medication for physical and/or mental health conditions to best utilize such treatment.

Gender Responsive Facilitation of this Session

When facilitating this session it is useful to keep in mind the participants’ life circumstances, not only in the current setting, but also outside of it. Research indicates that both gender groups are characterized by minimal education, no skills, drug dependency issues, poverty, and homelessness, with the female justice-involved population displaying these adversities to an even higher degree. Be sure to acknowledge that even outside of the current situation, justice-involved or not, they may encounter a number of limitations due to their socioeconomic situations. For example, fresh, healthy foods or a gym membership can be costly, not everyone may have reliable access to showers, and maintaining employment and family may interfere with sleep. Participants of both genders can be empowered by utilizing the group to brainstorm alternative solutions to these problems (e.g. exercising in the park, prioritizing adequate amounts of sleep over extraneous activities, and asking significant others for help, if possible). Female participants may tend to prioritize caring for others over self-care; help them realize that it is only when taking good care of oneself that one can provide good care for others.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the offenders in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise: “Accepting My Situation”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s responses to this exercise, focusing on reinforcing completion of the exercise, getting a sense of ways in which the group members may need clarification of concepts, and supporting any openness to positive change. After that, give group members the opportunity to tell the group what they’ve written; sharing their responses is optional. Allow a few minutes for

observations and feedback to each other, attempting to keep this discussion in the spirit of acceptance.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 7 is “Motorcycles Hidden Objects Puzzle” and it is a Cognitive-Visual type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the materials needed for this exercise are writing instruments and copies of the handout, “Motorcycles Hidden Objects Puzzle”.

Introduce Self-Care Skills

Discuss the statement shown on the page- “You can build a stronger life by improving the way you take care of yourself.” Using the metaphor of a house or other structure, talk about how the ways we take care of ourselves are equivalent to building the frame, walls, roof, etc. Discuss the members’ reactions.

Review the “Self-Care Skills: Physical Wellness & Mental Wellness” Skills Sheets

As you review these skills sheets with the group, try to elicit from the participants what they already know about some of the ideas included. Invite them to verbalize their understanding of why doing these things can help one be strong and healthy. If some group members have had successful experiences with the health areas listed, encourage them to tell the group about how they did it and/or what the benefits of doing so have been for them.

Participants may say that they have little control over aspects of their physical wellness because of some aspects of the current environment or routine, for example, offer little or no choice regarding what food is offered. Roll with resistance by reflecting their concerns and empathizing with the hard parts about living in such a setting. Then help the group think about ways that a person still may have some potential for choices and control even given these limitations, for example, what they choose to eat, given what is offered. It can be helpful to also talk about ways that these wellness skills make a difference throughout life, reminding them that they may want to think about this again at different points in the future when they may live in other situations.

Assign Real Life Practice Exercise: “Check Up!!!”

Tell the group members that in this exercise, they are asked to think about and rate how they’ve been doing recently in each of the wellness areas just discussed. Tell them that it’s not a competition, but a chance to honestly look at their own situations. Point out the section at the bottom of the page where they’re asked to choose any area as most important to them right now. Tell them it could be that it’s important because they’re

doing well in the area and want to keep it up, or maybe it's important because they're focusing on improving that area, or maybe there's even another reason why it's important to them. Ask them to complete this exercise and bring it to the next group meeting.

My Foundation: Starting with Me

Session 8 **My Spiritual Self**

For many individuals, spiritual beliefs and practices are associated with positive mental health characteristics and improved substance abuse recovery outcomes, including greater optimism, stress resilience, and perceived social support, along with lower anxiety (Pardini, Plante, Sherman, & Stump, 2000). The intent of this session is to encourage those participants who believe it would be helpful to incorporate the spiritual practices of their choice into their own change process.

Gender Responsive Facilitation of this Session

With both genders, it is crucial to emphasize the concepts of respect for differences when discussing the content of this session, emphasizing that each participant will choose what makes sense to him or her. There are likely to be gender differences related to participants' receptivity to aspects of this session. For example, in a large sample of the spiritual practices of non-institutionalized adults, women reported more frequent private prayer and spiritual practices (feeling "God's presence" or "touched by the beauty of creation"), and these were both independently associated with health and well-being. Weekly public religious activity was the primary predictor of wellness among men, as well as being an additional predictor for women (Maselko & Kubzansky, 2006). Among inner-city methadone maintenance program participants, African American women reported finding spirituality more helpful to their recovery than did African American men (Arnold, Avants, Margolin, & Marcotte, 2002). Given both the findings reviewed here and awareness of gender differences in general, it is likely that some male participants may be less comfortable discussing or participating in private religious and spiritual practices. Provide encouragement but be prepared to back off and respect each participant's privacy.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the offenders in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise "Check Up!!!"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review members' responses to this exercise, offering encouraging feedback about completing this exercise, and about identifying

their priorities for enhancing their physical and mental wellness. Then engage the group in discussion of their reactions to completing this exercise. The main idea is that, by stating in writing and out loud our concerns and goals for increasing wellness behavior, the likelihood of following through is increased. Some participants may say that, as they completed this, they found that they wanted to give themselves a higher rating than their behavior reflects. If someone says this, say that one of the purposes of this exercise is noticing some of the ways we may have trouble admitting these areas of difficulty, and that this can be the first step toward change.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “My Spiritual Self”

Present the statement at the top of this page- “Many people feel that having a spiritual connection is very important to life, possibly as important as the sun is to life.” Invite the offenders to share their reactions to this idea, emphasizing that there is no right or wrong answer. Point out the statement at the bottom of the page, “Each person’s spiritual beliefs & practices are to be respected.” Remind participants that respect for each person’s ideas is expected each session **and** especially helpful to remember when discussing spirituality, because this topic can be so personal and significant to many people. It may be helpful to mention that showing respect for others’ views can include both listening politely to their opinions **and** not lecturing or pressuring them to adopt your views.

Present the “What does being spiritual mean to you?” Page

Bring the participants’ attention to this page and have someone read the question out loud. Tell them that for now, you are not looking for them to state their responses. Say that since for so many people, the answer to this is personal, you are going to ask the group to take a few minutes so they can think about this individually. Tell them that, if they’d like, they can write, sketch, or doodle whatever they’d like on this page as they reflect on this topic.

Give them approximately 3 to 5 minutes to work on this exercise. Use your own impression of their nonverbal behaviors to decide how long to let the exercise go on,

e.g., if you notice that all activity as far as writing or drawing goes has ceased, and that the respondents appear restless, terminate the in-session exercise earlier. Then invite any participants who wish to share their responses to do so. Remind the participants that the focus of the group is on accepting each other's beliefs about spirituality, not debating or judging each other. If any of them start to go a bit overboard and start to preach to the group, respectfully and empathically ask them to wrap it up so that there will be time for everyone. For example, you might say something like, "Obviously this topic is important to you and you've thought a lot about it. I'd like to ask us to move on and hear from the next person, so that anyone who'd like to speak will have a chance."

Present the "Here are some things other people have said . . . " Page

This page is intended to present additional ideas about spirituality. Bring the participants' attention to this page and review it together. Briefly discuss the participants' reactions.

Review "Ways to Recognize & Celebrate my Spiritual Self"

Review the ideas listed on this page, again recognizing that these are all optional possibilities that some people find helpful for developing their spiritual selves. Invite participants to share ways that they, or others they have known, have tried some of these activities, and what that experience has been like. If you notice some participants attempting to convince others that any of these ideas are either a good or bad idea that others should do, remind the entire group that the purpose of this group is not to convince others of what they should do, but to respect each person's own opinions and experiences.

Assign Real Life Practice Exercise: "Recognizing & Developing my Spiritual Self"

Tell the participants that this exercise gives them additional time to think about and write down their opinions and goals about their spiritual selves. Ask them to write down their responses, and to bring those responses to the next group meeting.

My Foundation: Starting with Me

Session 9

Identifying & Developing my Values

Many participants are not aware of their personal values and ideals which guide their behaviors and attitudes. This applies to individuals showing antisocial values as well as to those showing ethical values, since values is an abstract concept. This session uses group exercises to teach participants the concept of values and to help them begin to identify their own values. Then participants are able to use this knowledge for increased positive self-control. An MI approach can be employed in this session to develop discrepancy regarding behaviors that no longer match some participants' positive values.

Gender Responsive Facilitation of this Session

Again, you may notice gender-related differences in some of the themes the participants will name. Values may relate to power and self-actualization in males, whereas females may attach more meaning to interpersonal connectedness and social mutuality. Family may be an important value to both genders, but entail different implications depending on one's gender. Whereas for males it may be most important to be able to provide for a family, females may additionally feel the need to have a secure emotional bond and adequate parenting skills.

For this session, if the participants cannot keep themselves from expressing judgment over other participant's voiced values and practices it may be helpful to include a discussion on gender awareness (depending on the relevance to the points criticized). Inform the participants that, sometimes, gender can shape what we see, how we interpret certain behaviors and beliefs, and what we define as important (Macfarlane & Knudson-Martin, 2003). Some traditionally masculine or feminine qualities/values expressed by some participants may be judged as less desirable by others just because society has defined different behaviors as more or less acceptable depending on the gender. Furthermore, female qualities in general have historically been labeled as less desirable. Here, it may be helpful to consider ways in which the criticized values/beliefs/behaviors may be adaptive. For example, putting your family above your own needs may harm you, but may at times be necessary to keep things going; or being passive and subordinate may be judged as less "manly," but can sometimes increase productivity by decreasing power struggles.

As a facilitator, be aware of the fact that your own gender may influence what you value most. Monitor your own self and be cautious to not differentially reinforce expressed values from participants according to your own gender-based preferences.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise “Recognizing & Developing my Spiritual Self”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each participant’s response, offering positive feedback for any attempts to constructively complete this exercise. Roll with resistance regarding those who have chosen not to do it. Discuss pragmatic issues that interfered with practice and attempt to problem-solve with the participant. After this individual review, remind participants of the importance of respecting each other’s views. Then invite the group members to share their reactions to this exercise with the group, if they’d like.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 9 is “STARTING WITH ME”, and it is a Cognitive-Verbal type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the materials needed for this exercise are writing instruments and copies of the handout “STARTING WITH ME Word Search”.

Introduce “Identifying & Developing my Values”

Present and discuss the definition of “values” shown on the first page of this session in the participant workbook and respond to any questions or comments about this. Next present the question, “What does the word ‘values’ mean to you?” Have the group members share their reactions aloud. Point out that there is space there to write their own responses to this question if they’d like.

Facilitate the In-Group Values Exercises

Tell the participants that the exercises on this page can help people to recognize some of the values they hold. Say that you’d like them to write down or draw their responses after you share with them the directions for each section. During this exercise, if a participant says she or he cannot think of a response in one of the following areas, use a rolling with resistance approach- let the participant know that there will be enough

information to work with from the other items and that area can be skipped for the time being.

Here are the directions for each section-

“Would bring to a desert island:”

“Imagine that you find out you’re going to have to live by yourself on a desert island for a year. Imagine that you’re given the basic things needed for survival, like matches, a water bucket, a tent, etc. You are told that you can bring two additional optional items or “luxury items”, which can’t include another person. Write down, or sketch, the two items that come to mind.”

“A time I was proud of myself:”

“Think of a time you were proud of something you did. Write down or draw what you did that you were proud of.”

[No matter how much negativity participants may have engaged in, it is almost a given that all of them have also done some things of which they can be proud. If a group member says something like, “I never did anything like that”, respond saying something along the lines of the following: “Think about it a while more- you’ll probably come up with something.”]

“An especially positive day”

“Think of an especially enjoyable and satisfying day, either one that you’ve already had, or one that you can imagine having in the future. Write down or draw something to describe that day.”

Now tell the group that the responses they came up with to each of these items can help them to learn about their values and beliefs. Make a table like this on the board:

Responses	Values & Beliefs

Invite group members to share their responses, if they’d like to, and work together with them to figure out what values and beliefs may be reflected by these responses. Since figuring this out involves some abstract thinking, and some participants may be limited in their abstract thinking abilities, they are likely to need some help to do this. Group members may suggest a variety of values that a given response may reflect. List all possibilities, and let the group know the following two points:

1. One response may reflect a number of different values.
2. Only the person who gave that response can determine which values of theirs it reflects.

Below are some examples, which are certainly not comprehensive, from each section of the exercise. Notice that the values reflected don't always have to be something lofty.

“Would bring to a desert island:”

Responses	Possible Values & Beliefs Reflected
Television	-Entertainment; -Connection to the rest of the world; -If there is a particular type of program they especially want to see there could be a value related to that like sports, Hollywood, music, etc.
Photographs of loved ones	-Friends & family; -Personal connection; -Visual things; etc.
Guitar	-Music; -Creativity; -Learning & practicing; -Sound; etc.

“A time I was proud of myself:”

Responses	Possible Values & Beliefs Reflected
Helped someone	-Helpfulness; -Kindness; -Relationships; -Personal strength; -Integrity (“being a person who steps up when needed”); etc.
Graduated from something (a program, a phase of school)	-Accomplishing goals; -Finishing what you start; -Working hard; etc.

“An especially positive day”

Responses	Possible Values & Beliefs Reflected
Trip to the beach	-Fun; -Nature; -Water; -Relaxation; -Togetherness; etc
A road trip	-Excitement; -Fun; -Thrills; -Togetherness; etc.

Group facilitators probably will not be surprised to find that some participants are likely to list items that include antisocial elements like getting high, as part of the description of their enjoyable day, as something they would take to the island, or even as an accomplishment of which they are especially proud. When this happens, ask that participant to keep the description of the specifics limited to keep from triggering either themselves or someone else. Then help that individual and the group to figure out what the associated values may be, and list them, just as you would for other responses. Some possible values may include thrills, risk-taking, “getting over” on somebody, etc. Encourage the group to look at how having such values increases the likelihood of staying in a self-damaging pattern of life. Try not to use a lecturing or scolding tone when talking about this. Let them know that many people find that if they make changes to their lives, they either find new things to do that express the same values, or they find that their values begin to change (these two points are the final two bulleted items on the next page of their participant manuals).

Review & Discuss “Things to Know about Values”

Review the “Things to Know about Values & Beliefs” page, discussing each point. Some discussion ideas are listed below, corresponding to each of the points:

- **No one can determine your values & beliefs but you.** Tell the group that people around you may have certain values, which can be anything from valuing partying, a certain religion, or having certain types of material possessions; it may seem as though you have to value the same things they do, yet you don’t have to. You can decide for yourself what you value.
- **When it comes to values & beliefs, actions speak louder than words.** For example, someone may say they value honesty, but then may lie to people. Ask group members to think of other examples where a person’s spoken values may differ from his/her actions. Also, help them see that when it comes right down to it, how we act counts more than how we **say** we act.
- **It’s not uncommon to have 2 or more different values that go against each other & make it hard to make a decision.** For example, you may value both friends and family, and may come to a weekend when you have to choose between going to the beach with friends or going to your grandmother’s birthday celebration. Or someone may value being clean and sober and may also value fun with friends. They may find that these two values conflict when they’re invited to a party where there’s likely to be drinking and drug use.
- **Sometimes people keep the same values & beliefs when they change their lifestyle but find new ways to express them.** For example, a person may value excitement. Maybe when they were younger, they got some of their excitement by criminal activity. They may have come to a time they got tired of some of the negative consequences of antisocial activity, but they still value

excitement and get that by some kind of adventure sport like rock climbing, sky diving, or white water rafting. They may also do something else that makes their heart pound fast with excitement, like speaking or singing in front of an audience, or running in races.

- **People’s values & beliefs can change over time.** Another person might find that even though they valued some of the excitement they felt from previous activity, now they value some other things about keeping out of trouble. See if the group can come up with some examples, which may include safety, feeling proud of oneself, being a positive example for younger siblings or for their own child, knowing that money is earned legally, education, etc.

Assign the Real Life Practice Exercise “My Values”

Tell the participants that this practice exercise gives them a chance to think more about their values and beliefs. Introducing this exercise provides another opportunity to reinforce the message that one’s values and beliefs may continue to be developed for a long time, possibly throughout one’s life. So as they “use the space on this page to show” their values and beliefs, they can keep in mind that what they show may be “a work in progress” that they’ll continue to develop over time. Emphasize that they can show their values using various options, including collage, writing, drawing, cartoon, etc.

My Foundation: Starting with Me

Session 10

Respecting my Personal Boundaries

The purpose of this session is to introduce participants to the concept of personal boundaries. Understanding this concept helps set the stage for improved interpersonal functioning. Since personal boundaries are an abstract concept, this session begins by introducing some concrete examples, and then expands to the abstract.

Gender Responsive Facilitation of this Session

For this session, it is important to keep in mind the high likelihood of extensive abuse histories among justice involved, substance abusing, or seriously mentally ill individuals of both genders, with a greater prevalence among women. These experiences render participants more vulnerable to re-victimization. Identifying and developing healthy boundaries is an important step for them to develop pro-social and healthy relationships with others. Furthermore, it is helpful in promoting personal safety and a greater sense of self-worth and self-efficacy.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review the Practice exercise “My Values”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review participants' responses to this exercise. Especially given the personal nature of one's values, it is particularly important not to judge participants' responses as right or wrong, but primarily to reinforce exercise completion. If some of the responses are likely to negatively trigger other participants, limit the extent to which the group is focused is on these responses. For example, a participant may have illustrated that he or she values getting high by sketching a pipe. In such a case, tell the participant individually that when participants share their responses to the exercise, to simply state that she / he drew something that represents valuing drug use. Indicate that the reason for this is to avoid triggering other participants. It may be helpful to also add that you understand that this portrays what is valued at this time in life.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “My Personal Boundaries”

Present the question on the first page of this session, “How are clear boundaries helpful to countries?” Write responses on the board. Some possible responses include:

- Boundaries define a country, where it begins and ends.
- They keep people out who aren’t supposed to enter.
- They help with developing a plan of protection.
- Boundaries help keep goods and products where they’re supposed to be. You have to know where the borders are to regulate imports & exports.

Then read the statement at the bottom of the page, “Boundaries help people in many of the same ways.” Go through the ideas the group generated about how boundaries are helpful to countries and translate that to how that applies to people. Here are the parallels to each of the statements above:

- Boundaries help define a person.
- Boundaries help you keep the privacy and space you need.
- Boundaries help you protect yourself and what’s important to you.
- Boundaries help you protect your belongings.

Remind the group that last meeting was focused on developing your values. Tell them that your values influence how you set your boundaries. For example, say that a person who values privacy may have set their boundaries to protect their privacy.

Tell the group that this meeting is focused on setting your own boundaries. Let them know that in a few weeks one of the sessions in the Relationships unit will focus on how to effectively communicate and reinforce your boundaries with other people. Say, however, that it all starts with setting your own boundaries.

Review “About Personal Boundaries”

The points on this page are generally self-explanatory. Review and discuss them with the group. You may need to be prepared to roll with resistance. For example, participants may point out that they have limited potential to decide their own boundaries, given how many decisions are out of their own control. They may also talk about ways that the culture or current context they live in does not make a lot of room for individual boundaries. Often, you can roll with resistance by acknowledging how hard this situation can be, and how much more challenging it can be to maintain a sense of oneself in such circumstances. You may want to add that you're hopeful that there may still be something useful in this session for them, despite some of these difficulties. Another point to emphasize when presenting this topic is that there tends to be a direct correspondence between our respect for our own boundaries and our respect for others.

Review “Examples of Personal Boundaries”

Bring the group's attention to this page. Review and discuss each of the areas of boundaries exemplified here. Tell the participants that the questions listed here are to have them begin thinking about these issues. Let them know that the purpose is not for them to state their answers to the questions listed under each of these categories during this group session. Say that many people find that they develop their own answers to such questions only over an extended period of time.

Assign Real Life Practice Exercise: “My Personal Boundaries”

Tell the participants that the purpose of this exercise is to encourage them to take some more time to work on developing their own personal boundaries. Review the three areas of this exercise, and summarize what participants are being asked to do. Point out that in the bottom section of the exercise, there are answers to check off that have blank sections to fill out, e.g., “talk to someone about this- who? _____.” Ask the participants to fill in those blank sections, because this will help them apply these ideas to their own lives. Answer any questions participants have and try to elicit a verbal agreement from them to complete this and bring it to the next group meeting.

Distribute the Participant Satisfaction Questionnaires

Allow participants several minutes to complete the satisfaction questionnaires, providing their feedback about the unit which they have just finished. The purpose of these questionnaires is to obtain potentially useful feedback to improve START NOW and its provision. The feedback is not to be used for performance evaluation of facilitators. Collect the completed questionnaires and forward them to the designated team member at your facility.

Determine Participants' Eligibility to Earn Certificates of Completion for this Unit

Excess unexcused absences disqualify participants from receiving a certificate. Inmates are eligible to earn a certificate upon completion of each unit provided they have had no more than two unexcused absences during Unit 1- My Foundation.

Some participants may have accrued several excused absences during a particular unit due to factors outside of their control like court dates, legal visits, or valid medical absences. When circumstances permit, arrangements may be made for participants to catch up on missed materials through a briefer individual review and by doing some reading and practice exercises on one's own. In the case of several excused absences during a unit, facilitators should make a clinical decision about whether the participant is eligible for a certificate, i.e., if that participant has shown a concerted effort to learn and practice the skill covered within that unit. Other participants have been asked to repeat a particular unit with another group. Copies of the certificates for each unit are shown in Appendix 8, and electronic versions of these forms are available.

Award the certificates in the spirit of celebration of accomplishment, with possible applause, speeches, congratulations, etc.

Unit 2
**My Emotions:
Dealing with Upset Feelings**

Includes 2 Sections:
**General Skills for Understanding & Coping with Feelings
&
Coping with Some Specific Difficult Emotions**

Gender-Responsive Facilitation of Unit 2
My Emotions: General Skills for Understanding & Coping with Feelings

This unit focuses on participants' understanding and recognition of emotions. There is emphasis on the development and implementation of prosocial, adaptive coping skills to target the management of challenging emotions.

The prevalence and acuity of mental illness within justice involved populations highlights the critical need for the understanding and management of difficult emotions. High rates of impulsivity, chronic emotional dysregulation, self-regulation failure and a persistent negative mood are characteristic of both male and female individuals who are justice involved or substance-addicted (Murdoch, Vess & Ward, 2012).

Gender-related differences associated with the processing and expression of emotions become an important consideration. Males for example, are less inclined to disclose emotions and are less apt to decode and make meaning of non-verbal behaviors than females. Women, on the other hand, more readily express themselves and are often more attuned to both their emotions as well as the emotions of others than men. In addition, justice involved women have been found to present with higher rates, and a greater number, of acute psychiatric disorders than do justice involved men (Trestman et al., 2007). The use of psychotropic medication within the correctional environment is greater for women than for men –another indicator of higher rates of mental illness.

My Emotions: General Skills for Understanding & Coping with Feelings

Session 11

My Emotions & Feelings, part 1

The purpose of this session is to increase participants' comfort in talking about their feelings and emotions. This session places an emphasis on recognizing, describing and understanding a variety of emotional responses as well as learning how emotions can be beneficial.

Gender Responsive Facilitation of this Session

Justice involved women present with higher rates of experienced physical and sexual abuse, mental health problems, and suicidal and parasuicidal behaviors, difficulties in interpersonal relationships, and poor adherence to institutional or community regulations than their male counterparts. As a result, it is important to be mindful that talking about emotions may evoke memories related to past traumatic experiences, particularly for female participants. Participants may feel an increased desire to share some of their traumatic memories. Discussions of participant's traumatic experiences may elicit strong emotional responses for both the participant as well as the group members. It is important to acknowledge participants' courage to speak out in the group setting. However, it is equally important to limit the extent of their disclosure to reduce the likelihood that participants will become dysregulated.

Participants of either gender with prior treatment experience, such as anger management groups, may feel more comfortable providing initial examples of how emotions can be helpful. Encourage these participants to share their knowledge with the rest of the group as this can be an empowering experience. Listen for the communication of emotion and aid participants in noticing the various facets of the emotion such as the mood, body-based presentation, and associated thoughts. After several examples have been shared, encourage participation from those who have yet to contribute to the discussion. Note that it may be challenging for some to speak about their emotions in public and alert participants to the fact that throughout the session there will be other ways to participate.

Within male groups it is beneficial to create dialogue around the functionality of emotions. This provides a more concrete approach to discussing emotions, aiding participants to uncover the utility of emotions. Encourage male participants to share as many examples as possible before eliciting talk related to how emotions manifest. How would someone know if you were mad, sad, angry, or depressed? How do you know when others are mad, sad, angry, or depressed? Participants who are less competent in identifying and appraising emotional reactions may profit from supplementary examples.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “My Personal Boundaries”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each participant’s response, offering positive feedback for any attempts to constructively complete this exercise. Roll with resistance regarding those who have chosen not to do it. Discuss pragmatic issues that interfered with practice and attempt to problem-solve with the participant. After this individual review, engage the participants in discussion of their reactions to this exercise. Invite them to share their responses with the group, if they’d like.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 11 is “Matching Rhythms” and it is an Auditory-Movement type of exercise. The facilitator directions are provided in a focusing exercise handout for this session. There are no participant handouts needed for this exercise.

Introduce “My Emotions & Feelings, part 1”

Present the concepts on the first page of this session. Read the points listed or see if group members would be willing to read sections. Discuss the ideas listed here as you review this page. It may be helpful to provide some examples of the bulleted points on this page since some of these points are abstract. At the same time, keep in mind that some of these points are likely to relate to participants’ trauma experiences. Keep the discussion of these examples fairly brief to reduce the likelihood of eliciting trauma reactions.

Discuss the “How Emotions are Helpful” Page

As you discuss the concepts on this page, make them clearer by tying them into examples the participants can relate to. You can provide such examples in a variety of ways:

- by asking the group members for examples from their own lives

- through sharing appropriate examples from your own life (examples that are not overly personal or emotionally charged)
- by making up examples using situations you've seen occur within the facility, or in the lives of other participants (without sharing their personal information)

Review the “How to Recognize & Talk about Feelings” Page

Tell the group that the chart on this page can be helpful for understanding emotions. Some people have said that dealing with emotions is difficult because they can't figure out what they or others are feeling. People also say they don't have words to describe and talk about their feelings. This chart provides information to help with those concerns. Point out that the first column shows five primary types of emotions, the second column shows clues for recognizing these emotions, and the third column gives a number of different words for these feelings. Review the information here. Tell the participants that they may want to refer to this chart at other times, including the following:

- When they're experiencing an uncomfortable emotion, but can't figure out what they're feeling
- When they're trying to express their feelings while talking or writing a note to someone, and can't find the words they want
- When they're doing an exercise or ABC for START NOW that includes listing their feelings

Assign Real Life Practice Exercise: “My Emotions & Feelings, part 1”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to practice recognizing, naming, and understanding their emotions. Read, or ask a volunteer from the group to read the exercise. Tell them that the exercise focuses on a stressful situation, because such situations can involve a mix of several emotions. Tell them that even though there's room for three emotions in the grid below, you know that some situations may involve fewer emotions. Remind them that the chart on the previous page of their workbooks might be helpful as they attempt this exercise. Ask whether anyone has questions, and answer those presented. Try to elicit a verbal commitment from them to do the exercise and to bring their responses to the next session.

My Emotions: General Skills for Understanding & Coping with Feelings

Session 12

My Emotions & Feelings, part 2

The purpose of this session is to aid participants in understanding the connection between their thoughts and emotions. Exercises in this session help participants to make the connection between how an event or trigger is interpreted and the corresponding emotional response.

Gender Responsive Facilitation of this Session

Session 12 is likely to have equal applicability to both genders, given that it presents a key cognitive behavioral conceptualization of the relationship between cognition and emotions. Men however, are less often socialized to be self-reflective and often have greater difficulty recognizing their internal thought processes. As a result, male participants may experience greater difficulty in recognizing and identifying emotions and how emotional cues are likely to play a role in one's feelings than female participants. It is beneficial to provide a more robust explanation as well as several examples to aid in the comprehension and integration of the concepts into practice.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "My Emotions & Feelings, part 1"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

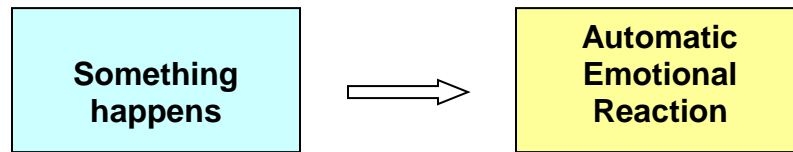
Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be

especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Understanding my Emotions & Feelings, part 2”

The purpose of this page is to introduce the idea that emotions aren’t an automatic response to what happens but are determined by how we process or interpret what happens. First, briefly review the material at the top of the page. As you present the material at the bottom of the page, it can be helpful to draw it sequentially on the board. First draw this-



Use an example your group members can relate to. For example, “Something happens” can be “You just got back from commissary, and someone asks you for some of your food.” Ask the group what emotion they may experience in that situation and elicit their responses. In all likelihood, participants may feel as though their reaction just happens automatically.

Now draw the next diagram-



Say that people in the group may have different reactions to being asked for some of their commissary depending on what they tell themselves about the request. For example, if they think about all the times when that person has pressured them for food, they will probably feel angry. If they think about all the times when that person has shared food with them, they may feel ok about the request. Or, maybe if they think about how little food they were able to get, they may feel disappointed.

Later in this session, the pieces of the model above will be explained further. Reassure group members of this if the model is not yet clear to them.

Review “Understanding Emotional Reactions: Triggers”

The information on this page is generally self-explanatory. Read, or ask a group member to read, sections of this page. Discuss each section as you go. Many participants may have a hard time recognizing their thoughts. Tell the group, “one way

to recognize your thoughts is to notice what you say to yourself in your head.” Also, let them know that continuing to practice your focusing skills may help you recognize your thoughts. This is because slowing down and tuning into what you are doing increases the likelihood that you will notice your corresponding thought process.

Review “Understanding Emotional Reactions: Process”

In a similar way, review the information on the next page, discussing the questions associated with the spider example as you do so. Here are some examples of possible thoughts and corresponding feelings about seeing the spider making a web:

Thoughts	Possible Feelings
“Oh, there’s a spider- this place is gross.”	Crabby, gloomy, depressed
“Cool web- look at how that spider works.”	Cheerful, interested, inspired
“That’s one big spider. I hope he doesn’t drop down and bite me.”	Scared, worried, disgusted
“Another spider. Big deal.”	Bored

As you discuss the spider example, participants may express a variety of reactions to seeing a spider. Some may acknowledge negative feelings about spiders, however do not push them to admit to feeling frightened of spiders, if they don’t want to acknowledge this. The idea is not to put anyone on the spot (or embarrass them) if they feel the need to appear tough.

Facilitate the “In-Session Exercise”

Read this exercise, and have members discuss their reactions. Some facilitators may find that your group is well-suited to break into a few smaller groups (while remaining in the same room) to briefly discuss their reactions to this in-session exercise. Then a representative from each of these small groups shares that group’s reactions with the larger group. If you are considering this option for your group, discuss it with your co-facilitator and/or supervisor prior to the group session. Doing so requires a level of trust and comfort among the participants. This is not recommended if there are concerns about simmering hostilities.

Assign Real Life Practice Exercise: “Understanding my Emotions & Feelings”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about how this topic applies to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Emotions: General Skills for Understanding & Coping with Feelings

Session 13

Coping with Upset Feelings through Actions

The goal of this session is to teach participants that there is a reciprocal relationship between one's emotions and actions. Participants will learn how their emotions influence their actions and conversely how their actions also affect their emotions.

Gender Responsive Facilitation of this Session

Male participants will likely find the concept of action in relation to emotions to be more familiar than other suggested approaches of coping. This is likely due to gender differences in socialization. Through multiple media sources, men receive strong messages about masculinity and are often encouraged to “blow off steam” through constructive activities such as athletics, or less constructive activities such as drinking. Women on the other hand are socialized to a greater extent to turn inward upon experiencing emotional distress.

Given gender socialization, male participants may have a greater familiarity with how to apply this skill than female participants. Reinforce participation and movement towards understanding and integrating this concept into practical application through positive feedback and encouragement. Participants of both genders may tend to gravitate toward actions that fall within traditional gender-stereotypes. Encourage participants to explore a wide range of actions, crossing gender-expectations and stereotypes. Male participants may benefit from greater support and encouragement in identifying the link between how non-traditional actions (e.g., talking about one's feelings) effect their emotions. The gender specific patterns described in the introduction to this START NOW unit may be useful in this context. Women may require additional prompting to consider examples of action that may be effective ways to navigate upset feelings.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “My Emotions & Feelings, part 2”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review

followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 13 is “Time your Breaths” and it is a Breathing and/or Imagery type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the participant materials needed for this exercise are copies of the handout, “Time your Breaths Reminder Sheet”.

Introduce “Coping with Upset Feelings through Actions”

Ask participants to look at the first page of this session in their participant workbooks and discuss the two main ways described here in which upset feeling may negatively affect one’s actions- inaction or impulsive actions. Try to elicit examples from the group of when they have seen such effects of upset feelings on actions, either in themselves or others.

Now introduce the concept shown on the next page of the workbook, “Emotions affect our actions, and our actions affect how we feel”. Draw and then discuss the diagram shown on that page of the workbook on the board:



Invite participants to share their reactions to the statement, “Think of ways that your actions have affected the way you have felt.” Write responses on the board.

Review the “Coping with Upset Feelings through Positive Actions” Skills

Read, or invite group members to read, the three skills shown on the top of this page. Help them to personalize these skills by thinking of how they can use such skills in their current circumstances. Now tell the group you are going to invite them to do something called “brainstorming”. Tell them the key ideas of brainstorming are: 1) name all the ideas that come to mind; and 2) let the ideas flow without editing or criticizing them. First, have them brainstorm as a group “positive activities I can do.” Write all of the responses on the board as they call them out. If someone criticizes another person’s response, remind the group that they aren’t editing during brainstorming. After quite a few responses are called out, stop, and now tell the group that together you will eliminate those ideas that can lead to major problems, like harming one’s health or violating regulations or laws, and cross-out any of those. Now tell them that they may want to write down some of the remaining ones that they like in their own books. Now repeat this brainstorming procedure for “positive activities I can do in the community.”

Coping with Upset Feelings through Actions, part 2, & Assign Real Life Practice Exercise:

The last part of this skill is shown on the next page and will provide the between-sessions practice exercise. Review the contents of this page together, which describes ways of coping with upset feelings through self-soothing. Ask the participants to fill in additional examples below between sessions. Answer any questions presented, and attempt to elicit agreement to do this exercise.

My Emotions: General Skills for Understanding & Coping with Feelings

Session 14

Coping with Upset Feelings through Thoughts & Imagery

The purpose of this session is to aid participants in identifying thinking errors or cognitive distortions that they may utilize to counter negative emotions and teach participants how to replace thinking errors with more realistic thoughts in order to better cope with upset feelings. This session concludes with an introduction to the coping strategy of mindfulness through imagery.

Gender Responsive Facilitation of this Session

The coping strategy of mindfulness through imagery may raise some resistance among participants, particularly with male participants. While rolling with resistance, it may be beneficial to alert participants to the uses of visual imagery in other contexts. It may be helpful to convey a more positive attitude about imagery by acknowledging that visual imagery has become a beneficial practice within sports. Mental imagery has been found to increase athletic performance e.g. more energy, less injury, as well as motivation and overall enjoyment. Encourage participants to try this strategy and observe what they notice given their experience.

In order to create a safe space to practice this skill, it is beneficial for the facilitator to tell participants the approximate length of the exercise, provide clear and simple instructions, and remind participants how to rejoin the exercise should they lose focus. In addition, it is important to be aware that while some participants may prefer to close their eyes during the focusing exercise; others may feel vulnerable doing so. This holds true for both genders; however, given higher rates of complex trauma, female participants tend to endorse vulnerability and discomfort, often choosing to focus on a particular spot in the room. Participants who have experienced trauma may feel high levels of distress when performing this task with their eyes closed. Participants should be encouraged to listen to their bodies and only close their eyes if they feel comfortable doing so. The START NOW facilitators will encourage participants to share their individual reactions to the focusing practice exercise.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce "Coping with Upset Feelings through Thoughts & Imagery"

Now introduce the points on the first page of this session in the workbook. Review the introductory points on the top of the page, and then ask participants to do the exercise at the bottom for a couple of minutes individually. If you have some group members who cannot read, present the items verbally.

Review "Thought Errors"

This page shows a streamlined version of the thought errors often taught in CBT therapies, ones that are particularly common and useful to understand. Review this chart. It may be helpful to draw it on the board before the group, so that you can point to sections as you discuss it together with the group. Encourage the participants to think of additional examples as you do. Now complete the exercise show at the bottom of this page, asking group members to find the thought errors on the previous page.

"I'll never be able to do this time (or commitment, or any other current challenge)." mainly exemplifies "all or nothing thinking" and "expecting the worst."

"My life has no meaning." mainly exemplifies "negative self-talk", and, to some extent, "all or nothing thinking."

Review "Coping with Upset Feelings by Replacing Thought Errors"

Review the concepts on this page by reading and discussing them. Have the group work together to fill in the last two items. Here are some possibilities:

Negative Self-Talk	<i>“I’m no good, just like my parents said.”</i>	<i>“They were wrong to say that to me. I’ve made mistakes. I’m doing the best I can to do better.”</i>
	<i>“I can’t do anything right.”</i>	<i>-I can do things right- I just sent a nice note to my family. -We all make mistakes sometimes. I do things well too. -I’m proud of myself that I signed up for the new class here.</i>
Expecting the Worst	<i>“I’ll never get out of here.”</i>	<i>-I’ll keep out of trouble and I will get out of here. -It’s hard to be patient. Take it one day at a time.</i>

Facilitate “Coping with Upset Feelings through Imagery” Exercise

Read the following instructions to the participants. Use a calm, relaxed tone of voice. Read somewhat slowly.

“This exercise will take you through the steps of using imagery to cope with upset feelings. You can use this method to cope with a wide range of upset emotions. The exercise goes with the pictures of outdoor scenes shown on your workbook page.

You have the option of keeping your eyes open or closed. Some people find that they can imagine more vividly with their eyes closed. Others feel more comfortable with their eyes open. If you keep your eyes open, it usually works best to pick a focus point low in the room. You may wish to place your workbook page on your table and use that as a focus point. It can also work well to focus on a spot on the floor.

Sit in a comfortable position. Feel free to shift around to get yourself more comfortable... Now take some slow deep breaths. Slowly breathe in, then slowly breathe out... Again, slowly breathe in... then out. Each time you breathe in, imagine that you are breathing in fresh, calming air. When you breathe out, imagine that you are releasing your stressful, upset feelings. Notice how just taking some slow breaths can help you calm down and relax...

Now, picture a beautiful outdoor place. It can be a place you’ve been to, or a place you only imagine... Imagine yourself taking in the whole scene, as you continue to breathe slow, relaxing breaths... Picture the colors of the place. See all the dimensions of the scene, what is close to you, and what is far... Imagine any movement you see in the scene... Continue to breathe slowly and calmly... Allow yourself to experience a nice feeling of relaxation and calm as you picture this beautiful place...

Now, imagine the sounds you hear in this place, whether leaves rustling, or birds calling, or waves breaking... Continue to breathe slowly and comfortably... Imagine the physical sensations of the place, like the warm feeling of the sun, or the feeling of the wind, or of the earth or grass below you... Even imagine any smells or tastes that go with this place... Allow yourself to enjoy the whole beautiful scene, as you continue to breathe slowly and calmly...

You can return to a feeling of relaxation and enjoyment of this beautiful scene by repeating these steps we've done today on your own. First get in a comfortable position, close your eyes or use a focus point, breath slowly and calmly, and picture a positive scene. Imagine the sights, sounds, and other sensations of that scene. The more you practice these steps, the more helpful you are likely to find imagery.

After doing an imagery exercise like this, you may find that you have an increased feeling of relaxation and calm for the next several hours, almost as though you took a refreshing nap.

Now shift your attention back to this room... Notice any sounds you hear, and the feeling of your chair... When you're ready, look around this room."

Give the participants a minute or so to complete the final steps of the exercise, then invite them to share their reactions. Remember to roll with any resistance verbalized. If some participants criticize the exercise, or say it was not helpful to them, simply acknowledge their concerns without debate.

Assign Real Life Practice Exercise: "Dealing with Upset Feelings through Thoughts & Imagery"

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about how this topic applies to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Emotions: Coping with Some Specific Difficult Emotions

Session 15

Recognizing & Coping with Depression

The goal of this session is to enhance participants' ability to notice depressive symptoms within themselves and implement adaptive coping skills to counter these symptoms.

Gender Responsive Facilitation of this Session

Many individuals of both genders lack the language to adequately describe depressive symptoms in a meaningful way, often proving to be a barrier to treatment. Justice involved men, who are often characterized by emotional immaturity and irritability (Panton, 1974), often mistake depressive symptoms for anger. As a result, many participants may not notice signs of depression within themselves, because they are less skilled in identifying signs and symptoms of depression and their underlying emotions. Others have become adept in suppressing their feelings, ignoring emotional cues.

Some participants may perceive depression as a weakness. Given gender socialization, this is particularly likely to occur in male participants, and in participants of either gender who have taken on tough "street" identities. Remind participants that it takes courage to admit to having a problem and subsequently tackling it. Common unhealthy strategies such as minimizing or concealing upset feelings may exacerbate emotional difficulties. It may be beneficial to explore less charged examples such as going to the dentist: "When you think you may have a cavity, you can choose to go to the dentist and possibly get a filling. You might also choose to stay home, hoping the cavity may disappear. You then run the risk that it may worsen and require that you have your tooth extracted." The short-term effects may look less attractive but the long-term effects will prove to be better.

Many justice involved women present with depression, posttraumatic stress disorder, and suicidal ideation (Grande et al., 2012), making this session particularly salient for them. This session allows female participants to spend time putting language to their symptoms and identifying how depression impacts their quality of life. Male participants will likely benefit from examining symptoms that perhaps they previously disregarded or inaccurately classified as something other than depression.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Dealing with Upset Feelings through Thoughts & Imagery”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 15 is “Small Words from Long Words”, and it is a Cognitive-Verbal type of exercise. The facilitator directions are provided in a focusing exercise handout for this session, and the participant materials needed for this exercise are writing instruments and copies of the handout, “Small Words from Long Words: Elementary”.

Introduce “Recognizing & Coping with Depression”

In this section, we’ll be going over the first specific difficult emotion: Depression. Ask for a volunteer to read the first point in this section, “Many people have noticed that some sad feelings come along with living a full life.” Encourage participants to share their reactions while normalizing the relevant responses. Some common responses may include:

- it’s impossible to be happy all the time
- if you’ve ever cared about something or someone, you’re likely to feel sad when you’re apart
- things can’t always go your way, so you’re bound to feel sad when they don’t

The pictures on the page (missing someone, saying goodbye, attending a funeral) are intended to prompt the participants to think of situations in life where feeling sad is a normal and appropriate response. The distinction should be made, though, about feeling sad occasionally and when warranted versus feeling sad most of the time. The remainder of the page highlights the “coming attractions” for this session.

Review the “Information about Depression” page

Review this information by either reading the bullets yourself or asking a volunteer to read the bullets. Highlight the point that depression is a medical problem commonly characterized by some well-known symptoms. Encourage the participants to ask for clarification on any of the warning signs.

The last 2 paragraphs on this page emphasize the need for professional help in assessing and treating depression particularly when it includes frequent thoughts about death and suicide. Be prepared to educate the participants on how to go about requesting mental health services and when it's appropriate to request help.

Review & Discuss “Coping with Depression through Actions”

Here is some additional information about covering the tips shown in this section:

- **Push Yourself to Do Positive Things-** The point of this section is that actions and behaviors can change emotions. Encourage participants who have used a similar strategy in the past to share their own experiences, how they used it and how it was helpful. With each of these suggestions, the emphasis is on telling oneself to do something that may feel counter-intuitive when feeling depressed.
- **Participate Actively, if You are in Treatment-** including taking medications and attending appointments. Some participants may have a strong reaction to the suggestion to take medications. A simple point should be made that depression is a medical condition and has been shown to positively respond to medications. But, more importantly, the point should be made that the participants talk openly with their prescribers and keep them informed about their medication adherence.

Coping with Depression through Thought & Imagery

Here is some additional information about covering the tips shown in this section:

- **Monitor & Change your Thoughts-** Participants can refer back to the “Coping with Upset Feelings through Thoughts & Imagery” session to remind themselves about the different types of thought errors. The lesson here is that depression is known to increase thought errors. If people recognize their potential for thought errors when not depressed, they will be better equipped to recognize them when they are.
- **Talk to Yourself the Way You’d Talk to a Friend-** We can also cope with depression by changing the way we talk to ourselves. Encourage participants to share ways they’ve verbally supported a depressed friend. Ask them to translate those messages into something they can say to themselves.
- **Coping with Depression through Imagery-** Coping with Upset Feelings through Imagery was taught in the previous session and assigned as last group’s practice exercise. Ask group members if more clarification is needed.

Assign Real Life Practice Exercise: “My Personal Plan for Recognizing & Coping with Depression”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about “Recognizing & Coping with Depression” and how this topic applies to their own lives. Participants are asked to reflect on some warning signs in themselves and what their personal plan would be to

cope with depression. Ask whether anyone has questions about the exercise and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Emotions: Coping with Some Specific Difficult Emotions

Session 16 **Coping with Anger**

The purpose of this session is to foster discussion regarding the purpose and utility of anger. In addition, this session aims to aid participants in recognizing their individual triggers for anger and noticing signs of feeling angry.

Gender Responsive Facilitation of this Session

While there are many positive functions of anger (Novaco, 1976), this emotion poses significant difficulty for individuals who have poor control over the expression of anger. Impulsivity, aggression and interpersonal discord are common among those with substance use disorders and those who live with mental illness and are justice involved in the United States. Mood, substance use, personality and psychotic disorders are prevalent among the justice-involved population and are associated with a variety of interpersonal and behavioral issues. As a result, nearly 50% of United States inmates present with symptoms of mental illness, impulsivity and mood dysregulation. Post-incarceration many behavioral issues persist, resulting in disciplinary problems, management issues and increased risk for recidivism. Anger can play a role in violent behavior, rule infractions, and interpersonal discord. It may also contribute to offending behavior and to behavioral difficulties once justice-involved or incarcerated.

Male inmates are more likely to commit violent offenses than females and tend to have longer prior criminal histories than females. Men have higher recidivism rates when compared to their female counterparts (Hubbard, 2007; Jiang, David, Min & Ing, 2013).

Female inmates present with higher rates of physical and sexual abuse, mental health concerns, and suicidal and parasuicidal behaviors, difficulties in interpersonal relationships, and poor adherence to regulations within the justice system. In addition to demographic and management differences, there are interpersonal communication differences that further compound clinical management. Women tend to ask more questions, question authority, possess a desire to discuss things, and challenge decisions. In institutional settings, this is largely connected to interpersonal discord, difficulties with staff and disciplinary infractions. Women's emotional development is in large part dependent upon relationships. When women feel detached from others, they report feeling disempowered, unsettled, and anxious. Unhealthy connection may result in mood dysregulation, interpersonal discord and rule violations.

Women who report trauma often experience diminished dignity, power and control. These experiences may result in chronic and pervasive anger without clinical intervention (Horn and Towl, 1997). In the institutional setting, borderline personality disorder and posttraumatic stress disorder are two disorders associated with trauma and present more frequently in female inmates than male inmates. These disorders are

often problematic in that they are characterized by among other symptoms, impulsivity, intense, inappropriate outbursts of anger, mood dysregulation, poor control over anger, cognitive distortions, hyperarousal, impaired perception of threats to self, resulting in fight or flight response, and tendency to perceive stimuli as threatening (APA, 1994).

In general, the literature indicates higher levels of trait anger, an outward anger expression, as well as lower levels of anger control for men (Milovchevich, Howells, Drew & Day, 2001). Conversely, women demonstrate lower levels of trait anger and a greater ability to manage anger. Note that this research refers to “gender role identification,” indicating that women who perceive themselves as masculine, rather than feminine, are characterized by the former pattern. Self-esteem is proposed to play an important moderating role, with lower levels of self-esteem leading to more pronounced differences between males and females (Nunn & Thomas, 1999). Recognizing, reflecting on, and coping with one’s anger are therefore highly important skills to acquire particularly for masculine individuals.

Both genders will likely benefit from comprehensive discussions about how anger may manifest and what purposes it serves. Challenge participants to think about anger in relationship to their thoughts and behaviors. Men may be more likely to demonstrate outward expressions of anger as this is congruent with a stereotypical male persona. Some women may have received the message that it is permissible for men to display anger, while women need to show restraint, maintaining control over upset feelings, including anger. It is likely that there may be some resistance related to the expression of anger. Roll with resistance and aid participants in understanding that there is a continuum of emotional expression and varying degrees of anger, both of which contribute to how participants interpret, express and understand their respective feelings.

The ABC exercise will prove to be a helpful instrument to concretize the discussion. Male participants will find this tool to be more digestible than simply talking about anger. The ABC exercise provides a physical linear representation of thoughts, feelings behaviors and consequences that will likely demonstrate enhanced understanding for participants.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise “My Personal Plan for Recognizing & Coping with Depression”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce "Coping with Anger"

Here, we introduce the 2nd specific difficult emotion, Anger. Remind the participants how emotions are helpful (see Session 11):

- Emotions give you helpful information
- Emotions help you lead a more satisfying life

Encourage their feedback on how they think anger can be positive & useful. Some common responses could include:

- Feeling angry could be a sign that someone has mistreated you
- Feeling angry can be a sign that you might need to change something
- Feeling angry can motivate you to communicate your dissatisfaction with problematic circumstances

How can anger be a problem? Here are some common responses:

- When it gets the best of us
- When it consumes us
- When we react to it in a "close-minded" and impulsive way
- When impulsive angry actions bring about negative results, including the following:
 - Damaging a relationship
 - Losing a job
 - Hurting someone
 - Legal consequences
 - Feeling badly about your actions

Coping with Anger: Recognize your Triggers & Signs

Review and discuss the main point at the top of this page- “We can have additional control over anger by recognizing our triggers and signs of anger early.” Then review and discuss “Anger Triggers”. Next, ask participants to check off which scenarios are triggers for them. One check indicates that it’s likely to trigger them and two checks indicate that it will almost always trigger them. Also, encourage the group to personalize their manuals by writing down their own specific additional triggers.

Next, review and discuss the “Signs of Anger” section of this page. Then ask participants to personalize this section by checking off the signs of anger they tend to show. Note that there is also room here for participants to add some additional signs they have noticed in themselves.

Coping with Anger: Preventing Impulsive Actions

Review and discuss the points on this page. Here are some tips for each of the 4 main points.

- Slow Down- similar to the In-session Focusing exercises. The Facilitator could take an opportunity to practice the Slow Down skill as an in-session exercise. Ask the group to take a couple of slow, deep breaths, inhaling through the nose and exhaling through the mouth and to count backwards from 20.
- Replace Hot Thoughts with Cool Thoughts- encourage the group to come up with some more examples of cool thoughts that have a calming effect.
- Notice Thought Errors & Replace those Thoughts- using an Open & Balanced attitude; ask the group to come up with some real life examples.
- Think it Through- similar to the ABC skill. If time permits, ask the group to come up with an example of an angry behavior to be used for ABC analysis.

Assign Real Life Practice Exercise: “Coping with Anger”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about “Coping with Anger” and how this topic applies to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Emotions: Coping with Some Specific Difficult Emotions

Session 17

Coping with Worry & Anxiety

The purpose of this session is to foster discussion regarding the purpose and utility of anxiety. In addition, this session aims to aid participants in recognizing their individual responses to feelings of worry and anxiety, including avoidance. The goal of this session is for participants to better understand anxiety and develop prosocial, healthy adaptive coping skills to better manage feelings of anxiety and worry.

Gender Responsive Facilitation of this Session

Similar to depression, discussing anxiety and anxiety related symptoms may prove challenging for male participants. Disclosing information about one's mental health symptoms such as anxiety may be perceived, particularly by men, as exposing one's relative weaknesses. Men also report concerns regarding the risk of presenting as weak or impaired in an environment where they feel they need to be mindful of their safety.

In the context of correctional settings, violence is a term that is almost synonymous with prison life. It is a pervasive and troublesome dynamic that presents safety and security issues for inmates and prison staff in most correctional settings. Despite efforts to reduce or eliminate violence within correctional settings, it is a phenomenon that remains to exist and complicate the housing and care of offenders (Wolff, Blitz, Shi, Siegel, and Bachman, 2007). Power and control are often the underlying motives for both prison violence and bullying behaviors. The prison environment strictly restricts and, in many cases, prohibits inmates from attaining power and control. The appeal of attaining mastery over one's life and jurisdiction over one's environment is thus extremely appealing and persistently sought after by prison inmates. In some cases, this results in some inmates seeking to attain domination over peers (Elliott, 2006).

Childhood sexual and physical abuse has been linked to anxiety disorders and depression (Mancini, Van Ameringen & MacMillan, 1995). Anxiety disorders can therefore be expected to occur more frequently within female participants given elevated incidents of traumatic experiences. Women will likely be more comfortable sharing their individual experiences as there are higher rates of anxiety and less of a stigma attached to the experience and expression of anxiety-related symptoms.

In the facilitation of this session, it is important to be mindful of participant safety, the stigma associated with mental illness and symptoms of mental illness, and gender differences. If participants seem hesitant to share personal examples, it may be beneficial to elicit discussion related to anxiety through more neutral examples such as performance during an athletic event or on an academic examination. In addition, it may be helpful to review the homework assignment for this session by circulating the

room and talking with participants individually, rather than reviewing in a group format. This will allow for greater likelihood of meaningful participation in the homework.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Coping with Anger”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 17 is “Coping with Emotions Crossword”, and it is a Cognitive-Verbal type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the participant materials needed for this exercise are writing instruments and copies of the handout, “Coping with Difficult Emotions Crossword”.

Introduce “Coping with Worry & Anxiety”

This session starts with a brief review of the information about “Fear & Anxiety” which was covered in START NOW session 11. If new members have joined your group due to rolling admissions since that topic was covered, review this material more thoroughly.

Purposes of Anxiety

The purpose of this section is to reinforce the idea that all emotions, even uncomfortable ones, have a purpose. Review the two purposes of anxiety listed here, signal and motivation. Try to tie them in with real life examples that pertain to the participants’ experiences. Also invite the group members to share examples.

Additional Information about Anxiety

Review the points on this page, which are shown below in smaller font size. Here is some additional information about presenting each of these points.

1. Some people are naturally more anxious than others. This is partly determined by genes. Research has shown differences even in newborn babies.
This point is included for two reasons:
 1. It may be interesting to participants.
 2. If participants have struggled with anxiety problems, knowing this may help reduce self-blaming.

2. Sometimes a person may be feeling anxious or nervous and not even realize it. Some people were taught not to pay attention to their feelings.
Some participants may think this topic doesn't apply to them because they don't notice themselves ever feeling anxious. It may be helpful to point out to them that sometimes people can recognize anxiety by the way they behave. For example, they may find themselves avoiding a situation.

3. Sometimes people get in the habit of using drugs and alcohol to numb anxious feelings. After a while, they get used to not feeling anxiety. They forget how to deal with anxiety without using drugs or alcohol. When they stop using, they may have a hard time dealing with the anxiety or knowing how to cope with it.
Let them know that, over time, they'll learn new ways to deal with the anxiety **if** they stay clean and sober. At the beginning, they may just need to remind themselves that the feeling will pass and they can tolerate it.

4. Anxiety may have started out as a useful signal, like an alarm bell. After a while, the alarm may have started going off in too many situations. So it may seem like there is danger, when there really isn't. The problem gets worse when you start to avoid situations because of that alarm signal. Then you don't get a chance to find out it's really ok.
Let the participants know that this pattern is especially true for individuals who've been through trauma. If some participants don't appear to understand this pattern, let them know that the story on the next page of their participant workbooks will provide an example that may make it clearer.

Anxiety & Avoidance

Review this story together. Either read it to the group or have volunteers from the group read sections of it. Stop and pause to discuss each of the included questions, eliciting ideas from the participants. Also review the 2 points at the end of this section. Understanding the link between anxiety symptoms and trauma can help normalize symptoms that may seem to have come out of nowhere and may appear strange.

Review "Coping with Worry & Anxiety" Skills Sheet

As you review each of the points on this page, attempt to link them to situations the group members can relate to. Encourage them to provide examples and ideas. When you review the point "Take a couple of deep breaths & use calming self-talk", ask the participants to try taking a couple of deep breaths right then.

Here are some directions for teaching the relaxation exercise, as mentioned in the final point on the page. Read the following instructions to the participants. Use a calm, relaxed tone of voice. Read somewhat slowly.

“We are going to do a relaxation exercise you can use to cope with stress and worry. Before we start the exercise, let me tell you what you can expect. Some parts of this exercise are similar to the imagery exercises also used in START NOW. After starting with some slow, relaxing breathing, I am going to have you focus on relaxing the muscles of your body. A way to learn how to relax a muscle is to first tense that part of your body, and then release that tension. Try that with an arm. Tighten the muscles of your arm, and then release that tension. (You [and your co-facilitator] are encouraged to do this, too, as you give the participants a chance to try this.) Notice the difference in that feeling. When you release that tension, you relax.

Relaxation exercises like the one we are about to do are helpful for reducing stress, helping you fall asleep, and increasing your feelings of wellness. The more you practice them, the better they work for you. Some people find that if they practice relaxation exercises regularly, they do not need to do the step of first tensing their muscles and can go straight to relaxing the various parts of their bodies. Do you have any questions before we begin? (Briefly answer any questions.)

You have the option of keeping your eyes open or closed. Some people find they can relax most easily with their eyes closed. Others feel more comfortable with their eyes open. If you keep your eyes open, it usually works best to pick a focus point low in the room.

Sit in a comfortable position. Feel free to shift around to get yourself more comfortable... Now take some slow deep breaths. Slowly breathe in, and then slowly breathe out... Again, slowly breathe in... then out. Each time you breathe in, imagine that you are breathing in fresh, calming air. When you breathe out, imagine that you are releasing stress and worry. Notice how just taking some slow breaths can help you calm down and relax...

Now, focus on your legs and feet. Briefly tense the muscles of your legs and feet; then release that tension. Continue to breathe slowly and deeply as you relax your legs and feet. (Pause a bit.)

Now, focus on your arms and hands. Briefly tense the muscles of your arms and hands; then let go of that tension. Continue to breathe slowly and deeply as you relax your arms and hands. Allow both your legs and arms to be relaxed. (Pause a bit.)

Next, focus on the muscles in your torso- your stomach, and back, and chest. Briefly tense those muscles; then release that tension as you continue to breathe nice and slowly. (Pause a bit.)

Next, focus on the muscles in your neck, jaw and face. Briefly tense those muscles; then release that tension as you continue to breathe slowly and deeply. (Pause a bit.)

Allow all the muscles of your body to be relaxed. Continue to breathe slowly and deeply. Scan your entire body, and if you find some muscle tension, just gently release that. Just notice and enjoy that feeling of relaxation. (Pause a bit.) By repeating these steps of first slowing down your breathing, then relaxing the various muscles of your body, you relax and increase your sense of wellness.

After doing a relaxation exercise like this, you may find that you have an increased feeling of relaxation and calm for the next several hours, almost as though you took a refreshing nap.

Now, shift your attention back to this room... Notice any sounds you hear, and the feeling of your body in the chair... When you're ready, look around this room."

Give the participants a minute or so to complete the final steps of the exercise, and then invite them to share their reactions. Remember to roll with any resistance verbalized. If some participants criticize the exercise, or say it was not helpful to them, simply acknowledge their concerns without debate.

Assign Real Life Practice Exercise: "Coping with Worry & Anxiety"

Briefly review the practice exercise, telling participants that the purpose of the exercise is to give them a chance to think some more about how this topic applies to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Emotions: Coping with Some Specific Difficult Emotions

Session 18 **Coping with Loss & Grief**

The purpose of this session is to aid participants in acknowledging the variety of losses one may experience and understanding how these losses may manifest themselves.

Gender Responsive Facilitation of this Session

Many participants experience loss as a result of substance addiction, justice involvement, or incarceration. This may include limited or little contact with family and friends, the loss of relationships or friendships, divorce, and in some cases, the loss of their custodial rights to their children. When considering the high importance women place on interpersonal relationships and the high proportion of justice-involved women with underage children, it can be expected that many female participants will likely endorse loss and grief. Male participants may also freely endorse loss; however, this may look slightly different. While some men will identify the loss of a friend or family member through death or separation, they will likely also include the loss of a job, apartment or house, vehicle, or social status as scenarios that may elicit emotional responses. Validate each gender's respective examples and experiences while highlighting other experiences of loss that may not have been mentioned. Some of the examples that are unique to the correctional or institutional setting e.g. a family member has been denied visitation due to a prior criminal history, may aid in participants' reducing self-blame however, make it challenging to treasure the positives. Elicit movement in the direction of healthy grieving and reinforce the integration of pro-social, healthy, adaptive coping skills to navigate loss and grief.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "Coping with Worry & Anxiety"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one that they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Coping with Loss & Grief”

Review the ideas discussed on this page of the participant workbook. Take the stance that these are ideas for consideration, and roll with resistance. The goal is not to have to convince the participants that there is one right position about this.

About Loss & Grief: Ideas for Discussion

Discuss each of the “ideas for discussion” on this page. Here are some suggestions about points to make.

We think about losses caused by sad or tragic events, but people often experience some loss or grief when good things happen, too.
How could this be?

When good things happen, there is also some kind of change involved. This change can mean saying goodbye to old situations that one may need to grieve. Here are examples:

- Graduating school or a training program can mean saying goodbye to the instructors, classmates, etc.
- Getting clean and sober can mean saying goodbye to “people, places, and things”.
- Getting out of an unhealthy relationship can mean grieving the things you enjoyed about being with that person.

People who grow up in highly stressful environments tend to have had more loss experiences.

Can you think of some reasons for this?

Here are some examples:

- Having to move due to evictions, fleeing bad situations, etc.
- Higher risk of losing people to untimely deaths, incarceration or drifting.
- Losing possessions or not having basic necessities due to poverty.

**Often grief comes out looking like anger.
*Why do you think this happens?***

Here are some reasons:

- The person may be angry that they have to say goodbye.
- Some people are uncomfortable showing upset feelings, and automatically turn them into anger.
- People sometimes pick a fight with someone they have to say goodbye to. It's like they're trying to believe, "I'm not going to miss him because he's such a jerk."

Ways to Cope with Loss & Grief

This topic is covered on the next two pages of the participant workbook. As you review these points, attempt to link them to situations the group members can relate to. Encourage the participants to provide examples and ideas.

Assign Real Life Practice Exercise: "Coping with Loss"

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply coping with loss skills to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

Distribute the Participant Satisfaction Questionnaires

Allow participants several minutes to complete the satisfaction questionnaires, providing their feedback about the unit which they have just finished. The purpose of these questionnaires is to obtain potentially useful feedback to improve START NOW and its provision. The feedback is not to be used for performance evaluation of facilitators. Collect the completed questionnaires and forward them to the designated team member at your facility.

Determine Participants' Eligibility to Earn Certificates of Completion for this Unit

Excess unexcused absences disqualify participants from receiving a certificate. Inmates are eligible to earn a certificate upon completion of each unit, provided they have had no more than one unexcused absence during this unit.

Some participants may have accrued several excused absences during a particular unit due to factors outside of their control like court dates, legal visits, or valid medical absences. When circumstances permit, arrangements may be made for participants to catch up on missed materials through a briefer individual review and doing some reading and practice exercises on one's own. In the case of several excused absences

during a unit, facilitators should make a clinical decision about whether the participant is eligible for a certificate, i.e., if that participant has shown a concerted effort to learn and practice the skill covered within that unit. Other participants have been asked to repeat a particular unit with another group. Copies of the certificates for each unit are shown in Appendix 8, and electronic versions of these forms are available.

Award the certificates in the spirit of celebration of accomplishment, with possible applause, speeches, congratulations, etc.

Unit 3
Me & Others:
Building Positive Relationships

Gender-Responsive Facilitation of Unit 3: Me & Others: Building Positive Relationships

This unit focuses on developing and increasing positive relationship skills. Emphasis has been placed on improving a variety of communication skills including listening skills, assertiveness, boundary-setting, asking for support, and receiving positive and negative feedback. In addition, participants learn to recognize unhealthy relationships and navigate the challenges associated with these relationships, including managing feelings of rejection or abandonment.

Gender significantly impacts interpersonal relationships. Understanding differences in relationships with respect to gender will largely enhance the delivery of the material as well as aid participants in understanding and integrating the concepts in this unit. The inclusion of gender-specific examples is recommended. In addition, highlighting skills of greater interest for each gender and reinforcing real life application will be particularly salient for participants.

My Relationships: Building Positive Relationships

Session 19

Beginning Positive Relationships

The purpose of this session is to aid participants in understanding the characteristics of positive relationships. Participants are encouraged to apply START NOW skills from previous units in addition to learning new, relationship-specific skills.

Gender Responsive Facilitation of this Session

A primary motivation throughout life for women is connection. Relationships play an important role for women in terms of their sense of identity, self-worth, and purpose in life. Women's emotional development is thus largely dependent upon relationships. When women feel detached from others, they report feeling disempowered, unsettled, and anxious. Unhealthy connections may result in mood dysregulation, interpersonal discord and rule violations. Justice involved women are more likely than men to maintain relationships to significant others such as parents or children while incarcerated or institutionalized (Bloom et al., 2003) and are more likely to create relationships with peers while institutionalized. Strengthening positive interpersonal relationships may prove beneficial in reducing self-damaging or criminal behavior in women as high rates of interpersonal discord are correlated with arrest and subsequent incarceration (Ney et al., 2012). In addition, it is likely that enhanced relationship awareness and integration of healthy interpersonal skills will reduce the frequency with which women will present with mood dysregulation, interpersonal discord, and rule violations.

Nearly 70% of justice-involved women have at least one underage child, and a relatively small number of these women ever receive visits of their children during their period of incarceration or institutionalization (Bloom et al., 2003). Teaching female participants how to recognize, implement, and demonstrate positive interpersonal skills through healthy relationships will aid in their ability to navigate their respective roles as mothers and caregivers. Enhancing relationship skills will likely contribute to increased stability for the family system and may positively impact children in the areas of behavior, substance use, physical abuse, and academic failure (Durlak, 1998). Good parent-child relationships (e.g., parental warmth, acceptance, reinforcement of prosocial behavior, appropriate disciplinary strategies) have been identified as a protective factor for such negative outcomes.

Male emotional development is defined in part by a process of separating from others. As a result, men are more inclined to focus on themselves while institutionalized or under stress. It will be particularly beneficial to discuss the purposes and types of relationships that one may experience for male participants. For example, eliciting dialogue to understand how a positive employer and employee relationship impacts quality of work life and the continuation of an employee in a position, may be a helpful

way to open the dialogue regarding relationships and illustrate the benefits of enhancing relationship knowledge and skills. It is important to roll with any resistance that participants may present with and attempt to elicit change talk and any small successions in the direction of developing

Female inmates are more likely than male inmates to maintain relationships to significant others such as parents or children while institutionalized (Bloom et al., 2003). This may prove helpful in that participants will likely provide robust examples to illustrate application of positive relationship skills.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Coping with Loss”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 19 is “Auction Hidden Objects Puzzle”, and it is a Cognitive-Visual type of exercise. The facilitator directions for this exercise are provided in the focusing exercise handouts for this session, and the participant materials needed for this exercise are writing instruments and copies of the handout “Auction Hidden Objects Puzzle.”

Introduce “Understanding the Importance of Positive Relationships”

Review the ideas discussed on this page of the participant workbook. The purpose of the material on the top of this page is to encourage participants to think about a broad range of relationships as they work through the topics in this unit. Encourage them to write any additional types of relationships that come to mind on the blank lines of this section.

Next, present to the group the question at the bottom of the page-

What are some reasons it's helpful to build positive relationships?

Write their answers on the board. If at all possible, try to find something “correct” in each of their answers, even if you must re-phrase it a bit. The purpose of this section is to build motivation to work on developing positive relationships throughout this unit. As with previous topics, do not take the position of having to “sell” the participants on the idea that positive relationships are valuable. Let them hear and see the points mentioned, knowing that they will decide over time for themselves. Writing all or some of these points down in their own workbooks is completely optional.

Below are some reasons it's helpful to build positive relationships. If the group is limited in their ideas about this topic, you may want to suggest some of these additional reasons.

- An important part of recovery often involves forming new positive relationships.
- A source of support, including practical help, emotional support and information
- Reduce loneliness
- People to do fun things with
- Time at work goes more smoothly and is more enjoyable
- Increased chance for love and affection
- Increased chance for sexual relationships
- Being seen as a team player, a positive person
- Matching your own values about what's important
- Can give you a warm, pleasant feeling
- Less likely to give each other hassles

Review the “2 Different Types of Relationships” page

Many participants may have had much exposure to interpersonal situations in which “getting over on people” has been the primary goal of relating to others. The purpose of this page is to get them thinking about the contrast between that style of relating vs. developing positive relationships. The idea is to begin developing discrepancy between these styles, with the goal of beginning to develop motivation for change. Obviously, such potential change is likely to be a gradual, accumulative process. Another purpose of mentioning this contrast here is to roll with resistance by acknowledging the pressures that some participants likely experience to be tough and aggressive. Please note that the idea is **not** to communicate that people with the style in the second column are bad and wrong, but that people adopt this style, with its pluses and minuses, for many reasons.

Review the page “How START NOW skills can be used to build Positive Relationships”

The material on this page is intended to help the participants link skills and concepts learned in earlier START NOW sessions to those covered in this session and unit. If

you've been running this group as a closed group, where all of the participants have been in it from the beginning, your participants may find tying these concepts together to be especially helpful. If an open format has resulted in many new group members, use your judgment regarding the extent to which you review this material.

Teach “Building Positive Relationships: Starting with the Basics”

Teach these skills by having the group review the written points, as well as by modeling some of the skills. For example, demonstrate an example of greeting a person by name. Also encourage the participants to provide examples and ideas. Whenever possible, arrange quick demonstrations of the points. It may be useful to tell the participants that occasionally someone learns about the benefit of addressing people by their names and begins to “overdo” it, putting their name into almost every sentence. Tell them that this is one of the many areas where moderation, “doing something a medium amount”, is a good thing.

Assign Real Life Practice Exercise: “Building Positive Relationships”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to begin applying these relationship skills to their own lives. It may be helpful to mention that, if they get stuck when they try to answer the questions, they can always look at the information included in the previous pages of their workbooks. Let them know that the section at the top part of the page reflects the idea that **positive relationships do not just occur by chance**. This section provides the opportunity for them to give themselves credit for what they have done to build positive relationships.

The section at the bottom part of the page asks them to think about a relationship they want to improve. Tell the participants that the key is to be specific about what they think they should do, and then to try it out. Tell the participants that the key to this exercise is that they do something that may build positive relationships. They cannot control the other person's reaction. Even if they do not get an encouraging response from the other person, they can give themselves credit for what they did. Tell them that, for most people, building positive relationships is a gradual process consisting of multiple steps over time. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 20 **Active Listening**

The purpose of this session is to aid participants in practicing active listening skills and understanding why these skills are important in building and maintaining positive relationships.

Gender Responsive Facilitation of this Session

In addition to demographic and management differences, there are interpersonal communication differences that further compound clinical management. Men have been found to talk more than women and interrupt more but engage in less self-disclosure when compared to their female counterparts (Bloom et al., 2003). Women tend to ask more questions, challenge authority, possess a desire to discuss things, and contest decisions. In institutional settings, this is largely connected to interpersonal discord, difficulties with staff, and disciplinary infractions. In addition, women have been identified to show more empathetic behaviors and to be more adept at understanding nonverbal behaviors (Bloom et al., 2003). What may be natural modes of communication, asking questions, seeking relationships can be seen as annoying, bothersome, and manipulative. As a result, gender differences may adversely effect the way behaviors are understood and managed when justice involved or in treatment overall.

Neurobiology tells us that women have stronger neural connections, resulting in better listening skills than men whose connections are less strong. Male participants will often require additional practice and attention to listening skills. It will be beneficial to reinforce progress in the development and implementation of listening skills particularly for male participants. Active listening aids individuals in feeling heard- their voice and what they are communicating matters. For many folks who report trauma histories, this may be particularly empowering. Elicit feedback on how one feels when they are heard to further strengthen the connection between enhanced listening skills and healthy relationships.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Beginning Positive Relationships”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise. Reinforce participants' recognition that positive relationships do not just happen but involve specific efforts on their part. Reflect and compliment any efforts to apply the "beginning positive relationships skills" reported by participants.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce "Active Listening"

Present the question on this page-

Why do you think being an active listener can help a person build positive relationships?

Write their answers on the board. If at all possible, try to find something "correct" in each of their answers, even if you must re-phrase the responses a bit. The purpose of this section is to build motivation to improve their listening skills. As with previous topics, do not pressure the participants to believe that good listening skills are important. Let them hear and see the points mentioned, knowing that they will decide for themselves. Writing all or some of these points down in their own workbooks is completely optional.

Below are some reasons that good listening skills help people build positive relationships. If the group is limited in their ideas about this topic, you may want to suggest some of these additional reasons:

- People tend to like those who listen to them
- It takes your focus off yourself.
- Active listening helps the other person feel valued and respected.
- You may find that you have something in common.

- Active listening is one half of effective communication.
- You may find ways you can be supportive of that person.
- You may find ways they can be supportive of you.
- You show caring and concern when you listen.

Review the page that begins, “Sometimes when we’re talking with someone ...”

The point here is to contrast interactive, give-and-take conversation to “talking at someone”, and to further develop motivation for the former. Read, or ask a volunteer to read the statement-

*Sometimes when we’re talking with someone, we don’t listen very much. We’re busy planning what we’re going to say; when that happens, we talk **at** the other person, not **with** them.*

Then present the following questions to the group, and elicit their reactions:

- *Why do you think we do this?*
- *Is there a problem with doing this?*

Regarding the first question, the main point to make is that often we’re worried about having the right thing to say. We get so involved in what we’re going to say, that we lose sight of the fact that there’s someone else in the room.

Regarding the second question, try to elicit from the participants that **not listening** while we plan our response means that we probably **miss a lot** of what the other person is saying. If we stay relaxed and just listen more, our responses will probably be just fine, and often better than if we spent the time planning something clever to say.

Now, review the “Facts about Active Listening” on the bottom of the page, which are generally self-explanatory. It may be helpful to point out that a wide range of people find it helpful to learn and practice active listening skills. You can tell them that many professionals, including physicians, therapists, sales representatives, and teachers learn and practice the same skills they are learning. Tell them it gets easier over time.

Teach “Active Listening”

These skills are described on the next two pages of the participant workbook. Review each of the skills listed, and attempt to tie them in with examples relevant to the participants’ experiences.

Here are ideas for some of the points that may require some discussion (the others are self-explanatory, as shown in the participant workbook):

Point 2. Non-Verbal Active Listening Behaviors

One way to demonstrate this skill is by having one facilitator talk to the other about something. The listener looks everywhere except at the speaker and doesn't nod or give any other nonverbal signs of listening. The next time, the listener looks at the speaker and nods at times. Ask the group members how they think each one of these listening styles would affect the speaker. Then have the speaker describe his/her experience. Another option is to have a participant play the role of the speaker, doing the same exercise described.

Point 3. Listen without Interrupting

You can similarly illustrate this skill, as described below:

- First, one facilitator talks while the other patiently waits.
- Next, demonstrate one facilitator cutting off the other person, and then saying something like, "Sorry, go ahead."
- Have participants practice this skill in pairs.

It may be helpful to note the importance of listening without providing advice: we often expect that the speaker is looking for our advice when all they need is a supportive listener.

Point 4. Reflect

Notice that the comments regarding this skill begin on page 1 and continue onto page 2 of this skill sheet. After reviewing the points in the participant workbook, emphasize that when attempting to reflect what someone is saying, use an open and balanced attitude. We may **think** we know what the other person means, but we don't know for sure. Reflecting is really making a **guess** about what they are saying. Getting it wrong sometimes comes with the territory because we can't read another person's mind. Encourage the participants to stay open-minded if they try to reflect and the other person says they got it wrong. Tell them that we all get it wrong sometimes. Getting it wrong gives us a chance to ask them to say more to help us understand what they really mean. Then we can try again.

Also, tell them that while it's sometimes helpful to start with a phrase like "So you're telling me that . . .", this is not always necessary (as illustrated by the example in their workbooks).

For the group practice exercise, make some statements, and have participants reflect them back, restating what you have said. In addition to the statements below, feel free to make up others or elicit some from the group members.

- *“My sister’s coming up this weekend to visit me. The week’s going so slow. I haven’t seen her for a long time.”*
- *“Things are so messy around here. It gets on my nerves. Since I started going to those new classes I’ve been too busy to clean it up the way I usually do.”*
- *“I put in a request for a meeting with the social worker a few days ago. I haven’t heard a thing. Everyone else gets seen a lot quicker than that.”*

Assign Real Life Practice Exercise: “Active Listening”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to begin applying these relationship skills to their own lives. It may be helpful to mention that, if they get stuck when they try to answer the questions, they can always look at the information included in the previous pages of their workbooks. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask the participants for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 21 **Assertiveness Skills**

The purpose of this session is to aid participants in understanding how to communicate assertively. The session highlights the differences between aggressive, passive, and assertive communication with examples in order to generate discussion and aid participants in enhancing their pro-social communication skills.

Gender Responsive Facilitation of this Session

The term assertive is often erroneously assumed to mean aggressive, forceful, or persistent. This misunderstanding of the term yields poor knowledge about communication styles as well as poor implementation of healthy, assertive communication. Given that participants may have different ways of understanding the term assertive, it will be important to collaboratively define the term and discuss how the concept differs from aggressive communication.

Gender socialization further clouds the distinction and gender stereotypes related to communication will likely be highlighted by participants through discussion. Of note, male participants may be more likely to connect with an assertive or aggressive stance in that men are often socialized to stand up for themselves in order to uphold their position, values, or perspective. Female participants on the other hand, will likely report less of a connection to assertive communication than their male counterparts. While there may be generational differences in socialization, women historically have been socialized to be less active in getting their needs met and to maintain harmony within relationships at the expense of one's own needs. As a result, a higher percentage of women may adopt a passive style of communication.

Considering the high proportion of female participants who have experienced domestic violence, there is likely to be a profound concern about the adverse consequences for presenting with assertive communication skills. It is important to roll with any resistance, understanding that in many cases the use of assertive communication skills may have resulted in violence or other adverse consequences if the participant was in an unhealthy relationship. When teaching participants how to adequately express their emotions, thoughts, and needs, it is important to be mindful that male groups may require more help with appearing less aggressive, whereas female groups may need more instructions on how to use a more active form of communication.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Active Listening”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 21 is “Repetitive Movement”, and it is a Cognitive-Movement type of exercise. The facilitator instructions for this session are provided in a focusing handout for this session. There are no participant handouts or other materials needed for this exercise.

Introduce “Assertiveness Skills”

Review the ideas discussed on the first page of this session in the participant workbook. The points are generally self-explanatory.

Review & Discuss Examples of Aggressive, Passive & Assertive Communication

The next three pages of the participant workbook provide examples of aggressive, passive and assertive communication styles. The idea is to illustrate some of the disadvantages of aggressive and passive communication, and to build participants’ motivation to learn and use assertive communication. Review these examples with the group. Invite participants to read sections. Use the questions after each example to encourage the participants to think about the impact of each communication style. As with other topics, present the rationale for assertive communication, but do not pressure participants to agree.

Review “What is Assertive Communication?” and “Tips for Assertive Communication”

Review the points on the next two pages through interactive discussion. Invite participants to participate in reading some of the sections. Also encourage them to

react to the ideas listed, and to indicate their understanding about why each of the tips may be helpful

In-Session Practice Exercise: Assertive Communication

Ask the group participants for examples of situations in which assertive communication would be helpful. First, use a role-play exercise to illustrate assertive communication with the each of the facilitators playing one of the roles. Have the other facilitator and the rest of the group members offer feedback to the facilitator attempting to illustrate assertive communication. First, and primarily, focus on what that person did well. Now elicit an idea or two of what that person could have done to “make it even better”. This focus on the positive is intended to make role-play practice as positive an experience as possible. Acknowledge that many people feel anxious or uncomfortable doing role-play exercises. When the facilitator is modeling the skill, be sure to find and describe a skill or statement he or she could have done better. This avoids modeling the idea that people are expected to demonstrate the skill perfectly. Now set up additional role-play practice experiences, attempting to involve all of the group members. Continue to aim the bulk of the feedback at what the participants do well. If some participants are unwilling to do this practice, roll with resistance.

Assign Real Life Practice Exercise: “Assertive Communication”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply assertive communication skills to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 22

Responding to Feedback

The purpose of this session is to aid participants in learning how to respond to both positive and negative feedback. The session differentiates between constructive and destructive feedback, providing prosocial strategies for responding to both types of feedback.

Gender Responsive Facilitation of this Session

Many individuals have difficulty accepting criticism. It does not feel good to hear about personal issues, poor perceptions, or improvements desired by others. Destructive feedback goes beyond critiquing an individual and usually involves an attack on a person's character, morals, values, etcetera. It is likely that all participants will benefit from learning strategies to respond to destructive feedback as well as opportunities to practice responding to such feedback.

Some participants also struggle with responding to praise or positive feedback. This may be secondary to their upbringing, how they were socialized, or how they feel about themselves. Individuals with low self-esteem may find it more challenging to accept positive feedback, often minimizing strengths, denying the feedback, or otherwise shifting responsibility as not to accept the positive feedback. Women tend to present with more difficulty accepting positive feedback. This seems to be particularly salient for women who have experienced trauma and/or domestic violence and present with diminished self-efficacy. START NOW facilitators will want to be mindful of this gender difference and elicit opportunities for participants to share possible discomfort, practice the skill, and learning to tolerate the discomfort. Encouraging practical application is useful, as practice leads to increased comfort.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "Assertive Communication"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this

practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Responding to Feedback”

Review the story discussed on the first page of this session in the participant workbook. Then present the question at the bottom of the page-

Who do you think will turn out to be a better cook? Why?

Elicit participants' reactions. The rationale is to present the idea that, most likely, Julio will become the better cook, given his openness to feedback. Encourage the participants to say what it is about being open and responsive to feedback that can help one learn. Some participants may disagree. They may campaign for Luis' potential. If so, don't get pulled into a debate. Roll with resistance. Invite them to verbalize the reasons for that opinion and try to find something to agree on within it. Acknowledge that people may have different opinions about this topic or example. Then keep moving on.

Review “Responding to Positive Feedback”

This material is covered on the next page of the participant workbook and should be reviewed interactively with the participants. “Responding to Positive Feedback” is included here for a number of reasons. You may wish to address some of these points after eliciting participants' reactions to the question, “In what ways do you think being able to accept positive feedback might be helpful?”

- Participants may have had few opportunities to learn and apply this skill. In other words, they may rarely have received praise or positive feedback.
- Accepting positive feedback can increase self-acceptance and a sense of being supported.

- When you kindly accept positive feedback, your relationship with the person who gave you that feedback grows. The other person feels good. It increases the likelihood they will offer positive feedback again.

After reviewing this rationale, review the tips at the bottom of the page. It may be helpful to illustrate some of the points through quick demonstration role-plays.

Review “About Negative Feedback”

Review the examples of negative feedback described at the top of this page. Tell the participants that everybody gets negative feedback at times. It’s just a part of life. Now let the participants know that there are two types of negative feedback- constructive and destructive. Review the definitions of each of these types of negative feedback, and, together with the participants, come up with examples of each of these types of feedback. Write them down so these examples can be used for skills practice. Here are some examples, in case the group has difficulty generating ideas:

Examples of Constructive Negative Feedback:

- “I notice that you haven’t been taking your medication for depression.”
- “You’ve been late to work 2 times this week.”
- “I haven’t seen you at 12 Step meetings lately.”
- “I’m sorry to say that we selected another applicant for the job.”

Examples of Destructive Negative Feedback

- “You’re an idiot.”
- “You’re ugly.”
- “You’ll never amount to anything.”
- “You’re never gonna change.”

Review “Responding to Constructive Negative Feedback”

Review the tips on this page. Encourage the participants to think about ways they have used, or can use, each of these ways of responding to constructive negative feedback. Then use the examples of constructive negative feedback that the group came up with to illustrate these skills through role play demonstration and practice.

Review “Responding to Destructive Negative Feedback”

Review the tips on this page. Encourage the participants to think about ways they have used, or can use, each of these ways of responding to destructive negative feedback. Then use the examples of constructive negative feedback that the group came up with to illustrate these skills through role play demonstration and practice.

Assign Real Life Practice Exercise: “Responding to Feedback”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply responding to feedback skills to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

Session 23 Increasing my Support System

Session 23 is designed to help participants understand that with increased support, participants are likely to experience an improved quality of life. This session encourages participants to identify current supports and focuses on enhancing practical, emotional, social, informational, and spiritual supports to aid in improving participants quality of life both while incarcerated as well as post-release.

Gender Responsive Facilitation of this Session

The literature suggests that men are more inclined to focus on themselves while incarcerated or institutionalized, whereas women are more likely to maintain relationships to significant others such as parents and/or children (Bloom et al., 2003). These relationships continue to play an important role with respect to practical, emotional, and social support). Female participants will likely demonstrate a greater competency and willingness to establish relationships, as connection often represents women's primary motivation throughout life.

As previously noted, male emotional development is often linked to a process of separating from others (Miller, 1976). As a result, males are less likely to seek emotional and social support from peers, particularly in a correctional environment. To aid male participants in seeing the value in increasing support, START NOW facilitators will likely need to emphasize the benefits of increasing one's support and elicit discussion around practical and safe ways to do so. It will be beneficial to note ways participants may be already supporting each other (e.g., working out together, playing cards or basketball). Participants may be able to note the positive effects of these types of supports. Facilitators may emphasize that increasing one's support system does not necessarily have to involve extensive self-disclosure or spending time with someone during a time of distress. Male participants may feel particularly uncomfortable disclosing information. Underscore the value of participating in something enjoyable or fun such as exercise or recreation as a healthy means to develop social support.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "Responding to Feedback"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review

followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise. Highlight examples illustrating effective responses to positive feedback, as well as to both constructive and destructive negative feedback.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 23 is "Positive Memory Imagery", and it is an Imagery type of exercise. The facilitator instructions for this session are provided in a focusing handout for this session. There are no participant handouts or other materials needed for this exercise.

Introduce "Increasing my Support System"

Present this question to the group- "Why do we need support?" Elicit a variety of answers from the participants and write them down on the board. Try to find something correct in each of the responses, if possible. Below are additional responses, which can supplement the participants' responses.

- Support helps us feel less alone.
- It helps us get things done.
- Support helps us deal with stress.
- It helps us feel connected.
- A lot of things are easier to do with help.

Review "Types of Support"

Next review the types of support shown on the next page of the participant workbook. The idea of reviewing this together is not to say that this is the only way to categorize types of support, but rather to broaden the participants' view of possibilities for support. As you review each of the types of support, encourage the participants to think of how those types of support have been, or may be, available to them. Discussing this in group often informs participants about resources and possibilities about which they've been unaware. You may want to identify recovery support groups in your community, if appropriate.

Conduct Group Brainstorming: "How Can People Increase their Support Systems?"

Now conduct two separate brainstorming activities (as appropriate):

1. How can people increase their support system while incarcerated or institutionalized?

2. How can people increase their community support system?

Tell the participants to expect that some, or even many, of the ideas they come up with may apply to both of those questions.

Remind participants that the key to brainstorming is to start out by saying **any** ideas that come to mind without evaluating whether or not they are a good idea. Write on the board all of the ideas they call out, even “inappropriate” ones, as quickly and neatly as possible. If someone makes a negative comment about another participant’s idea, quickly set limits on this saying something like “Remember, we’re not editing!” Then keep moving forward. Tell the participants that they do not need to write all of these responses in their own workbooks, unless they prefer to do so. The facilitators should feel free to contribute items to the brainstorming, too. If a participant calls out a very general response, like “join community organizations”, write down that response, and say “what types?” Write various examples of that general response below.

It is time to stop when the momentum of brainstorming dies down. Tell participants that now the group will go through the list generated and just eliminate the items that “are not safe.” You can either go through each of the items individually and ask the group if they’re “ok” or “not safe”, or you can just ask the group to point out those items that “aren’t safe.” Again, the facilitators can feel free to state their own opinions about this, too. Because “not safe” can include jeopardizing one’s safety physically, emotionally or legally, “not safe” is sufficient to eliminate “inappropriate” items. After eliminating such items, tell the participants that, if they’d like, they can copy down whichever ideas appeal to them in their own workbooks. Allow some time for that.

Review “Skills for Seeking Support”

Review the skills on this page. Select an example or two from the previous brainstorming activity which you can use to illustrate the skill “use assertive communication to ask for support.” Do so using a combination of role play demonstration and practice.

In-Group Written Exercise: “My Support System”

Now ask the participants to turn to the next page of their workbooks. Review the set-up of this page and give the participants about 5 minutes to work on it during the group session. Let them know that they may think of additional responses in each of these areas. If so, they can add to this page on their own.

Here are some tips to accommodate those with writing and/or comprehension difficulties. Let the group know that the facilitator(s) are available to help. Also, show acceptance should any participants choose not to begin completing this during group. This is in keeping with the principle of rolling with resistance. It also helps participants who may have cognitive and/or writing difficulties save face. Tell the participants that

you will review their responses to this page when you review their real life practice exercises next session.

Assign Real Life Practice Exercise: “Increasing My Support System”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply increasing my support system skills to their own lives. Let them know that since this practice exercise asks them to take a step to increase their support systems between now and the next session, they should think about the time available. In other words, if the next session will be a couple of weekdays from now, their planned step should take into account what is realistic in that time frame. If there will be an intervening weekend, they may have more options.

Also, tell the participants that the key to this exercise is that they do something that may increase their support systems. They cannot control the other person’s reaction. Even if they do not get an encouraging response from the other person, they can give themselves credit for what they did. Tell them that increasing our support systems is a gradual process consisting of multiple steps over time. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 24

Recognizing & Avoiding Negative Relationships

The purpose of this session is to enhance participants' abilities to recognize the signs and patterns of negative relationships. This session provides tools for helping participants avoid or address a potentially negative relationship.

Gender Responsive Facilitation of this Session

Research on justice involved or substance addicted individuals has identified a large proportion of women who report physical and/or sexual abuse, predisposing these females to develop mental illnesses such as PTSD, major depression, anxiety disorders and/or substance abuse (Owen et al., 2008; Women's Advocacy Project, 2007). Abusive histories call for an extensive review of the signs of negative relationships. This will be particularly salient for female participants. Most likely, there will be group members that are able to recognize negative relationships. Some participants may want to share their experiences. It will be particularly important to support participants while providing limits on disclosure as not to trigger members of the group, including the participant interested in disclosing.

Stereotypical gender roles and gender socialization may influence participants thoughts on relationships, gender equality and control. Encourage participant to think both about themselves and others, recognizing negative actions and negative relationship patterns. Participants may currently be involved in negative relationships. It is important to provide information including skills to navigate unhealthy relationships however, be mindful that there may be resistance secondary to gender socialization, trauma and attachment. Roll with resistance, supporting members in their current ability to understand and move towards developing positive, healthy relationships.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "Increasing My Support System"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete

this exercise. Engage the participants in discussion of their reactions to this exercise. Remind the participants that the important thing is that they try to take positive steps to increase their support systems, and that they cannot control the other person's response to their constructive efforts.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Recognizing & Avoiding Negative Relationships”

Read, or have a volunteer read, the points on the top of this page of the participant workbook. Then present the questions at the bottom of the page-

Have you seen negative relationships harm people? If so, how?

The examples shared may include both participants' own experiences and other examples they've seen. Make it clear that this use of the term “relationship” includes all types of relationships. It's not limited to romantic or sexual relationships but includes friendships and associates.

Here are examples that may prove useful:

- Spending time with individuals involved in criminal or drug-seeking activity increases your own likelihood of criminal/ drug-seeking behavior. Such behavior includes gang activity, committing a crime together, or being involved in drug-related activities.
- Relationships involving a lot of chaos (fighting and violence) can lead to arrests, injury, and emotional difficulties.
- Being involved with people who are emotionally or physically abusive can lead to injury, emotional distress, and substance abuse (to numb upset feelings).
- A relationship with someone who lies or takes advantage of you can lead to reduced self-confidence, reduced trust, and emotional distress.
- Relationships with individuals who are sexually unfaithful or dishonest can put a partner at risk of disease and emotional distress.

- Relationships with people who are needy and dependent can take up a lot of your energy and resources, which may be better spent taking care of your own life.

Review “Recognizing Negative Relationships”

Read, or have a volunteer read, each of the points on this page of the participant workbook. Discuss the points, describing examples of each, and encouraging the participants to describe examples. If participants come up with additional early signs of negative relationships, they may wish to write them on the lines at the bottom of the page.

Review “Avoiding Negative Relationships”

Read, or have a volunteer read, each of the skills described here. Describe examples of how people can use these skills and encourage the participants to come up with examples.

The last point on this page asks the participants to *“Figure out if there is a specific type (or types) of negative relationship you tend to get involved in.”* Let the participants know that the real life practice exercise for today will ask them to work on this. Let them know that some people find that their negative relationship type tends to be a combination of more than one of the types listed here. If some participants say that they don’t tend to be drawn toward any negative relationship, don’t argue with them. It may be useful to say that it sounds like they are careful and may also be lucky.

Assign Real Life Practice Exercise: “Recognizing & Avoiding Negative Relationships”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply Recognizing and Avoiding Negative Relationships to their own lives. Let them know that, even if they have not had difficulties with negative relationships, it can be worthwhile to think about what may be their main areas of risk. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 25 **Setting Boundaries**

The purpose of this session is to aid participants in understanding the concept of boundaries, identifying healthy boundaries and developing and strengthening strategies to communicate one's boundaries to others.

Gender Responsive Facilitation of this Session

Setting boundaries is an active process, requiring assertiveness, communication and respect. Many women are socialized to maintain peace in interpersonal relationships. As a result, many women often take a passive stance and tend to be more reluctant to set boundaries due to a desire for harmony and fears that it may damage a relationship. It is important to appreciate this desire to maintain the relationship through highlighting the benefits of setting boundaries. Many participants may not be aware that setting interpersonal boundaries may enhance the quality of relationships as boundary-setting may improve the development of mutual respect, openness, and acceptance within a relationship.

As previously noted, male participants are often socialized to stand up for themselves (e.g. utilize communication in order to maintain their position, values, or perspective). Males are more likely to set boundaries; however, they may benefit from additional attention related to how boundaries are communicated to enhance the delivery and outcome. For example, START NOW facilitators may provide feedback to help group members learn how to set boundaries in a non-aggressive, kind, and respectful manner.

For both genders it may be beneficial to utilize role-play exercises to practice boundary-setting skills. START NOW facilitators can utilize the opportunity to encourage participants to try the skills with support and reflecting on the outcome and effects of boundary setting.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Recognizing & Avoiding Negative Relationships”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two

possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 25 is "Cognitive-Verbal Exercise #3 – Find-a-word puzzles or Scrambled word puzzles", and it is a Cognitive-Verbal type of exercise. The facilitator instructions for this session are provided in a focusing handout for this session. The participant materials needed for this exercise are writing instruments and the handout, "RELATIONSHIPS Word Search".

Introduce "Setting Boundaries"

This session starts out reviewing the concept of personal boundaries from Unit 1, Session 10. If your group is utilizing a closed admission format, such that all or most group members were there Session 10, you may not need to review this concept as extensively as in an open admission format. Next this session will focus on how you communicate your personal boundaries to others.

Review Examples

The next page illustrates the point that, for many people, setting boundaries can be challenging. Read each of the examples shown and discuss the accompanying questions. Some participants may disagree, saying that setting boundaries is easy. Roll with resistance. You may wish to say something like, "Even though many folks find setting boundaries challenging, there are people who find it easy and comfortable to do, and it sounds like you're one of them." It may also be useful to ask that participant what he thinks it is about himself that makes it relatively easy for him to set limits with people.

Review "Skills for Setting Boundaries"

This topic is covered on the next page of the participant workbook. As you review these points, attempt to link them to situations the group members can relate to. Encourage the participants to provide examples and ideas of how to use each skill. Also arrange role play demonstrations and practice of the skills.

Assign Real Life Practice Exercise: "Setting Boundaries"

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply setting boundaries skills to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

My Relationships: Building Positive Relationships

Session 26 **Coping with Rejection**

The purpose of this session is to highlight the different forms of rejection and to normalize the experience of rejection through a group discussion. The goal of the session is to encourage participants to use previously discussed coping skills to deal with upset feelings caused by rejection.

Gender Responsive Facilitation of this Session

Rejection is a topic that will often elicit strong emotional responses. The majority of participants will note that rejection is uncomfortable, unpleasant, and something many folks try and avoid. Unfortunately, rejection is an emotion many participants have experienced and will likely experience again. It is important to learn strategies to navigate this difficult emotion.

Often times rejection is erroneously linked to one's self-worth. Both genders will likely present with experiences where self-talk influenced the way they processed the rejection. Through curriculum-based examples as well as those participants share, facilitators will be able to highlight healthy strategies to cope with rejection.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: "Setting Boundaries"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up to 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written

ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Coping with Rejection”

This topic, “Coping with Rejection”, is included here not only because of the distress evoked by rejections, but also because of the frequency with which perceived rejection has triggered impulsive, destructive behaviors in some individuals.

Review the points on this page. The examples of rejection listed on the top of the page are meant to increase the likelihood that participants see the relevance of this topic to their lives. The point is that we all have to deal with rejection at times.

Introduce “Coping with Rejection through Thoughts & Imagery”

This topic is covered on the next page of the participant workbook. As you review these points, attempt to link them to situations the group members can relate to. Encourage the participants to provide examples and ideas of how you could use each skill. Also conduct role play demonstrations and practice the skills.

Introduce “Coping with Rejection through Actions”

This topic is covered on the next page of the participant workbook. As you review these points, attempt to link them to situations the group members can relate to. Encourage the participants to provide examples and ideas of how you could use each skill. Also arrange role play demonstrations and practice of the skills.

Assign Real Life Practice Exercise: “Coping with Rejection”

Briefly review the practice exercise, telling participants the purpose of it. See if any participants have questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

Distribute the Participant Satisfaction Questionnaires

Allow participants several minutes to complete the satisfaction questionnaires, providing their feedback about the unit which they have just finished. The purpose of these questionnaires is to obtain potentially useful feedback to improve START NOW and its provision. The feedback is not to be used for performance evaluation of facilitators. Collect the completed questionnaires and forward them to the designated team member at your facility.

Determine Participants' Eligibility to Earn Certificates of Completion for this Unit

Excess unexcused absences disqualify participants from receiving a certificate. Inmates are eligible to earn a certificate upon completion of each unit provided they have had no more than one unexcused absence during this unit.

Some participants may have accrued several excused absences during a particular unit due to factors outside of their control like court dates, legal visits, or valid medical absences. When circumstances permit, arrangements may be made for participants to catch up on missed materials through a briefer individual review and doing some reading and practice exercises on one's own. In the case of several excused absences during a unit, facilitators should make a clinical decision about whether the participant is eligible for a certificate (i.e., if that participant has shown a concerted effort to learn and practice the skill covered within that unit). Other participants may be asked to repeat a particular unit with another group. Copies of the certificates for each unit are shown in Appendix 8, and electronic versions of these forms are available.

Award the certificates in the spirit of celebration of accomplishment, with possible applause, speeches, congratulations, etc.

Unit 4
**The Future Me:
Continuing My Path to Success**

The Future Me: Continuing My Path to Success

Session 27 **Believing in my Future**

The purpose of this session is to aid participants in thinking about their futures in a meaningful way by encouraging them to use the skills of positive self-talk, recognizing and replacing thinking errors, and using positive imagery.

Gender Responsive Facilitation of this Session

This session will likely evoke rounds of discussion about re-entry into society and the associated stereotypes of being justice-involved, released from an institution, or addicted to substances. According to clinicians who work in the field, one of the strongest motivators for working toward a more successful future is a participant's source of social support (such as husband/ wife/ sibling/ friend). Participants who report having support generally appear more confident and positive.

For female participants anticipate addressing concerns with regard to one's self versus one's family. Women are more likely to be socialized to be the primary (emotional) caregiver for the family. These women may be concerned with how a change of behavior (i.e., taking care of oneself, before taking care of others) may affect their family reunion.

For male groups, discussions about a foreshortened future may arise –especially between urban, male participants. These group members may need extra encouragement to develop hope and picture a positive future for themselves.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Discuss Upcoming Termination of the Group (applicable to groups with closed admissions)

If your group has been using closed admissions, remind the participants that the group is beginning the final unit of START NOW. Tell them that this unit is 6 sessions long. Therefore, the group will end after 3 more weeks. Give the participants an opportunity to express their reactions to this information. Respond to the participants' various reactions with reflective comments.

Review Real Life Practice Exercise: “Coping with Rejection”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 27 is "Positive Place Imagery", and it is an Imagery type of exercise. The facilitator instructions for this session are provided in a focusing handout for this session. There are no participant handouts or other materials needed for this exercise.

Introduce "Believing in My Future"

Read, or have a volunteer read, the descriptions of people who do and don't picture a future. Then present each of the questions for group discussion. Encourage participants to express their ideas about this and try to find something correct in each of their points. It's optional for them to make notes about this in their workbooks. Here are some points that could be helpful to cover about each of these questions.

- Why do you think some people don't picture a meaningful future for themselves?
 - They may have grown up in communities in which many young people's lives have been lost to violence and crime.
 - They may have become very discouraged and frustrated.
 - They have given up.
 - They don't believe in themselves or the world any more.
 - In some ways, it's easier not to plan or work toward the future.

- How do you think "picturing a future" compared to "not picturing a future" affects people?
 - If you can picture the future, you may feel more like taking steps toward it.
 - If you don't picture the future, you don't think about how current actions affect you in the long run.
 - If you don't picture the future, you don't plan for it.
 - If you can picture the future, you may feel worried about it.
 - If you can picture a positive future, it may help you tolerate things you don't like about your current life.

Review Believing in My Future- Skills

Review the skills listed on this page. Encourage the participants to come up with additional positive self-talk about the future. Then, as you review the section about thought errors, try to help the group come up with additional examples for each type of thought error, and ways to replace them.

Now lead the group in the following positive imagery exercise regarding the future.

“Here is a way that you can use imagery to develop a positive view of your future. During this imagery exercise, you have the option of keeping your eyes open or closed. Some people find they can imagine more vividly with their eyes closed. Others feel more comfortable with their eyes open. If you keep your eyes open, pick a focus point low in the room.

Sit in a comfortable position. Feel free to shift around to get yourself more comfortable . . . Now take some slow deep breaths. Slowly breathe in, and slowly breathe out. Again, slowly breathe in . . . then out. Each time you breathe in, imagine that you are breathing in fresh, calming air. When you breathe out, imagine that you are releasing your stressful, upset feelings. Notice how just taking the time to take some slow breaths can help you calm down and relax.

Now, we are going to work on developing a positive view of your future. Think of an area of your life in which you’d like to see a positive change. It should be an area of your life that you can change. Here are some possibilities- it could be something about how you take care of your physical health, a positive change you’d like to make in a relationship, or any other kind of change you’d like to make... Continue to take some slow, deep breaths as you think of an area of your life to focus on.

Now think of the area of your life in which you’d like to make the positive change... Picture yourself being successful with that change as you continue to breathe slowly and calmly... See yourself achieving that goal... Get an image of how you look as you enjoy that success... Now imagine that you’re looking at the people and situation around you as you enjoy your success with that goal... How does the view look to you?... Imagine how you feel inside about the positive change you’ve made... Continue to breathe slowly and calmly... Picture yourself thinking back on the hard work you did to achieve that goal... Think about the difficulties and barriers you overcame to make that progress...

Now come back to the present and tell yourself that you can have the success you imagined... Imagine saying something kind and encouraging to yourself like, “You can do it.”

You can use imagery to develop a positive view of your future by repeating these steps we've done today on your own. First get in a comfortable position, then close your eyes or use a focus point, breath slowly and calmly, and picture your positive future. Allow yourself to enjoy that image. Say something encouraging to yourself. The more you practice picturing a positive future, the more likely that you'll start to believe in it.

After doing an imagery exercise like this, you may find that you have an increased feeling of relaxation and calm for the next several hours, almost as though you took a refreshing nap.

Now shift your attention back to this room... Notice any sounds you hear, and the feeling of your chair... When you're ready, look around this room."

Encourage the participants to verbalize their reactions to doing this exercise.

Assign Real Life Practice Exercise: "Believing in My Future"

Briefly review the practice exercise, telling participants that the purpose of the exercise is to reinforce a positive view of their future through putting that on paper, through writing and/or drawing. Indicate that they may wish to focus on what they imagined in the previous exercise, or not. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

The Future Me: Continuing My Path to Success

Session 28 **Setting & Making My Goals**

The goal of this session is to aid participants in understanding the importance and benefits of goal setting. Participants are given tips on how to create effective goals and are given an opportunity to set a personal goal and plan the necessary steps to achieve it.

Gender Responsive Facilitation of this Session

This session can be considered gender-neutral. As the session depends on what the group members come up with, it can vary to a great extent not only between, but also within gender groups.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Review Real Life Practice Exercise: “Believing in My Future”

Note that the first section of this manual fully describes the procedure for reviewing participants’ responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member’s response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Setting & Making My Goals”

Review the material on this page of the participant manual. When you present the questions listed on this page, write down participants’ responses on the board. Attempt to validate, through reflective comments, something about each response. The goal is help the participants recognize that most of us are more successful when we have a goal in mind. Do not pressure participants to agree with this point.

Review “Goal Setting”

Review the points on this page. Give examples, and encourage the group to come up with examples, of how each of these points may apply to their lives.

Review “Making my Goal ”

Review the points on this page. Let the participants know that in a few minutes a group practice exercise will illustrate how to apply these steps.

Do the Group Practice Exercise: “Making My Goal”

The group works together to see how the “making my goal” steps can be applied. Have a volunteer read the directions and the goal on this page. Remind the participants that, first, the goal needs to be realistic and specific. Now take the group through the “Making my Goal” steps. First have them brainstorm possible steps for meeting this goal. Remind them that when they brainstorm, they list every possible answer that comes to mind without evaluating it as good or bad. If participants make an evaluative comment about an idea another participant calls out, whether the comment is positive or negative, say something immediately like, “Remember, we’re brainstorming, not evaluating now.” Also, prompt the participants to think of possible steps in each of the following areas:

- Getting the information you need.
- Asking for support.
- Getting any materials needed.
- Listing other sub-tasks that have to be done. What are all the mini- steps needed to reach the goal?

After brainstorming, encourage the group to look through the list and eliminate any steps that are not needed to reach the goal. If the participants disagree about this, let them know that certain steps may be “optional”, depending on the participant’s preference.

Now, as a group, put the steps in order by placing numbers in front of the ones listed on the brainstorming list. Let them know that there is not always one “correct” order. People may do the steps in a somewhat different order from each other, and still be

successful meeting the goal. Tell them that the idea is to have a plan that they have thought through and which makes sense. Discourage debating which is the “right” order. Finally, encourage them to copy the steps, in order, in the section on the bottom of the page.

Assign Real Life Practice Exercise: “Setting & Making My Goals”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply the skills learned today to one of their own goals. Let them know that they can choose a goal regarding one specific area of their life. For example, it can be a goal about a specific relationship, about working, or about an upcoming parole board meeting. They don’t have to come up with the ultimate life-changing goal. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

The Future Me: Continuing My Path to Success

Session 29 **Problem Solving**

The purpose of this session is to provide participants with concrete steps on how to solve a problem. At the end of the session, the participants apply these steps as a group to a situation offered by one of the participants.

Gender Responsive Facilitation of this Session

This session can be considered gender-neutral. As the session depends on what the group members come up with, it can vary to a great extent not only between, but also within gender groups.

Group cohesion seems to be more robust with female-participant groups than male-participant groups. There may be improved group brainstorming to solve a proposed problem and more robust participation in female-participant groups.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Discuss Upcoming Termination of the Group (applicable to groups with closed admissions)

If your group has been using closed admissions, remind the participants that, after today's group, there are 3 group meetings remaining. Give the participants an opportunity to say their reactions to this information. Even when you have been clear throughout the weeks about how many group meetings are remaining, some participants may express surprise, as though this is new information. Other participants may express relief or excitement that this commitment is almost complete. Respond to the participants' various reactions with reflective comments.

Review Real Life Practice Exercise: "Setting & Making my Goals"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. As you look at each participant's attempt to set a specific, realistic goal

and then to break it down to steps, provide a balance of feedback. If a participant has struggled with this exercise in numerous ways, choose only one or two specific tips from the previous session to focus on with constructive comments. Be sure to combine this constructive feedback with encouragement of their efforts. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 29 is “Mazes” and it is a Cognitive-Non-Verbal type of exercise. The facilitator instructions for this session are provided in a focusing handout for this session. The participant materials needed for this exercise are writing instruments and copies of the “Mazes” handouts.

Introduce “Problem Solving”

Review the material on the first page of this session in the participant workbook. The idea is to both normalize experiencing barriers when trying to change for the better and introduce the idea that barriers need not be impossible obstacles. These ideas may seem obvious, but they aren’t universally understood or accepted. There may be participants in your group who haven’t tried to move toward positive change for a long time. Some may feel that deciding to change for the better is such a big positive shift (which it is), that everything will proceed positively after that. They may become unnecessarily demoralized when problems occur. Also, some participants may have experienced numerous setbacks and problems without the internal or external resources to address these problems. These participants may believe that experiencing problems while moving toward positive change always blocks further progress. These participants may be wary of believing that problem solving skills can be successful. The idea is to present an alternative perspective without pressuring participants to agree.

Present “Problem-Solving Steps”

Review the points on this page. As you review these points, attempt to link them to situations the group members can relate to. Let the participants know that in a few minutes a group practice exercise will illustrate how to apply these steps.

*Note to facilitators: Many skills training programs teach problem-solving. Many of them teach a method similar to the one presented here, though some are more complex. The goal in START NOW is to present a simple, yet effective, method. Step 3, though, differs from some popular models that often encourage the participant to choose **one** of the ideas generated through brainstorming. While some problems are amenable to choosing just one solution, often a combination of strategies is the most realistic and effective. For example, when faced with a disagreeable policy or ruling, a person may choose to **both** submit a formal appeal and talk with a friend to get some emotional support. One of those options alone may be insufficient to help the participant feel calm and in control.*

Do the Group Practice Exercise: “Using the Problem-Solving Method”

Tell the participants that you will apply the “problem-solving steps” as a group, to see how they work. Ask the participants if someone has a problem situation that they would be willing to describe to the group, to illustrate this method. Tell them that it can be any type of problem. Let them know that if the problem involves someone else, you will ask them not to name the other person. Also, let them know that the focus will be on what the group participant can do about the problem, rather than focusing on the other person and what they should do. The useful thing about having the problem suggested by a group member is that participants see that this is not a method that only works for pre-screened problems. In case no participants are willing to describe a problem, come to the group prepared to suggest one they can work on. Consider some of the situations participants have previously described in group for an idea.

Now that a problem has been chosen, take the group through each of the problem-solving steps, illustrating it on the board. Remember that the key to brainstorming is not to evaluate ideas suggested during the brainstorming, but only when it is complete. When applying step 3 of problem solving, “evaluate the possible solutions, and come up with a plan,” it can be helpful to illustrate each of the two possible methods. In other words, first discuss choosing one possible solution. Then illustrate going through each possible solution and rating it, for example, putting zero to three stars by each. This allows a quick visual scan of the preferred solutions.

Assign Real Life Practice Exercise: “Problem Solving”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to try to apply problem-solving skills to a situation in their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

The Future Me: Continuing My Path to Success

Session 30

Setting & Reaching Educational Goals

The purpose of this session is to encourage participants to set educational goals. Participants are encouraged to utilize prosocial, adaptive coping skills including focusing exercises, interpersonal skills, and positive self-talk to aid in the attainment of educational goals.

Gender Responsive Facilitation of this Session

Justice involved women seem to be at a disadvantage with respect to several factors. In general, these women tend to be undereducated, unskilled, and receive very low incomes placing them at high risk of experiencing poverty (Ney, Ramirez & Van Dietsen, 2012). Although these factors also characterize a high number of men involved with the criminal justice system, women tend to present with these attributes to an even greater extent (Covington, 1998). It is likely that concerns related to education and skill sets will be more prevalent in female participant groups. The START NOW facilitator's role will include supporting female participants in identifying realistic and attainable educational goals as well as aiding participants in determining the small strides leading to the success in reaching the larger goal.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Discuss Upcoming Termination of the Group (applicable to groups with closed admissions)

If your group has been using closed admissions, remind the participants that there are 2 more group meetings remaining.

Review Real Life Practice Exercise: "Problem Solving"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate ABC In-Session Practice Exercise

At this point, facilitate the ABC in-session practice exercise. This exercise may take up 20 minutes. If possible, prior to the start of the group, sketch a grid of the ABC system on the board. Ask the participants if anyone has brought in a situation that they would be willing to share with the group. It could be that they have brought in a written ABC example, or simply have one they are willing to share verbally. Write the example on the board as the participant describes it. Attempt to engage the entire group in offering supportive, constructive feedback to the participant. This is likely to be especially helpful when the participant is having trouble completing or understanding some part(s) of the ABC system.

Introduce “Setting & Reaching Educational Goals”

Present the two questions listed on this page, to be discussed as a group-

- How can education be helpful to a person?
- What has gotten in the way of getting an education?

The idea is to acknowledge possible ambivalence about setting and working toward educational goals. As with other topics, present both the advantages and difficulties of working toward positive change, without pressuring the participants to demonstrate motivation. Where appropriate, it may be helpful to acknowledge that a higher percentage of people who end up justice involved later in life experienced learning difficulties during the school years. Especially in the past, there was much less effective identification and intervention for individuals with learning disorders. Let them know that many people with learning differences are just as intelligent as others without this problem. Often, people who experienced learning difficulties as children are people who learn in different ways than schools traditionally used for teaching. For example, in the past, much of the instruction used verbal methods. This means that the teaching mostly depended on using words, written and spoken, for learning. Some people learn more through what they see and what they do. Many of those types of people ended up feeling stupid, and were sometimes treated that way, too. Empathize with how discouraging and frustrating this can be. Let them know that if any of them went through this, they may believe falsely that they cannot learn well. Present the points here as an idea to consider, not something that participants must agree with.

Review “Setting Educational Goals”

Review the points on this page, encouraging discussion of how they apply to the participants' lives. Then conduct the two group brainstorming exercises listed at the bottom of the page. Remember to emphasize that while brainstorming, ideas are not evaluated as good or bad ideas. Simply write on the board all of the ideas suggested by participants or facilitators. After each of the brainstorming activities, tell the group members that the only items that need to be eliminated are any that are not safe. For

this particular brainstorming activity, it is quite possible that none will need to be eliminated. Then encourage the participants to jot down in their workbooks any of the items of interest to them.

Consider where appropriate sharing or stimulating ideas about resources that can be helpful to support participant's educational/training goals (employment and job placement agencies, Goodwill Industries, community and technical colleges, public universities, GED programs, apprenticeship programs, certification training opportunities).

Review “Skills for Reaching Educational Goals”

Review the points on this page:

Use focusing skills to reach educational goals.

As you review this, ask the participants if they have ever tried some of these strategies, and if so, to describe that experience. Also, do a brief focusing exercise in which doing a cognitive task is the focus.

Use interpersonal skills to reach educational goals.

When discussing ways to increase your support system, encourage the participants to come up with examples of who might be supportive with educational goals, and how you can build those relationships (this latter area also refers back to the “Building Positive Relationships Skills” covered in unit 1). Then, when how to use assertive communication to reach educational goals, use a short role play demonstration to illustrate how to do this. Try to elicit a possible roleplay scenario from the group members, especially one that is an actual situation one of the participants is facing. Be prepared with an example to illustrate in case none is suggested. Here are some possibilities:

- Telling the teacher/instructor that you are having trouble completing an assignment and asking for help with that.
- A phone call in which you ask to have information sent to you about a training program.

Use Accepting Myself skills to reach educational goals.

When covering this topic, draw two columns on the board, one for negative self-talk, one for positive. Work with the group to come up with examples of negative self-talk people may say to themselves regarding their educational goals, as well as what positive self-talk they can replace it with.

Assign Real Life Practice Exercise: “Setting & Reaching Educational Goals”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to work on their own possibilities for education. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

The Future Me: Continuing My Path to Success

Session 31

Setting & Reaching Vocational Goals

The purpose of this session is to provide participants with a set of vocational skills necessary to acquire employment once released into the community. Participants are encouraged to consider their strengths and experiences, provided with suggestions on how to look for employment, and are given steps on how to make their first contact with a potential employer.

Gender Responsive Facilitation of this Session

As noted in Session 30: Setting & Reaching Educational Goals, female participants are often at a particular disadvantage in the area of vocational skills and experience. In general, these women tend to be undereducated and unskilled (Ney, Ramirez & Van Dieten, 2012). Although these factors also characterize a high number of men involved with the criminal justice system, women tend to present with these attributes to an even greater extent (Covington, 1998).

It is therefore likely that concerns and barriers related to vocational skills will be more prevalent in female participant groups. The START NOW facilitator's role will include supporting female offenders in identifying realistic and attainable vocational goals as well as aiding participants in determining the small strides leading to the attainment of the larger goal.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Discuss Upcoming Termination of the Group (applicable to groups with closed admissions)

If your group has been using closed admissions, remind the participants that there is 1 more group meeting remaining. Give the participants an opportunity to express their reactions to this information. Respond to the participants' various reactions with reflective comments. Tell them that between now and that final session, you'd like them to look through their workbooks and reflect on the work they've done during their participation in this group. Ask them to look particularly for any positive changes they've made during the time they've participated in START NOW, or positive steps they've taken. Tell them that these positive changes can be actual steps they've taken in their lives, like signing up for a class, starting to exercise, or improving a relationship. The

positive changes can also be within themselves, like developing their spirituality, or increasing their self-acceptance. Encourage them to make some notes as they do this review; point out that there's space on the bottom of the first page of the next session in their workbooks for such notes.

Review Real Life Practice Exercise: “Setting & Reaching Educational Goals”

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise. If participants have listed some interest in further education, encourage them that this may be something they can continue to work on in the upcoming weeks and months.

Facilitate Focusing In-Session Practice Exercise

At this point, facilitate a focusing in-session practice exercise. This exercise is likely to take 5 to 10 minutes to conduct and to process. The focusing exercise for Session 31 is “Small Words from Long-Words”, and it is a Cognitive-Verbal type of exercise. The facilitator directions for this exercise are shown in the focusing handout for this session, and the participant materials needed for this exercise are writing instruments and copies of the handout “Small Words from Long-Words”.

Introduce “Setting & Reaching Vocational Goals”

This session starts with group discussion designed to develop motivation to address vocational goals through eliciting change talk. Read the comments, and present each of the questions listed on this page of the participant workbook. Write down participants reactions on the board. Consider adding additional ideas to the discussion. Here are some relevant points for each question:

What benefits do you believe work can bring to your life?

- Feelings of self-confidence
- If paid work, earning money- can give you a greater sense of control
- Meeting people
- Feeling like you're contributing something
- Possibility of learning
- Respect of other people
- Staying busy, keeping your time structured, can reduce the risk of becoming involved in risky activities
- Working for a living may be a personal value you believe in

- **Note to Facilitators:** *When you present the following question (“What kinds of things have gotten in the way of getting a job or keeping a job?”), let the participants know that the question refers specifically to jobs that are legal. Let them know that you are aware that various participants may have also earned money through illegal activities, but that the question on this page is focused on regular/legal employment. Remember to roll with resistance. Don’t get drawn into a debate in which you pressure participants to give up illegal ways of earning money. Debating and pressuring generally results in participants **increasing** their resistance to consider other ways to earn money. Instead acknowledge and reflect the reasons some people are drawn to illegal sources of income. Here is an example:*

“You know you can make some quick money selling drugs, and it feels so easy to step right back into that, especially when you’re not sure that you can get a job.”

What kinds of things have gotten in the way of getting a job or keeping a job?

- Lack of:
 - Job openings
 - Job skills
 - Interest/motivation
 - Transportation
 - Jobs that pay more than minimum wage
- Lure of quick cash through illegal sources
- Pressure from gang or associates to do make money in illegal activities
- Don’t know how to fill out the application due to:
 - Limitations in writing/reading skills
 - Not sure what to do about having a limited or poor history
 - Worried about answering the questions about felony convictions
- Symptoms of substance use disorders or mental health problems have interfered with job performance

Tell them that today’s group will focus on how to use skills to address these barriers and increase their success.

Review “Things to Consider When Looking for Work”

Review and discuss the information on this page, which is generally self-explanatory. Consider asking the group members what they know about themselves that correspond to particular types of jobs.

Review “Finding Out About Job Openings”

As you review these points, encourage the participants to provide examples and ideas related to each item. Mention that there is space on the page where participants can

make notes of any ideas of interest to them (taking notes is optional). As you cover each point, encourage the group to think of how this would apply to jobs in the facility, and how it would apply to jobs in the community. Bring in copies of some help wanted ads from a newspaper and pass them around. Explain how the ads are organized. Also, it may be helpful to explain that certain types of ads tend to be a rip-off, ones that say things like “make big money at home stuffing envelopes- no experience necessary.”

Here are some tips regarding the item about contacting local employment services or the Labor Department. Tell the participants that there are often services that specialize in helping people find employment following release from correctional facilities. Try to locate specific information about what type of services are offered in your state. If so, encourage interested participants to write that information in their workbooks. Point out to the participants that working with such services can be particularly helpful when they have concerns that their legal history and/or a poor work history may negatively affect their chances for employment. Explain that these services often have relationships with employers that are open to giving such individuals a chance.

Review “Making your First Contact”

Review the points on the top of this workbook page, elaborating on each point as you do so. Encourage the participants to share comments and questions. Here are some ideas regarding discussing the various points:

- Be well groomed and dressed. *Discuss participants’ & facilitators’ ideas of what this means.*
- Ask for the Manager. *Discuss what to do if the manager is not in. Options include coming back another time or asking for an application anyway and attempting to speak with the manager another time.*
- Rehearse what you will say and ask for. *Tell them that the group will be practicing this in a few minutes.*
- Fill out the application as completely as possible. Sometimes you can take the application home, and then bring it back. Other times, you will be asked to fill it out there. Before you go, write down information you might need, like addresses, on a sheet of paper or a card, so that you can copy it onto the application. *Discuss the types of information that may be helpful to bring, including the following:*
 - *Addresses & phone numbers you may need, including that for:*
 - *Former employers*
 - *References (discuss what this means)*
 - *Sometimes even your own contact info, which you may not remember if you recently moved someplace new.*
 - *Your social security number- ideally, try to memorize this*
 - *Dates you may want to write on the application, e.g., dates of employment*
- Follow up with a phone call approximately three days later unless the Manager tells you something different about following up.
- Set goals about how many applications to submit in a certain period of time

Assign Real Life Practice Exercise: “Setting & Reaching Vocational Goals”

Briefly review the practice exercise, telling participants that the purpose of the exercise is to apply some of these vocational skills to their own lives. Ask whether anyone has questions about the exercise, and answer any questions presented. Ask them for a verbal commitment to do the exercise and to bring their responses to the next session.

The Future Me: Continuing My Path to Success

Session 32

Celebrating & Continuing My Progress

The purpose of this session is aid participants in recognizing their own progress and to equip them with skills necessary to continue this positive progression.

Gender Responsive Facilitation of this Session

This session can be considered gender-neutral. As the session depends on what the group members come up with, it can vary to a great extent not only between, but also within gender groups.

Welcome New Group Members (applicable to groups with rolling admissions)

Welcome any new group members. Ask the new participant(s) to briefly tell the group what they would like to get out of treatment and ensure that they are familiarized with the rest of the participants in the group. Briefly review the group rules with them. If the rules are posted in the room, point them out.

Discuss Termination of the Group (applicable to groups with closed admissions)

If your group has been using closed admissions, remind the participants that today is the final group session of START NOW. Give the participants an opportunity to express their reactions to this information. Respond to the participants' various reactions with reflective comments. Ask them for feedback about what they liked about the group, for their suggestions about how the group could have been better. Tell the group that much of today's session will focus on wrapping up the work that the group has done together.

Review Real Life Practice Exercise: "Setting & Reaching Vocational Goals"

Note that the first section of this manual fully describes the procedure for reviewing participants' responses to each of the real life practice exercise, using one of two possible methods: 1) through large group discussion; or 2) through individual review followed by large group discussion. Review each group member's response to this practice exercise, offering positive feedback for any attempts to constructively complete this exercise. Engage the participants in discussion of their reactions to this exercise.

Facilitate Focusing or ABC In-Session Practice Exercise

If your group is using closed admissions, you may choose to skip this section of the session, to allow more time for termination-related activities and discussion. If you're using rolling admissions, proceed with this section of the group as usual.

Facilitate the Focusing or ABC in-session practice exercise. The procedures for doing this are listed in Session 2 for Focusing and Session 4 for ABC. As described earlier, the Focusing practice is likely to take approximately 10 minutes, including time to process the exercise, while the ABC practice may require up to twenty minutes.

Introduce “Celebrating & Continuing My Progress”

Read, or have a volunteer read, the section on the top of this page. Tell the participants that the strategy described on this page is something that can be used at various times in one’s life. The idea is that, when trying to move ahead in one’s life, it is helpful to stop periodically and think about what you’ve accomplished. Tell them that it’s important to give yourself credit for any positive steps you’ve taken, even small steps in the direction of your ultimate goals. Point out that recognizing this progress is a way that participants can stay motivated, during and after their START NOW participation.

Now bring the participants’ attention to the In-Group Exercise at the bottom of the page. Read the following directions:

“Please take a few minutes to think about, and write down, some positive changes you’ve made during the time you’ve participated in START NOW, or positive steps you’ve taken. These positive changes can be actual steps you’ve taken in your life, like signing up for a class, starting to exercise, or improving a relationship. The positive changes can also be within yourself, like developing your spirituality, or increasing your self-acceptance. List any positive changes you have noticed. Don’t rule any out because they’re not big enough changes. Everything counts. If you’d like, you can look through your workbooks to remind yourself of the work you’ve done during this group. You can always continue this review after today’s group. Do you have any questions about this exercise? (Respond to questions.) Ok, take a few minutes to work on this. Let one of us (facilitators) know if you need help.”

Give the participants around 5 minutes to work on this individually, modifying the amount of time as needed. If you notice a group member who appears to be stuck, consider quietly asking if help is wanted. If so, it may be helpful to refer the participant back to one of the units or a specific session in which she or he appeared to be particularly successful. It is preferable that each participant has at least one positive change listed when discussion resumes.

First, ask the group members what it was like for them to focus on positive changes and steps. Respond with reflective comments. Then, give the group members a chance to share what they’ve come up with. It may be helpful to say something like,

“Now let’s give everyone a chance to tell the group what you’ve listed so far on this page. I know some of you may have worked on this during the past week,

and some may have just started working on this list. Either way, you can always add more to this list later. Just like with other topics we've covered, if there are items on your list that you'd prefer to keep private and not read to the group, that's ok."

The purpose of the former comment is to increase the comfort level of this exercise. Participants may feel vulnerable sharing ways they've changed for the better, since the flip side of that is a disclosure of ways they needed to improve. Also, some participants may have shorter lists of positive changes, for various reasons:

- they may not have made as much progress as others
- they may have cognitive or writing problems that make it harder for them to think of and list such changes
- they may need have self-esteem problems that make it hard for them to identify the positive in themselves

Given these factors, try to find a balance between recognizing and praising participants for all of the positive changes they do list, without making it appear as though the participants with the longest lists are the best.

After each participant has read the list, provide feedback and invite participants to give each other feedback. Use a strengths-oriented focus here. Focus on what the participant has done well. If participants start to question a positive change a person has listed, do not let it become a debate, saying something like,

*"What we're doing now is focusing on each person's own opinion of the changes they've made. This won't always be the exact same as other people's opinions of how they've changed or haven't changed. I'm going to ask the group to put the focus on positive changes you've seen in yourselves and others. Obviously, since none of us is perfect, we always have ways we could and **can** make more positive changes."*

Discuss Participants' Experience of START NOW (applicable to groups with closed admissions)

Tell the participants that you'd like to give them an opportunity to give you feedback about how participating in the START NOW skills training group has been for them. Take notes of their comments, as this feedback is likely to give you helpful ideas for your continuing work. Also, you are welcome to send feedback and comments to the developers of this skills training program (see the contact information at the beginning of this manual), which will be useful for our continuing work. Invite the participants to respond to a variety of open-ended questions, including the following possibilities:

- What did you like about participating in START NOW?
- What did you dislike about participating in START NOW?

- If you could change things about how START NOW, what would they be?
- What things about START NOW were especially helpful to you?
- Please give us feedback about how we were as facilitators. What about how we lead the group was especially helpful? What would you suggest we do differently?
- What about the participant workbook? What did you like about it? What would you wish to see changed?

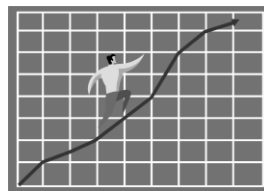
In keeping with the recommended style for START NOW, respond to the participants' comments in an open, accepting manner, including reflective comments and summarizations.

Then give the participants feedback about your experience of facilitating the group, again with a strengths-oriented perspective. In other words, mostly talk about the positive aspects of this work. At the same time, acknowledge some obvious stresses about the experience you have all just shared. If you are going to miss the group, it is ok to say that (although don't say it if it isn't true).

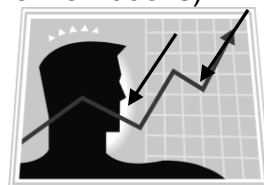
Review "Skills for Continuing My Progress"

Review, through reading and discussing, each of the skills on this page. Here are some tips for discussing these.

- **Accept the Twisting Path of Positive Change.**
Consider drawing lines on the board that illustrate the points here. Tell the participants that a lot of times people think that when they start to make positive changes, that as long as they keep trying, it will be a mostly smooth upward path like this (draw this)-



Tell them that, even when a person is trying hard, the path of positive change usually has some ups and downs like this (draw a line that goes up and down, with an uneven pattern, but which overall heads upward like the one shown here and in the workbooks)-

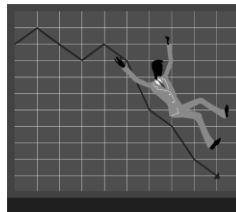


If you keep working on yourself, you can see that over time, things get better (show them on the board that the line keeps going up in the long run). Tell them that the problem is that when people experience a setback and hit a downturn (point out on the board to the sections of the line shown by the arrows above), a lot of times they think they have lost all the positive work they've done. Tell them that they haven't lost their progress, as long as they keep trying.

If you think the group might find it helpful, you can contrast the above pattern with the following patterns. You can note that the twisting upward path of positive change (shown above) happens when people are actively working on themselves and practicing skills. The upward direction is **because** of that positive effort. When a person is not actively trying to change for the better, they still go through ups and downs, but the overall direction of progress over time doesn't tend to go up. Instead it tends to stay mostly the same, like this (you can draw a line like this)-



Sometimes it even tends to go down over time. This is especially true if something like addiction is in the picture. That's because addictions, whether to drugs, drinking, gambling, etc., tend to worsen over time without treatment.



If you decide to cover all of the points here, be careful not to deliver them as a preachy warning. Roll with any resistance from participants. For example, participants may tell you about someone whose life changed for the better without any effort. Tell them that the patterns you've been showing them are what generally tend to happen, but there are always exceptions. The main point is that you hope they will keep working on the progress that many or all of them have made in START NOW, and not get so discouraged by any setbacks they experience that they give up.

- **Be a Positive Coach to Yourself.**

Encourage the group members to generate examples of positive self-talk they can use to be a positive coach to themselves. Write these on the board.

- **Review your START NOW Materials.**

Together with the participants, think of examples of life situations in which it may be useful to review certain START NOW topics.

- **Stick with the Winners.**

Point out that “stick with the winners” involves a combination of skills from Unit 3- My Relationships: Building Positive Relationships, especially:

- Beginning Positive Relationships
- Increasing My Support System
- Recognizing & Avoiding Negative Relationships

Discuss participants’ ideas about how sticking with the winners may apply in their lives. (Many facilitators may already know, or find it interesting to know, that this phrase, “stick with the winners” is a phrase popular in 12 Step fellowship meetings, like AA.)

- **Build new supports as your life changes.**

Help the participants think of what are some life changes that may require a person to build new supports. Note that these can include both positive and negative life changes. Here are some examples:

- Being released from the facility
- Divorce or break-up
- Leaving or losing a job
- Getting a new job
- Having a baby
- Moving out of transitional facility or group home
- Moving to a new geographic area

- **Recognize that many people feel anxious about positive changes.**

This is often a novel concept for participants. A lot of people, offenders or not, have the misconception that positive change is quite an enjoyable process. The reality is that most of us find positive change to be stressful and scary. We usually enjoy the **results** of making positive changes in ourselves, but we’re usually not too thrilled with the process of making these changes. It is likely to be helpful for participants to know that any anxiety or stress they feel about changing is normal and to be expected. They can use the skills from the Coping with Worry & Anxiety session (in Unit 2) to cope with this anxiety.

Assign Real Life Practice Exercise: “Continuing My Progress”

Read the directions for this real life practice exercise. Explain that exercises like this can help participants stay motivated for positive change. Encourage the participants to write their first names on the blank line. Give them an example of what a person can write there, like the following-

“Dear Ron,

You’ve worked hard in START NOW. You’ve started to believe in yourself. You have a lot more control over your temper. You got a new job here, and you’re doing well at it. Keep up the good work. Keep trying to get better relationships with your family. Give it time and be patient.”

Ask whether anyone has questions about the exercise, and answer any questions presented.

If this is your group’s final session, and if time allows, give the participants some time to work on this exercise during this final session. If there is not sufficient time, encourage them to fill this in soon, while the ideas from today’s session are still fresh in their minds.

If your group is ongoing, ask the participants for a verbal commitment to do the exercise and to bring their responses to the next session.

Distribute the Participant Satisfaction Questionnaires

Allow participants several minutes to complete the satisfaction questionnaires, providing their feedback about the unit which they have just finished. The purpose of these questionnaires is to obtain potentially useful feedback to improve START NOW and its provision. The feedback is not to be used for performance evaluation of facilitators. Collect the completed questionnaires and forward them to the designated team member at your facility.

Determine Participants’ Eligibility to Earn Certificates of Completion for this Unit

Excess unexcused absences disqualify participants from receiving a certificate. Inmates are eligible to earn a certificate upon completion of each unit provided they have had no more than one unexcused absence during this unit.

Some participants may have accrued several excused absences during a particular unit due to factors outside of their control like court dates, legal visits, or valid medical absences. When circumstances permit, arrangements may be made for participants to catch up on missed materials through a briefer individual review and doing some reading and practice exercises on one’s own. In the case of several excused absences during a unit, facilitators should make a clinical decision about whether the participant is eligible for a certificate (i.e., if that participant has shown a concerted effort to learn and practice the skill covered within that unit). Other participants may be asked to repeat a

particular unit with another group. Copies of the certificates for each unit are shown in Appendix 8, and electronic versions of these forms are available.

Award the certificates in the spirit of celebration of accomplishment, with possible applause, speeches, congratulations, etc.

Congratulations, facilitators, on completing this START NOW skills training group.

References

- Anstiss, B., Polaschek, D.L.L., Wilson, M.J. (2011). A brief motivational interviewing intervention with prisoners: When you lead a horse to water, can it drink for itself? Psychology, Crime & Law, 17(8), 689-710.
- Baer, J.S., Kivlahan, D.R., & Donovan, D.M. (1999). Integrating skills training and motivational therapies: Implications for the treatment of substance dependence. Journal of Substance Abuse Treatment, 17, 15-23.
- Babor, T.F., Carroll, K., Christiansen, K., Donaldson, J., Herrell, J., Kadden, R., Litt, M., McRee, B., Miller, M., Roffman, R., Solowji, N., Steinberg, K., Stephens, R., & Vendetti, J. (2004). Brief treatments for cannabis dependence: Findings from a randomized multisite trial. Journal of Consulting & Clinical Psychology, 72(3), 455-466.
- Buss, A. & Durkee, A. (1957). An inventory for assessing different kinds of hostility. Journal of Consulting Psychology, 21, 343-349.
- Buss A.H, & Perry M. (1992). The aggression questionnaire. Journal of Personality & Social Psychology, 63(3), 452–459.
- Chambers, J.C., Eccleston, L., Day, A., Ward, T., Howells, K. (2008). Treatment readiness in violent offenders: The influence of cognitive factors on engagement in violence programs. Aggression and Violent Behavior, 13: 276–284.
- Cislo, A., Trestman R.L. Psychiatric hospitalization after participation in START NOW. Letters to the Editor. Psychiatric Services 2016; 67:143; doi: 10.1176/appi.ps.201500456. Published online January 4, 2016.
- Clark, M. D., Walters, S., Gingerich, R., & Meltzer, M. (2006). Motivational interviewing for probation officers: Tipping the balance towards change. Federal Probation, 70, 38-44.
- Copeland, J., Swift, W., Roffman, R., & Stephens, R. (2001). A randomized controlled trial of brief cognitive-behavioral interventions for cannabis use disorder. Journal of Substance Abuse Treatment, 21, 55-64.
- Davis, T.M., Baer, J.S., Saxon, A.J., Kivlahan, D.R. (2003). Brief motivational feedback improves post-incarceration treatment contact among veterans with substance use disorders. Drug and Alcohol Dependence, 69:197–203.
- Dennis, M.L., Godley, S.H., Diamond, G.S., Tims, F.M., Babor, T., Donaldson, J., Liddle, H., Titus, J.C., Kaminer, Y., Webb, C., Hamilton, N., Funk, R.R. (2004). The Cannabis Youth Treatment (CYT) study: Main findings from two randomized

- trials. Journal of Substance Abuse Treatment, 27, 197-213.
- Diamond, G., Godley, S.H., Liddle, H.A., Sampl, S., Webb, C., Tims, F.M., Meyers, R. (2002). Five outpatient treatment models for adolescent marijuana use: a description of the Cannabis Youth Treatment interventions. Addiction, 97(1), 70-83.
- Di Fazio, R., Abracen, J., & Looman, J. (2001). Group versus individual treatment of sex offenders: A comparison. Forum on Corrections Research, 13, 56-59.
- Dunn, C., DeRoo, L., & Rivara, F.P. (2001). The use of brief interventions adapted from motivational interviewing across behavioral domains: a systematic review. Addiction, 96(12), 1725-1742.
- Fagin, L. (1985). Deinstitutionalization in the USA. Psychiatric Bulletin, 9, 112-114.
- Fishbein D, Sheppard M, Hyde C, Hubal R, Newlin D, et al. (2009). Deficits in behavioral inhibition predict treatment engagement in prison inmates. Law and Human Behavior, 33(5), 419-35. Epub 2009 Jan 13.
- Ford, J. D., & Cruz-St. Juste, M. (2006a). Trauma Affect Regulation: Guide for Education and Therapy (TARGET-A/G-4): 4-Session Experiential trauma-focused psychoeducational group therapy for adolescents. Farmington, CT: University of Connecticut Health Center (www.ptsdfreedom.org <<http://www.ptsdfreedom.org>>)
- Ford, J. D., & Cruz-St. Juste, M. (2006b). Trauma Affect Regulation: Guide for Education and Therapy (TARGET-A/G-10 Version 2.1): 10-Session Experiential trauma-focused psychoeducational group therapy for adolescents. Farmington, CT: University of Connecticut Health Center (www.ptsdfreedom.org <<http://www.ptsdfreedom.org>>)
- Harper, R., & Hardy, S. (2000). An evaluation of motivational interviewing as a method of intervention with clients in a probation setting. British Journal of Social Work, 30, 393-400.
- Holbrook, M.I. (1997). Anger management training in prison inmates. Psychological Reports, 81(2), 623-626.
- Horowitz, L. M., Rosenberg, S. E., Baer, B. A., Ureño, G., & Villaseñor, V. S. (1988). Inventory of interpersonal problems: psychometric properties and clinical applications. Journal of consulting and clinical psychology, 56(6), 885.

- Howells, K., & Day, A. (2006). Affective determinations of treatment engagement in violent offenders. International Journal of Offender Therapy & Comparative Criminology, 50, 174-186.
- Kersten, L., Cislo, A. M., Lynch, M., Shea, K., & Trestman, R. L. (2016). Evaluating START NOW: A Skills-Based Psychotherapy for Inmates of Correctional Systems. Psychiatric Services 67(1), 37-42.
- Linehan, M.M. (1993). Cognitive-Behavioral Treatment of Borderline Personality Disorder. New York: Guilford Press.
- Linehan, M.M., Armstrong, H.E., Suarez, A., Allmon, D., & Heard, H.L. (1991). Cognitive-behavioral treatment of chronically parasuicidal borderline patients. Archives of General Psychiatry, 48, 1060-1064.
- Linehan, M.M., Tutek, D.A., Heard, H.L., & Armstrong, H.E. (1994). Interpersonal outcome of cognitive behavioral treatment for chronically suicidal borderline patients. American Journal of Psychiatry, 151, 1771.
- Ling, W., Farabee, D., Liepa, D., & Wu, L. T. (2012). The Treatment Effectiveness Assessment (TEA): an efficient, patient-centered instrument for evaluating progress in recovery from addiction. Substance abuse and rehabilitation, 3, 129.
- McCann, R.A., Ball, E.M., & Ivanoff, A. (2000). DBT with an inpatient forensic population: The CMHIP forensic model. Cognitive and Behavioral Practice, 7(4), 447-456.
- McMurrin, M. (2009). Motivational interviewing with offenders: A systematic review. Legal and Criminological Psychology, 14, 83-100.
- Miller, A.L., & Rathus, J.H. (2000). Introduction to special section on Dialectical Behavior Therapy. Cognitive and Behavioral Practice, 7, 420-425.
- Miller, W.R., & Rollnick, S. (2002). Motivational interviewing: Preparing people to change addictive behavior (2nd ed.). New York: Guilford Press.
- Monti, P.M., Kadden, R.M., Rohsenow, D.J., Cooney, N.L., & Abrams, D.B., (2002). Treating alcohol dependence: A coping skills training guide (2nd ed.). New York: Guilford Press.
- Morgan, R.D., Winterowd, C.L., & Ferrell, S.W. (1999). A national survey of group psychotherapy services in correctional facilities. Professional Psychology: Research and Practice, 6, 600-606.
- Morgenstern, J., Morgan, T.J., McCrady, B.S., Keller, D.S., & Carroll, K.M. (2001).

Manual-guided cognitive-behavioral therapy training: A promising method for disseminating empirically supported substance abuse treatments to the practice community. Psychology of Addictive Behaviors, 15(2), 83-88.

Patel, P. (2011). Downsizing Prisons. CQ Researcher, 21(10), 217-240.

Pavone, S.A. (2002). Sobriety management: Healthy living in recovery, retention in treatment and outcome study. Dissertation Abstracts International, 62(11-B), 5029.

Pearson, F.S., Lipton, D.S., Cleland, C. M. & Yee, D.S. (2002). The effects of behavioral/cognitive-behavioral programs on recidivism. Crime and Delinquency, 48(3), 476-496.

Powell, D.J., & Brodsky, A. (2004). Clinical supervision in alcohol and drug abuse counseling: Principles, models, methods. San Francisco: Jossey-Bass.

Ross, R.R., & E.A. Fabiano. (1985). Time to think: A cognitive model of delinquency prevention and offender rehabilitation. Johnson City, TN: Institute of Social Sciences and Arts, Inc.

Sampl, S., & Kadden, R. (2001). Motivational Enhancement Therapy and Cognitive Behavioral Therapy for Adolescent Cannabis Users: 5 Sessions, (DHHS Publication No. (SMA) 01-3486, Cannabis Youth Treatment (CYT) Series, Volume 1). Center for Substance Abuse Treatment (CSAT), Rockville, MD.

Saunders, B., Wilkinson, C. and Phillips, M. (1995). The impact of a brief motivational intervention with opiate users attending a methadone programme. Addiction, 90, 415-424.

Sellman, J.D., Sullivan, P.F., Dore, G.M., Adamson, S.J., MacEwan, I. (2001). A randomized controlled trial of motivational enhancement therapy (MET) for mild to moderate alcohol dependence. Journal of Studies on Alcohol, 62(3), 389-396.

Stanford, M. S., Mathias, C. W., Dougherty, D. M., Lake, S. L., Anderson, N. E., & Patton, J. H. (2009). Fifty years of the Barratt Impulsiveness Scale: An update and review. Personality and individual differences, 47(5), 385-395.

Stein, L. A. R., Colby, S. M., Barnett, N. P., Monti, P. M., Golembeske, C., & Lebeau-Craven, R. (2006b). Effects of motivational interviewing for incarcerated adolescents on driving under the influence after release. American Journal on Addictions, 15(Suppl. 1), 50-57.

Steinberg, K.L., Roffman, R.A., Carroll, K.M., McRee, B., Babor, T.F., Miller, M.,

- Kadden, R., Duresky, D., & Stephens, R. (2005). Brief Counseling for Marijuana Dependence: A Manual for Treating Adults, (DHHS Publication No. (SMA) 05-4022. Center for Substance Abuse Treatment (CSAT), Rockville, MD.
- Thigpen, M. (2007). Foreword. In H. Milkman, K. Wanberg, Cognitive-Behavioral Treatment: A Review and Discussion for Corrections Professionals (p. vii). Washington DC: US Department of Justice. National Institute of Corrections.
- Torrey, E.F. (2010). Mental Illness Policy Org. Unbiased Information for Policymakers and Media. More Mentally Ill Persons Are in Jails and Prisons Than Hospitals: A Survey of the States. Retrieved April 25, 2012, from <http://mentalillnesspolicy.org/NGRI/jails-vs-hospitals.html>.
- Trestman RL, Appelbaum KL, Metzner J. (Eds). The Oxford Textbook of Correctional Psychiatry, Oxford University Press, May 2015.
- Trestman RL, Ford JD, Zhang W, Hogan V. Current and Lifetime Psychiatric Illness among Inmates not Identified as Acutely Mentally Ill at Intake in Connecticut's Jails. *Journal of The American Academy of Psychiatry and the Law*, 35:490-500, 2007.
- Valliant, P.M., & Anonowicz, D.H. (1991). Cognitive behaviour therapy and social skills training improves personality and cognition in incarcerated offenders. Psychological Reports, 68(1), 27-33.
- Voluse, A. C., Gioia, C. J., Sobell, L. C., Dum, M., Sobell, M. B., & Simco, E. R. (2012). Psychometric properties of the Drug Use Disorders Identification Test (DUDIT) with substance abusers in outpatient and residential treatment. *Addictive behaviors*, 37(1), 36-41.
- Webb, C., Scudder, M., Kaminer, Y. & Kadden, R. (2002). The Motivational Enhancement Therapy and Cognitive Behavioral Therapy Supplement: 7 Sessions of Cognitive Behavioral Therapy for Adolescent Cannabis Users, (DHHS Publication No. (SMA) 02-3659, Cannabis Youth Treatment (CYT) Series, Volume 2). Center for Substance Abuse Treatment (CSAT), Rockville, MD.
- Williams, W.H., Mewse, A.J., Tonks, J., Mills, S., Burgess, C.N.W., & Cordan, G. (2010) Traumatic brain injury in a prison population: Prevalence and risk for reoffending. Brain Injury, 24(10), 1184-1188.
- Wilson, D.L. Bouffard, & MacKenzie, D. (2005). A quantitative review of structured, group-oriented, cognitive-behavioral programs for offenders. Criminal Justice and Behavior, 32(2), 172-204.
- Wilson, G.L. (1990). Psychotherapy with depressed incarcerated felons: A comparative



evaluation of treatments. Psychological Reports, 67(3 Pt 1), 1027-1041.

Zlotnick, C., Najavits, L.M., Rohsenow, D.J., & Johnson, D.M. (2003). A cognitive-behavioral treatment for incarcerated women with substance abuse disorder and posttraumatic stress disorder: findings from a pilot study. Journal of Substance Abuse Treatment, 25(2), 99-105.

Appendix 1

Break It Down, Using the ABC System

BREAK IT DOWN, USING THE **ABC** SYSTEM

A CTIVATORS		B EHAVIOR	C ONSEQUENCES	
<i>What triggered me?</i>		<i>What did I do?</i>	<i>What happened?</i>	
<i>Activators around me</i> <i>What? Where?</i> <i>When?</i>	<i>Activators inside me</i> <i>Thoughts?</i> <i>Feelings?</i>		<i>Positive Consequences</i>	<i>Negative Consequences</i>
				



For **B**ehaviors above that did not work out well for you, fill in the boxes to the right, showing what you can do instead, when faced with similar **A**ctivators. →

B EHAVIOR	C ONSEQUENCES	
<i>What I can do instead-</i>	<i>What are the likely consequences?</i>	
	<i>Positive Consequences</i>	<i>Negative Consequences</i>

Appendix 2

Information & Instructions for Printing

Information & Instructions for Printing

Here is information about printing and binding START NOW materials, for those who have obtained these documents electronically.

- **Binding. In institutional settings,** the workbooks should be bound using a thermal binding process (the type of binding that appears like flexible tape around the left edge of a document). The idea is to use binding methods which do not include materials which could be used to harm oneself or others.
- **Printing each unit separately.** It is recommended that each unit be printed and bound separately, for a number of reasons. Some printers providing thermal binding can only accommodate documents up to a certain length. Also, there may be some spoilage incurred due to acting out behaviors when participants use these workbooks during group sessions. It is less expensive to replace a smaller workbook vs. a larger one. Also, having a pool of workbooks for each unit will facilitate providing simultaneous sessions focused on different units, without doubling the number of participant workbooks needed.
- **Color vs. Greyscale Printing.** The electronic files of the START NOW participant workbook include various colored images. Printing these files using color ink is optional; an alternative is to print them using the “greyscale” setting. Advantages and disadvantages of color vs. greyscale printing may be readily anticipated: color printing is more expensive however color images are more likely to capture participants’ attention. The images were chosen to retain meaning, however, when printed without using color ink.

Appendix 3

START NOW Session Components

START NOW Session Components

START NOW Session Components	Description	Anticipated Duration
Welcoming New Members <i>(only applicable for rolling admissions)</i>	-Introduce new members (if any) to the rest of the group -briefly review their goal(s) -review group rules	5 minutes or less
Primary Skill Practice & Reinforcement: Focusing or ABC	-Practice & reinforce primary skills: -Focusing- lead a brief Focusing practice exercise, then discuss reactions -ABC- review participants' ABC responses on the whiteboard (1-2 examples per week, as time permits)	10 – 20 minutes <i>(Focusing practice is generally briefer than ABC practice)</i>
Review of Previously Assigned Practice Exercise	-Facilitators circulate around the room & briefly review participants' responses to the practice exercise -Group discussion of reactions to the exercise	15 – 20 minutes
Introduction & Rationale for Skills Topic	-Brief guided discussion designed to present the rationale for learning the new skill <i>(generally focuses on the first page of the session in the participant workbook)</i>	10 minutes
In-session Discussion Topic or Group Exercise	-Structured discussion &/or exercise to teach the new skill & further develop motivation for change <i>(covers several pages in the participant manual- those between the first & last page of that session)</i>	20 - 25 minutes
Assigning New Practice Exercise	-Review the instructions for the between-sessions practice exercise <i>(focuses on the last page of the session in the participant workbook)</i>	5 minutes

Appendix 4

Certification of Facilitators

Includes:

- **Log for Tracking Certification of Facilitators**
- **START NOW Knowledge Test for Facilitators and Supervisors-
*available in a separate file, for trainers***
- **Facilitator Survey- *available in a separate file, for trainers***
- **Certificate for START NOW Facilitators- *available in a separate file, for trainers***

Log for Tracking Certification of START NOW Facilitators

Name of Trainee: _____

Name of Supervisor (or Trainer, if Trainee is a Supervisor): _____

Agency/Facility Sponsoring Training: _____

Requirements	Date Completed	Supervisor Initials
START NOW reading materials (facilitator manual & participant workbook) given to trainee.		
Read (as per self-report), & demonstrated understanding of (as evidenced by informal discussion) the START NOW facilitator manual & participant workbooks.		
Attended the START NOW training. Or if a new hire, viewed a video recording of the initial START NOW training, & did associated practice exercises with a colleague or supervisor on site.		
Passed the START NOW written test with a score of 75% or higher.		
Co-facilitated a role-played practice group in which all supervisor ratings were above 1, & no more than two ratings were 2's.		
Co-facilitated two consecutive START NOW groups in the correctional facility in which all ratings were 3 or higher (Supervisors need not complete this requirement; only applies to facilitators).		
Certificate of completion awarded.		

Appendix 5

Quality Assurance Forms

1. QA form for Session 1, Facilitator Version
2. QA form for Session 1, Supervisor Version
(complete set of QA forms available separately)

Example of QA Form, Facilitator Version

Quality Assurance Form: START NOW Session 1: Understanding START NOW Skills Training

Date: _____ Facilitator ID's: _____ Facility: _____ Group ID: _____

Contents	Done?	Comments
C1. Reviewed intro <i>(including reasons & ways people resist change)</i>	none some fully	
C2. Reviewed "The START NOW Approach" <i>(including asking participants to choose statements)</i>	none some fully	
C3. Reviewed "The 4 START NOW Skills Units"	none some fully	
C4. Reviewed the "Welcome . . ." page & asked for commitment to comply with expectations	none some fully	
C5. Assigned the real life practice exercise <i>(includes reviewing instructions, answering questions, & asking for commitment)</i>	none some fully	
Process	Done?	Comments
P1. Attempted to maintain the structure of group session, setting limits as needed	none some fully	
P2. Verbally reinforced & affirmed efforts toward positive change	none some fully	
P3. Demonstrated acceptance & empathy	none some fully	
P4. Attempted to involve all participants	none some fully	
P5. Rolled with resistance	none some fully	
P6. Emphasized practicing skills in real life	none some fully	
P7. Attempted to elicit change talk	none some fully	
Overall Comments:		

Example of QA Form, Supervisor-Observer Version

Quality Assurance Form: START NOW Session 1: Understanding START NOW Skills Training			
Date: _____	Facilitator ID's: _____	Facility: _____	Group ID: _____
Ratings: 0=Not Covered; 1=Very ineffective; 2=Ineffective; 3= Acceptable; 4=Effective; 5=Very Effective			
Contents	Done?	Ratings	Comments
C6. Reviewed intro <i>(including reasons & ways people resist change)</i>	none some fully	0 1 2 3 4 5	
C7. Reviewed "The START NOW Approach" <i>(including asking participants to choose statements)</i>	none some fully	0 1 2 3 4 5	
C8. Reviewed "The 4 START NOW Skills Units"	none some fully	0 1 2 3 4 5	
C9. Reviewed the "Welcome . . ." page & asked for commitment to comply with expectations	none some fully	0 1 2 3 4 5	
C10. Assigned a new real life practice exercise <i>(includes reviewing instructions, answering questions, & asking for commitment)</i>	none some fully	0 1 2 3 4 5	
Process	Done?	Ratings	Comments
P8. Attempted to maintain the structure of group session, setting limits as needed	none some fully	0 1 2 3 4 5	
P9. Verbally reinforced & affirmed efforts toward positive change	none some fully	0 1 2 3 4 5	
P10. Demonstrated acceptance & empathy	none some fully	0 1 2 3 4 5	
P11. Attempted to involve all participants	none some fully	0 1 2 3 4 5	
P12. Rolled with resistance	none some fully	0 1 2 3 4 5	
P13. Emphasized practicing skills in real life	none some fully	0 1 2 3 4 5	
P14. Attempted to elicit change talk	none some fully	0 1 2 3 4 5	
Overall Comments: 			

Rater: _____

Appendix 6

Focusing Exercises

Focusing Exercises

Overall Instructions for Planning Weekly Focusing Exercises:

1. When planning focusing exercises, keep in mind the security restrictions of the correctional facility. Some of the possible focusing exercises listed below require various items. Some of these exercises may not be suitable for facilities at all levels of security. Refer to the policies of your facility. When in doubt about whether a particular item would be ok to bring into group, do not bring it without checking with administration. Of course objects that have the potential to be used as or made into weapons are to be avoided. Another type of item that may be prohibited or restricted is food; adhere to your facilities' policy about food.
2. If and when you do bring in objects to be used for focusing exercises, you must be sure to get all items back from the participants (unless, of course, it was a food item consumed during the exercise). Collect the items as soon as you complete the exercise and count them twice. If any are missing, the group cannot proceed nor leave the room until the missing items are accounted for. Tell the participants about this policy ahead of time, to reduce the likelihood of a problem.
3. There are 4 categories of focusing exercises:

Category S: Sensory
Category C: Cognitive
Category M: Motor
Category B: Breathing & Imagery

The category name refers to the main area of focusing skills required. In fact, most or all of the activities in any one category utilize processes from the other categories.

Vary the type of exercise presented. Since there are four types of focusing exercises and approximately four weeks per month, you should aim to conduct each type of focusing exercise once per month. Thus, in a 16 week series of START NOW skills training, you will have the opportunity to present 4 focusing exercises from each of the 4 categories listed. Various suggestions for focusing exercises in each of these categories are listed below. You need not limit your group to the possibilities listed. You can conduct similar focusing exercises that you develop or learn, and that have similar characteristics to the ones listed here.

Appendix 5 provides 2 different versions of tracking sheets that you may use to keep track of the focusing practice exercises you have presented.

4. When presenting non-visual focusing exercises like breathing exercises or listening to music, some participants may find closing their eyes helpful. Do not require closing one's eyes though as this may trigger anxiety or paranoia; make this optional. Tell the

participants that some people prefer to do these exercises with their eyes closed, and others prefer to choose a focus point, which is usually best somewhere low in the room, like a spot on the floor, etc. It may be helpful to indicate that if they use a focus point, it shouldn't be on someone else (for example, on their shoes), since that would be likely to make that person uncomfortable.

5. Where appropriate, one co-facilitator takes the primary responsibility for leading the exercise, including presenting instructions, visually monitoring the group's participation, starting and ending the exercise, and tracking the time. The other group facilitator participates in the focusing exercise at the same time as the participants, utilizing a focus point rather than closed eyes. This allows the facilitators to get some additional information about what worked, and did not work, regarding the exercise. Of course, at times of heightened security concerns, both facilitators monitor the group visually.

Tips for Conducting the Weekly Focusing Exercise:

1. Keep your instructions as clear and simple as possible.
2. Tell the group how long the exercise is expected to take.
3. Give participants instructions about what to do when they lose focus. For example, say,

“When you notice that your focus has drifted, simply turn your focus back to _____ (name the task of today’s exercise, like “counting your breaths” or “looking at this picture”). Each time you notice that your focus has wandered, simply return to today’s task.”
4. Ask whether anyone has questions before starting and answer those.
5. Give participants a clear signal when the exercise is to start. For example, say, “ok, begin”, and when it is over, e.g., by saying “ok, done.”
6. After the exercise, invite the participants to describe their reactions to it, saying something like this-

“How was this exercise for you? What did you notice about your ability to focus while you did this?”

The idea here is to have the discussion primarily center on the participants' observations of their focusing skills. Especially when discussing participants' reactions to cognitive focusing exercises, tell them that you don't want them to get into what the answer to the puzzle was, or how many solutions they were able to generate. Doing so distracts from the purpose of the exercise and is likely to unnecessarily stigmatize those with cognitive limitations.

Many groups fall into a pattern of “going around the room”, with each member sharing their reaction in turn. This often works out well. However, if someone wishes to “pass”, just move on to the next person. It is rarely, if ever, productive to insist on a response. Rolling with resistance generally results in improved participation in the long run. In

general, the facilitator who tried out the focusing exercise also describes his/her reaction to the exercise.

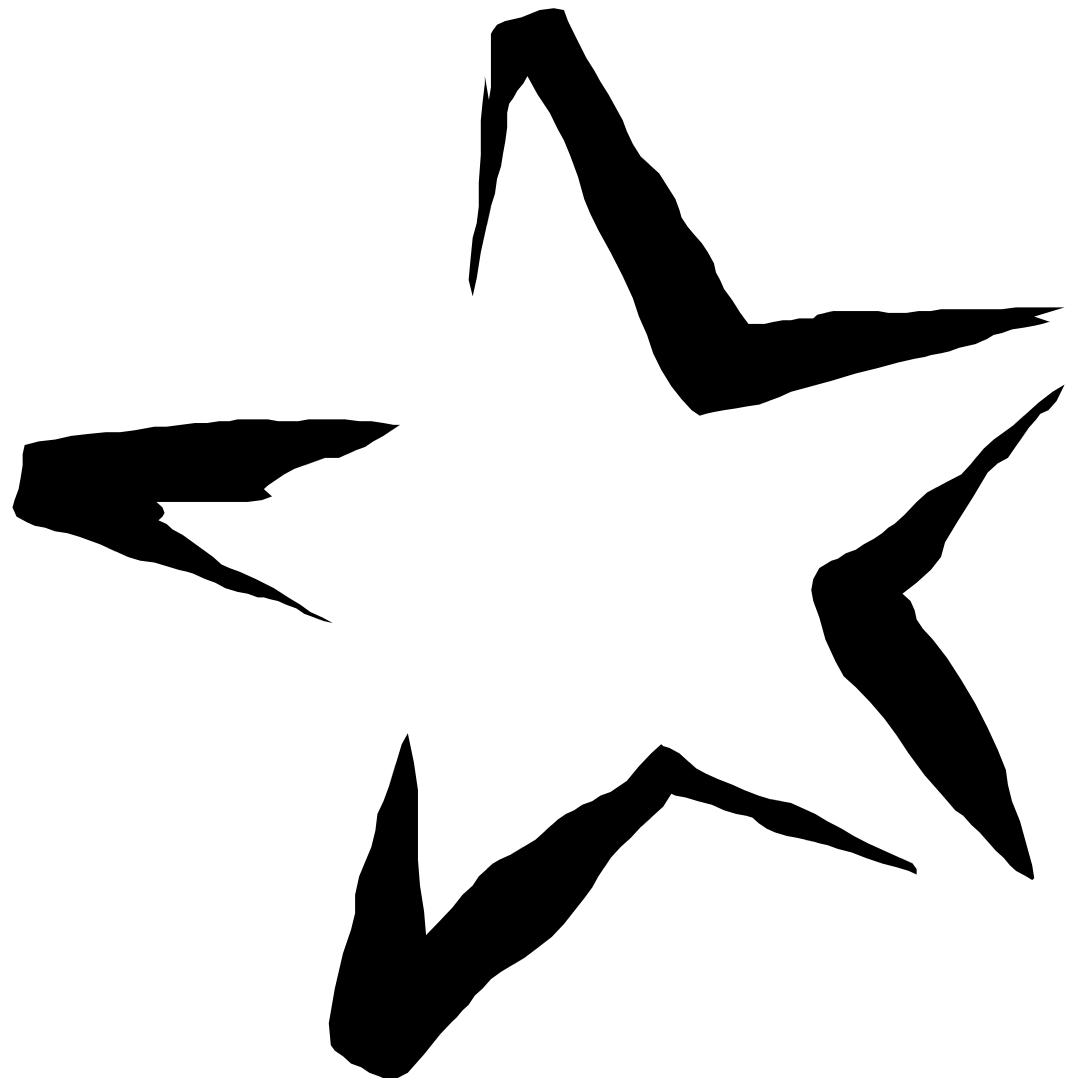
Appendix 7

START NOW Certificates of Completion

Certificate of Achievement

This Certificate is Presented to:

*For completion of the
START NOW Unit 1:
My Foundation*



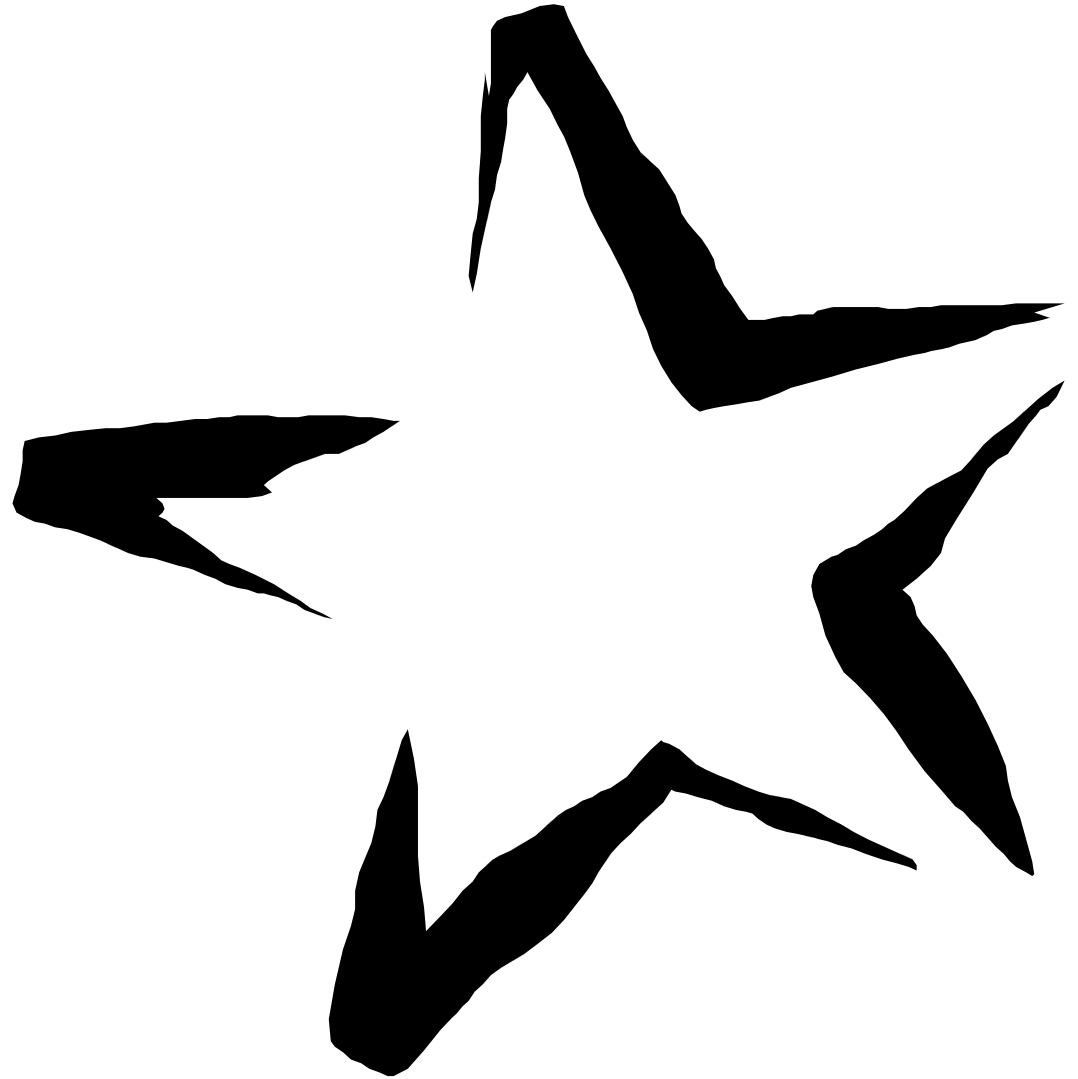
Signature

Date

Certificate of Achievement

This Certificate is Presented to:

*For completion of the
START NOW Unit 2:
My Emotions*



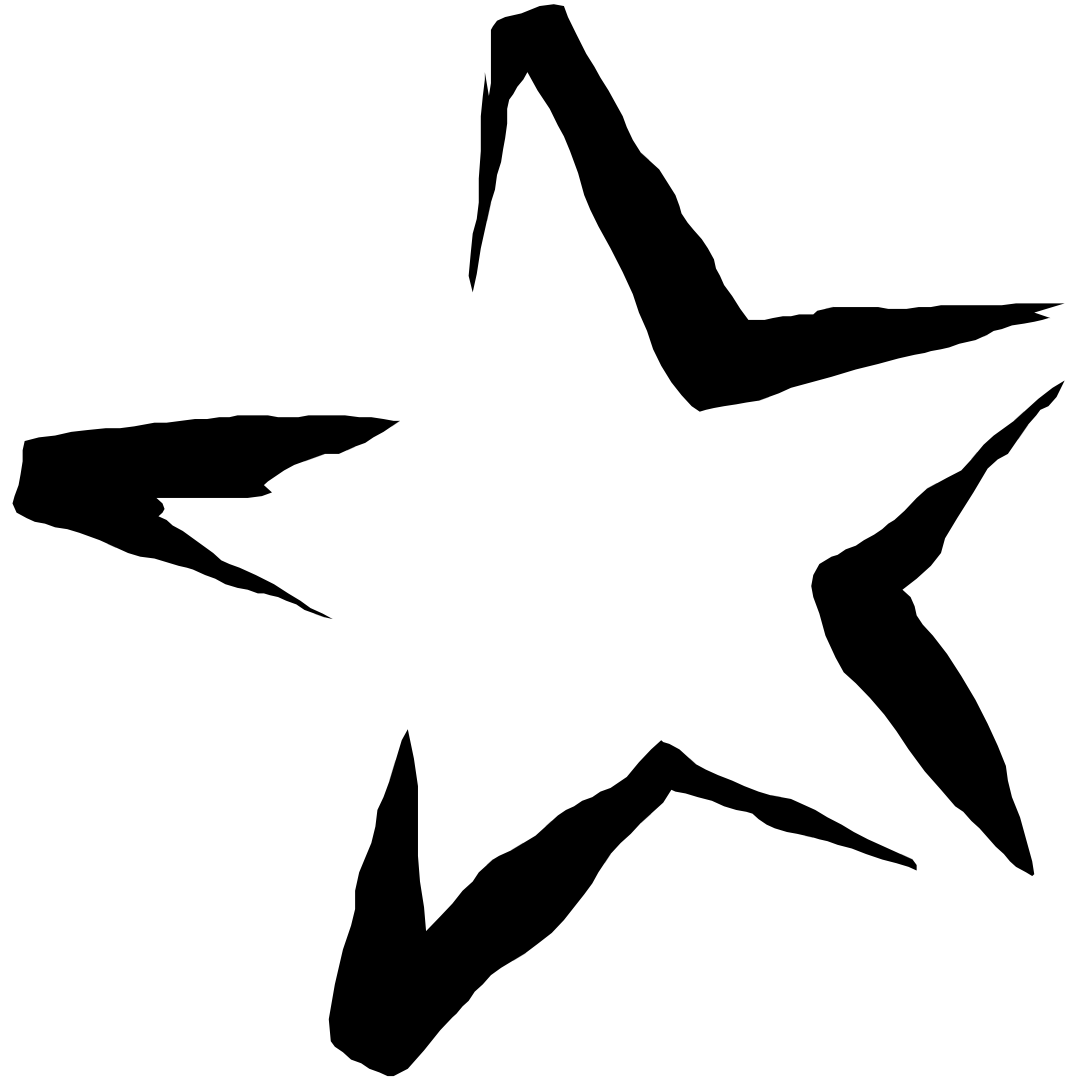
Signature

Date

Certificate of Achievement

This Certificate is Presented to:

*For completion of the
START NOW Unit 3:
My Relationships*



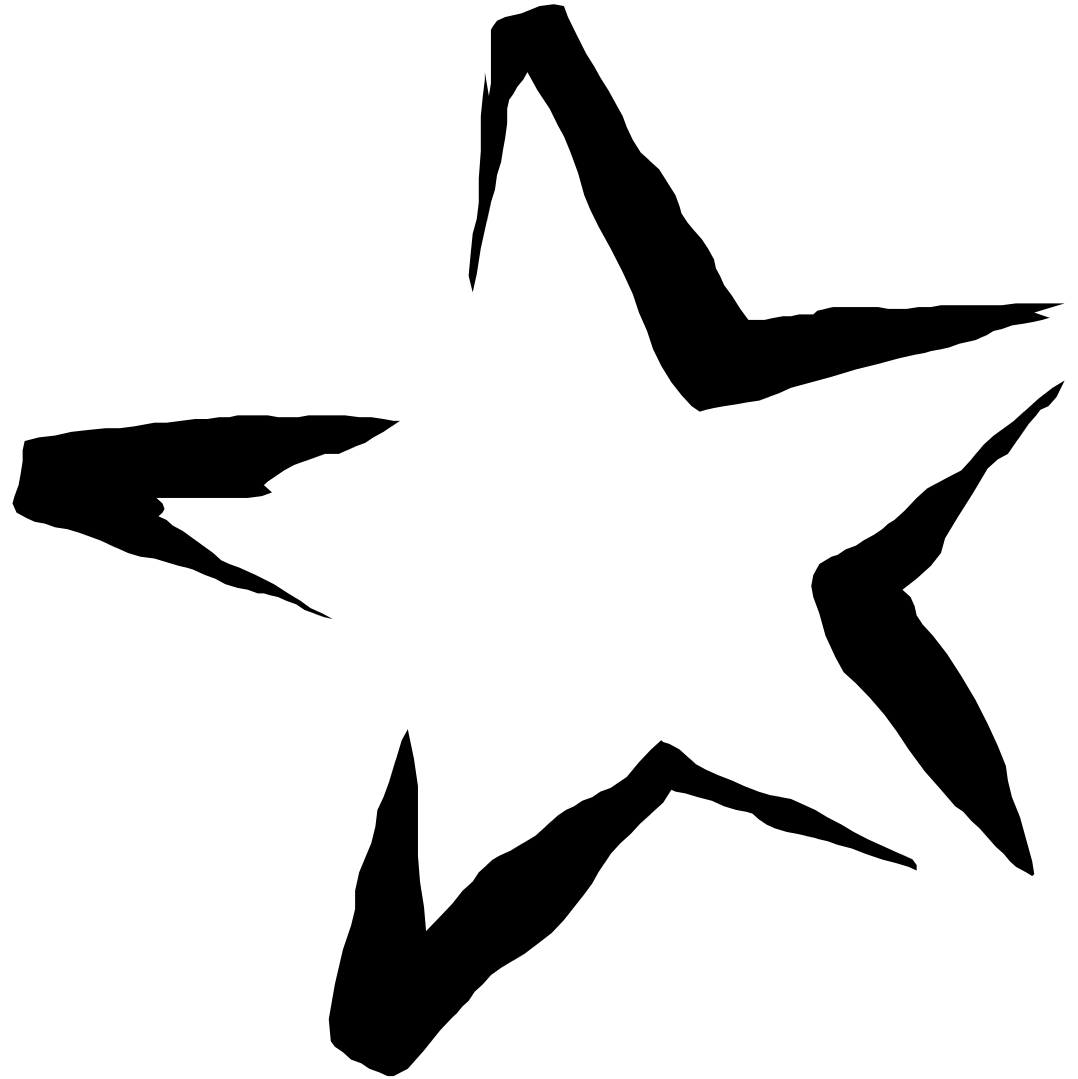
Signature

Date

Certificate of Achievement

This Certificate is Presented to:

*For completion of the
START NOW Unit 4:
My Future*



Signature

Date