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The logo consists of a stylized lowercase letter 'm' in blue, followed by the text "Maternal and Child Survival Program" in a blue serif font.

Maternal and Child
Survival Program

Caregiver Psychosocial Support Training

Training Overview (1/3)

- Target audience of support group
 - The group is for parents who are caring for a child with a disability and are interested in facilitating peer support groups every other week.
- Training objectives
 - Participants will become familiar with the structure of peer support groups.
 - Participants will know how to facilitate peer support groups for caregivers of children with disabilities.
 - Group facilitators will be identified, and plans to initiate the groups will be developed.

Training Overview (2/3)

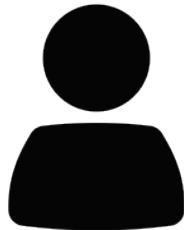
- After the training
 - Group facilitators will set up support groups that will meet every 2 weeks for 5–15 caregivers of children with disabilities.

Training Overview (3/3)

DAY 1		DAY 2	
8:45–9:15 a.m.	Opening, welcome, guidelines	9:00–9:30 a.m.	Opening and review
9:30–10:15 a.m.	Session I: Introductions	9:30–10:30 a.m.	Session II: Tree of life
10:15–10:30 a.m.	Break	10:30–10:45 a.m.	Break
10:30–11:15 a.m.	What is stress?	10:45–11:15 a.m.	Preparing to facilitate
11:15 a.m.– 12:30 p.m.	Reducing stress through support groups	11:15 a.m.– 12:15 p.m.	Facilitation demonstration
12:30–1:30 p.m.	Lunch break	12:15–1:15 p.m.	Lunch break
1:30–2:45 p.m.	Open forum	1:15–2:45 p.m.	Facilitation demonstration
2:45–3:00 p.m.	Break	2:45–3:00 p.m.	Break
3:00–4:00 p.m.	Session 8: Feelings pie chart	3:00–4:30 p.m.	Planning
4:00–4:45 p.m.	Referral and guest speakers	4:30–5:00 p.m.	Wrapping up
4:45–5:00 p.m.	Wrapping up	5:00 p.m.	Closing



Activity Structure



- Individual
 - Draw from your experiences and prior knowledge.
- Small group
 - Exchange knowledge.
 - Explore topics in depth.
- Whole group
 - Establish common understandings.



Deep Breathing (1/2)

Watch video on diaphragmatic breathing:

<https://www.youtube.com/watch?v=0Ua9bOsZTYg>

Let's practice some “controlled breathing.”

- Take a deep breath, expanding your belly. Pause.
- Exhale slowly to the count of five. Repeat four times.

Deep Breathing (2/2)

Controlled breathing **can change the response of the body's autonomous nervous system** that controls the heart rate, digestion, and body's stress response.

Source: Brown RP, Gerbarg PL. 2012. The Healing Power of Breath. Boston, Massachusetts: Shambala Publications, Inc.

Benefits

- Reduces stress
- Increases alertness
- Boosts your immune system
- Reduces symptoms associated with anxiety, insomnia, post-traumatic stress disorder, depression, and attention deficit disorder

Benefits of Grounding

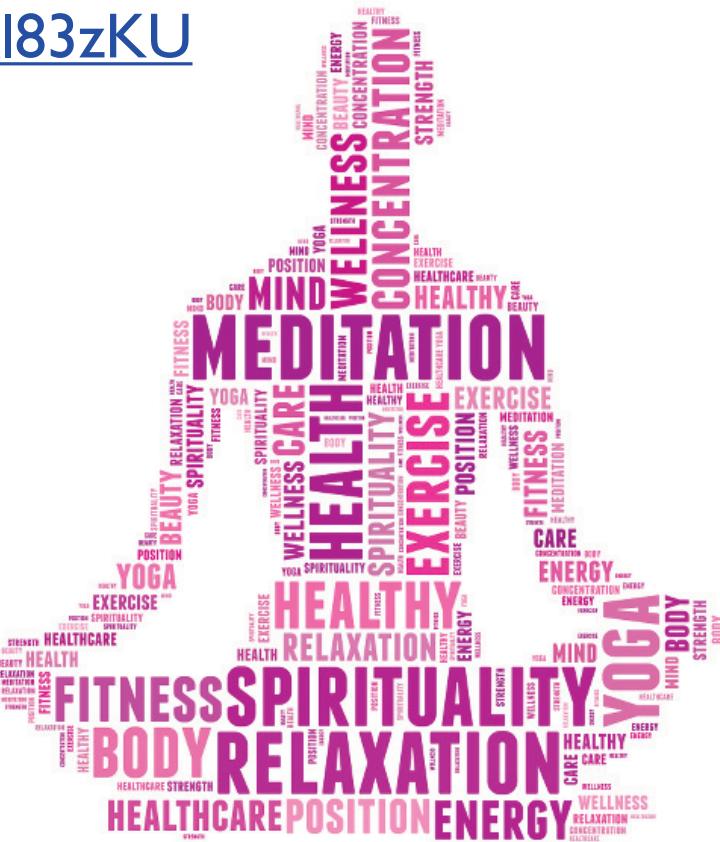
1. Calms the chatter in the mind
2. Focuses and clarifies thinking
3. Improves sleep
4. Enables the ability to choose and respond, rather than react, to circumstances
5. Interrupts the cortisol stress response
6. Reduces pain
7. When done on earth, introduces vitamin G into the body



Techniques for Relaxing

<https://www.youtube.com/watch?v=sMpwxI83zKU>

- Progressive muscle relaxation
- Mindfulness mediation
- Yoga, tai chi, and Qi Gong
- Repetitive prayer
- Guided imagery



Guidelines

- **Listening:** One person speaks at a time. Please listen to what other people are saying, and raise your hand if you have something to say. Your turn will come once the person before you in the queue has finished.
- **Confidentiality:** We keep everything we hear confidential. What is shared in this room stays in this room.
- **Safe place for feelings:** We share and honor our real feelings and are not role-playing. Feelings are neither right nor wrong, neither good nor bad. All feelings are accepted. We never mock or attack another person's feelings or ideas.
- **Respecting boundaries:** We respect the physical, emotional, spiritual, and intellectual boundaries of each member of the support group. We never give unsolicited hugs. We never tell anyone what they should or should not be thinking, feeling, or doing. We respect religious beliefs and practices.
- **Sharing:** We do not comment on another person's drawing, unless it's positive.

What Is Stress?

Stress Experienced by Families of Children with Disabilities

- Discussion (15 minutes)
 - Think about the families you will be working with. What types of stress do you think they may be experiencing?
 - Make a list and write one experience on each Post-it or meta-card.
- Categorizing experiences
 - Physical
 - Mental
 - Emotional
 - Spiritual
 - Behavioral
 - Interpersonal

What Is Stress? (1/2)

Normal response to physical or emotional challenges that occur when **demands are out of balance with the resources available for coping**



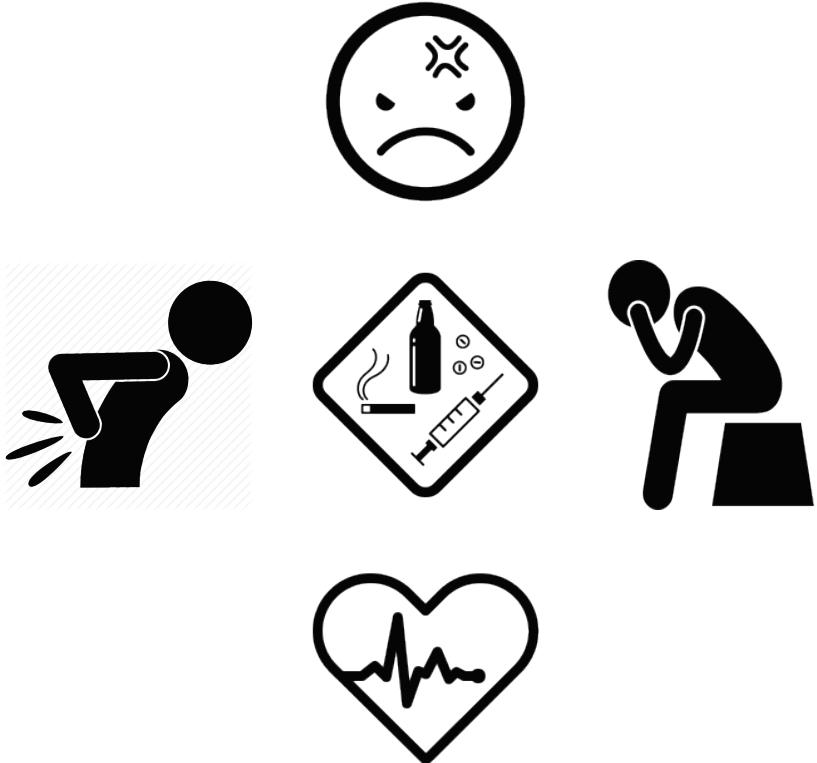
- **Day-to-day stress (baseline):** Everyday challenges.
- **Cumulative stress (strain):** When sources of stress continue over time and interfere with regular patterns of living.
- **Critical stress (shock):** Situations where individuals are unable to meet the demands placed on them and suffer physical or psychological breakdown.
 - The ability to react is paralyzed or frozen.
 - Persons in this state may experience emotional turmoil, apathy, or despair.

Source: International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.

What Is Stress? (2/2)

Common reactions to stress

- **Physical** (e.g., muscular aches, tiredness, nausea, fast heartbeat, sleep disturbances)
- **Mental** (e.g., difficulty concentrating, mental avoidance)
- **Emotional** (e.g., anxiety, sadness, guilt, anger, shame)
- **Spiritual** (e.g., life seems pointless)
- **Behavioral** (e.g., alcohol abuse, avoidance of activities)
- **Interpersonal** (e.g., being withdrawn)





Stress Experienced by Families

- Parent of a child diagnosed with a disability often experiences elevated levels of stress compared to the parent of a child without a disability.
- Distress stems from the following:
 - **Learning** about the child's disability
 - Addressing the child's **medical or therapeutic needs**
 - **Restricted** social or employment **opportunities**
 - **Financial burden** due to specialized therapies or care
 - **Stigma or changes in relationships** with family or friends
 - **Feeling isolated** and without adequate support

Coping with Stress (1/2)

The objective of coping is to survive—**to function physically, socially, and psychologically** during and after the crisis.

Coping mechanisms change over time as circumstances related to the crisis develop or evolve.



Coping with Stress (2/2)

Approach and avoidance are two main coping strategies:

- **Approach strategies**
 - Seeking support, facing problems, and trying to solve them
 - Offering to help others
 - Talking about one's experiences
 - Reducing stressors
- **Avoidance strategies**
 - Denial—a defense mechanism to deny feelings, wishes, needs, or thoughts in order to avoid anxiety
 - Dissociation—a process where thoughts, reactions, and emotions become separated from the rest of the personality
 - Those affected do not realize what is happening to them and around them.

Source: International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.

Reducing Stress through Support Groups

Psychosocial Support: Key Concepts (1/2)

What is resilience?

- A person's ability to cope with challenges and difficulties, and to restore and maintain a new balance when the old one is challenged or destroyed—often described as the ability to “bounce back”

What is psychosocial support?

- Psychological needs—internal, emotional, and thought processes, feelings, and reactions
- Social needs—relationships, family, community networks, social values, and cultural practices

Source: International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.

Psychosocial Support: Key Concepts (2/2)

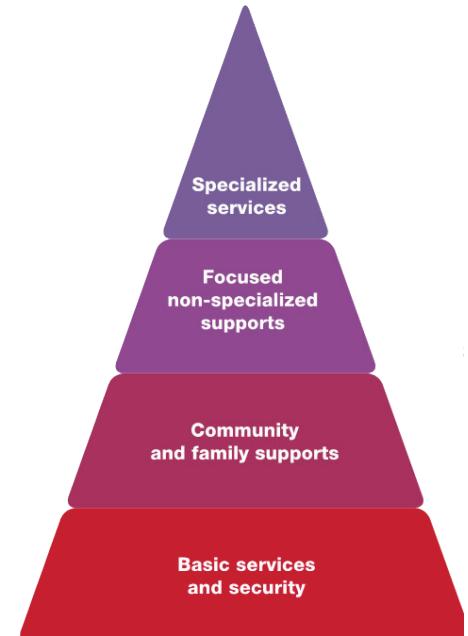
How can a psychosocial support group address both **psychological** and **social needs?** Discuss together.



Psychological Support Levels

Four levels of support

- **Basic services and security**—meeting of basic needs, such as food, clean water, health care, and shelter
- **Community and family support**—encouragement of social support networks (e.g., strengthening family or community networks)
- **Focused non-specialized support**—individual, family, or group interventions typically carried out by trained and supervised workers (e.g., a support group to share a common issue)
- **Specialized services**—additional support for a small percentage of the population whose condition, despite the support already mentioned, is intolerable and who may have great difficulties in performing basic daily functions



Small group discussion (15 minutes)—what kind of support do you think caregivers of children with disabilities need?

Source: International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.

Leading a Support Group

Psychosocial Support Groups

Why hold psychosocial support groups?

- To provide emotional support to caregivers of children with disabilities
- To provide coping support, offer mutual aid, and foster individual change
- To offer hope, a sense of community, and regular opportunities for social interaction and support

How many people will be in the group?

- 5–15 people in each group
- Discussion facilitated by a peer facilitator

Each session will be between 1 hour and 15 minutes to 2 hours in duration, and most will follow four steps:

- Step 1 (10 minutes): Opening
- Step 2 (20 minutes): Discussion prompt
- Step 3 (50 minutes): Participants invited to speak
- Step 4 (10 minutes): Closing, with an exercise on gratitude

Psychosocial Support Group Sessions (1/2)

Theme	Session	Prompt
Making connections	Session 1: Introductions	Create a representation of yourself with sticks and fabric scraps.
	Session 2: Love	Draw someone who is important to you.
	Session 3: Open forum	Caregivers are invited to talk about their challenges and successes.
Receiving help and helping others	Session 4: Support to cope with stress (guest speaker)	Invite a counselor to talk about how to recognize stress, manage stress, and what external support is available. At the end of the session, gather feedback from the group, and make adjustments.
	Session 5: My support network	Write down the people you can count on for help.
	Session 6: Helping others	Draw something you did to help someone.

Psychosocial Support Group Sessions (2/2)

Theme	Session	Prompt
Exploring how we feel	Session 7: Open Forum	Caregivers are invited to talk about their challenges and successes.
	Session 8: Feelings pie chart	Color within the circle to represent all the emotions you feel. At the end of the session, gather feedback from the group, and make adjustments.
	Session 9: Learning from others (guest speaker)	Invite an adult with a disability or a caregiver of an older child with a disability to talk about their journey.
My life	Session 10: Open forum	Caregivers are invited to talk about their challenges and successes.
	Session 11: Tree of life	Draw the tree of life.
	Session 12: Caring for ourselves	Think about how you take care of yourself. Write down five things that you do. Write down five things you need to do.

How to Create a Support Group (1/2)

Think about what you want to accomplish.

- Your goal is to create a support group for caregivers of children with disabilities to allow them to share experiences and support each other.

Decide whether the group will meet for a specific or an indefinite period of time.

- From among the participants in the 12 sessions, identify one or two peer leaders to create your support group.

Decide on a time and place for your group to meet.

- Determine the time and location of the meeting based on the availability of caregivers (e.g., when they are not working or may not have other obligations).

Select a group leader or facilitator.

- Would any of you like to start a group?

How to Create a Support Group (2/2)

Recruit members for your support group.

- **Use referrals:** Get referrals from doctors, nurses, social workers, physiotherapists, organizations, etc.
- **Use the media:** Have them disseminate posters, flyers, press releases, public service announcements, etc.
- **Word of mouth:** Encourage group members to tell other caregivers of children with disabilities.

Once you have 5–15 members, let everyone know the date and time of the first meeting.

- Give them a couple of weeks of advance notice, and call them a few days before the meeting to remind them of it.

Source: Section 2: creating and facilitating peer support groups. Community Tool Box website. <https://ctb.ku.edu/en/table-of-contents/implement/enhancing-support/peer-support-groups/main>. Accessed February 13, 2019.

The Group Facilitator (1/2)

The sessions can be facilitated by peers, counselors, or community health workers who have attended the psychosocial support training.

Responsibilities

- Opens and closes the meeting
- Emphasizes a safe place, without judgement, and where the information shared is confidential
- Helps members learn to listen and support each other
- Manages with problems that arise during the meeting

Qualities

- Flexible schedule—has time to prepare for the meetings and attend every meeting
- Disposition—has a positive outlook and is a dynamic individual
- Skills—has experience facilitating groups and is well spoken, a good listener, organized, and able to work well with others
- Support—has a phone and people to rely on for help
- Motivation—has a personal experience with disability and a strong desire to help others with similar experiences

The Group Facilitator (2/2)

What qualities do you have? What qualities do you want to develop? **Discuss in pairs.**



Referral to Professional Help

Understand a referral.

- It is recommending a person in extreme distress to speak to a professional counselor.

Refer a person in extreme distress.

- Family members and others seek your help. They tell you something is seriously wrong or worry that the person is losing their sanity or may commit suicide.
- After the sessions, the person is not showing any improvement, even though they may not be in obvious distress.

Follow these steps for a referral:

- Inform the individual of and help them understand the reason for their referral.
- Discuss any referral options and practical matters (fees, location, etc.).

Source: International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.

WHEN TO REFER

If someone develops severe problems with sleeping e.g. not sleeping at all or only sleeping very little; lying awake for hours not being able to fall asleep or waking up very early in the morning.

If someone displays strong emotions that are difficult for them to deal with, such as rage, aggression, intense fear or worry.

If someone hints at or talks openly of suicide.

If someone develops persistent physical symptoms.

If someone shows signs of dependency on alcohol or drugs.

If someone behaves at great risk to himself or other people.

If someone has enduring depressions or mental disorders (such as hallucinations or delusions).

If someone is difficult to maintain contact with.

In situations where abuse or criminal activity is indicated.





Preparing to Facilitate

Facilitating a Peer Support Group

Be prepared.

Become familiar with the session before it starts.

Prepare the room.

Come to the meeting 15 minutes before its start.

Have one or two greeters at the door.

Prepare the chairs, refreshments, etc.

Follow these steps to facilitate the group:

Step 1 (10 minutes): Open the meeting.

Step 2 (20 minutes): Introduce the discussion prompt.

Step 3 (50 minutes): Invite participants to speak if they choose to.

Step 4 (10 min): Close the session with an exercise on gratitude.

First meeting

- Create a friendly atmosphere by welcoming new members as they arrive.
- State the group's purpose and goals.
- Group facilitator can share why they were motivated to join this group.
- Group facilitator introduces themselves and talks about their personal experience with disability.
- New members are given space to introduce themselves and their personal story, but without any pressure. Some people may need to attend several meetings before they are ready to talk.
- Collaboratively give the group a name.
- Start and finish the meeting on time.

The Group Facilitator: Review

The sessions can be facilitated by peers, counselors, or community health workers who have attended the psychosocial support training.

Responsibilities

- Opens and closes the meeting
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- **Support**—has a phone and people to rely on for help
- **Motivation**—has a personal experience with disability and a strong desire to help others with similar experiences

Managing Difficult Group Members

Use assertive-caring when a member does one or more of the following:

- Is often late to meetings
- Talks too much, monopolizing the discussion
- Interrupts others or brings up inappropriate or irrelevant subjects
- Rejects every suggestion that others make—the "yes, but" phenomenon
- Appears to have problems that are more than the group can handle (e.g., someone who's had a change in health and should seek medical attention, or someone who may need professional help)

Practice assertive-caring as follows:

- Show that you understand the member's position or dilemma. State that you understand the reason(s) for the member's negative behavior. Use "I" or "we" statements that show how the member's behavior affects you and the group.
- Set limits. Gently but firmly correct the behavior. Explain your reasons, letting the member know why their behavior needs to change and be more cooperative with the group.
- Suggest an alternative. Explain how you'd like to see the member act in the group.
- Request the member's agreement on behaving alternatively. Make sure the member understands and agrees to what is being asked of them.

Source: Section 2: creating and facilitating peer support groups. Community Tool Box website. <https://ctb.ku.edu/en/table-of-contents/implement/enhancing-support/peer-support-groups/main>. Accessed February 13, 2019.

Tips for Maintaining a Support Group (1/2)

Ask for feedback from group members, and make adjustments.

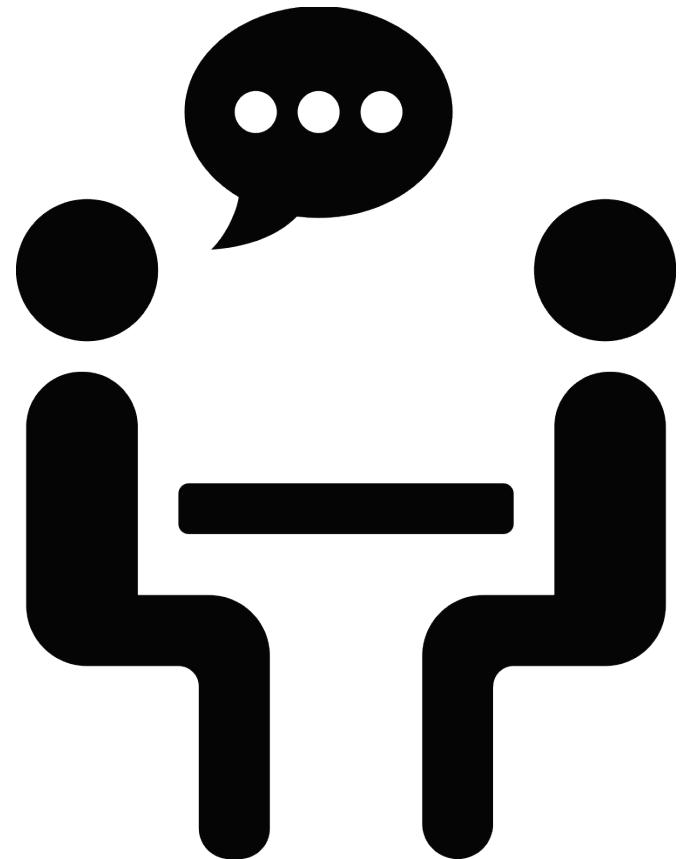
- From time to time, ask members for their feedback on how the group is performing—How useful is it? What do you like and dislike about the group? What can be done to improve it?

Share responsibility with group members.

- Delegate tasks (greeting, setting up the room, reminding participants about the next meeting, etc.). This will make them feel more committed to and invested in the group.

Make sure everyone has a chance to talk.

- Use assertive-caring with very talkative members so that others have time to talk.



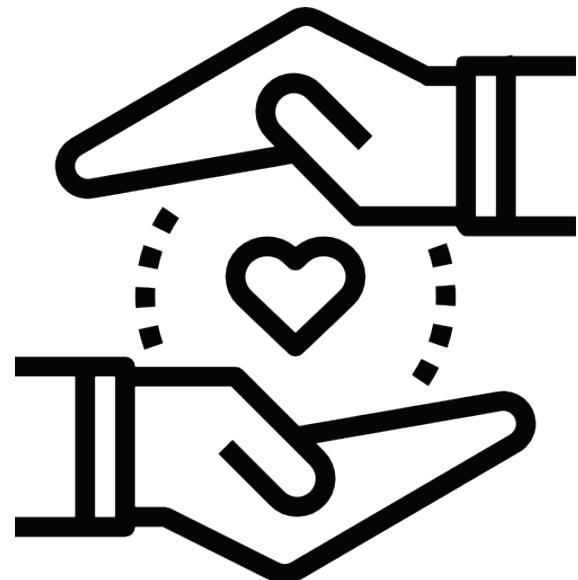
Tips for Maintaining a Support Group (2/2)

Emphasize the importance of confidentiality.

- Remind everyone to keep what is said during the group session private—i.e., no sharing outside the group. This will help your members feel safe enough to work through their problems.

Encourage group members to support each other even outside the meetings.

- You can create a "buddy" system where a member with an older child or one who has been attending the sessions for a longer period checks in with another member to provide additional support.



Planning Your Support Group

Planning Psychosocial Support Groups

- What do you want to accomplish?
- Who can come?
- Decide whether the group will be for a specific or an indefinite period of time.
- From among the participants in the 12 sessions, identify one or two peer leaders to create your support group.
- Decide on a time and place for your group to meet.
- Determine the time and location of the meeting based on the availability of caregivers (e.g., when they are not working or likely to have other obligations).
- Select a group leader or facilitator.
- Participants can decide if they would like to start a group.



Planning Psychosocial Support Groups

Recruit members for your support group.

- Use referrals: Get referrals from doctors, nurses, social workers, physiotherapists, organizations, etc.
- Use the media: Have them disseminate posters, flyers, press releases, public service announcements, etc.
- Word of mouth: Tell everyone you can about the group, and encourage group members to tell other caregivers of children with disabilities.
- Once you have 5–15 members, let everyone know the date and time of the first meeting.
- Give them a couple of weeks of advance notice, and call them a few days before the meeting to remind them of it.



Source: Section 2: creating and facilitating peer support groups. Community Tool Box website. <https://ctb.ku.edu/en/table-of-contents/implement/enhancing-support/peer-support-groups/main>. Accessed February 13, 2019.

Group Work

On a flip chart, write the following:

- Objective of the group
- How long the group will meet
- Where and when the group will meet
- Who will facilitate the meeting (can be decided at the end of the training)
- How you will recruit members for the support group
 - Using referrals: Get referrals from doctors, nurses, social workers, physiotherapists, organizations, etc.
 - Using the media: Have them disseminate posters, flyers, press releases, public service announcements, etc.
 - Word of mouth: Encourage group members to tell other caregivers of children with disabilities.

References

- Brown RP, Gerbarg PL. 2012. *The Healing Power of Breath*. Boston, Massachusetts: Shambala Publications, Inc.
- International Federation of Red Cross and Red Crescent Societies Reference Centre for Psychosocial Support. Community-based psychosocial support participant's book: a training kit. Red Cross website. <https://www.redcross.org.rs/media/3594/community-based-psychosocial-support-participants-book.pdf>. Accessed February 12, 2012.
- Section 2: creating and facilitating peer support groups. Community Tool Box website. <https://ctb.ku.edu/en/table-of-contents/implement/enhancing-support/peer-support-groups/main>. Accessed February 13, 2019.
- Self-Help Resource Centre. Peer support facilitator guide. Self-help Resource Centre website. <http://www.selfhelp.on.ca/site/wp-content/uploads/MH-Peer-Support-Manual.pdf>. Accessed January 24, 2019.
- Mental Health America. 2016. Support group facilitation guide. Mental Health America website. <https://www.mentalhealthamerica.net/sites/default/files/MHA%20Support%20Group%20Facilitation%20Guide%202016.pdf>. Accessed January 24, 2019.

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www.mcsprogram.org

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