**AGPA Connect 2023 Presenter Information**

**Course Code:** 36

**Course Title:** Present Centered Group Therapy for Trauma: Embracing Today and Reimagining Tomorrow

**Course Times:** 10:00 AM - 12:30 PM

**Course Dates:** Friday, March 10

**Instructors:** Daniel Gross

Barbara Niles

William Unger

Melissa Wattenberg

**Course Description:** Present centered approaches to PTSD have garnered recent attention as effective treatments that do not require a focus on traumatic events. Course leaders will review evidence and provide demonstrations to illustrate Present Centered Group Therapy for promoting positive functioning, social interaction, cultivation of wellness, and methods for managing in-group reactions to trauma triggers.

**Learning Objectives**

The attendee will be able to:‎

1. ‎‎‎‎Identify trauma related themes and PTSD symptoms.‎
2. ‎Compare trauma focused and non-trauma focused treatment approaches.‎
3. ‎Name elements of the PCGT protocol, including stages of treatment, common challenges, and ‎exclusion criteria for group selection.‎
4. ‎Describe ways to affirm and acknowledge group members’ cultural backgrounds and individual ‎identities within a trauma-aware present-oriented approach.‎
5. ‎Utilize a social justice framework to address themes of unconscious bias, imbalance of privilege, and ‎minority distress.‎

**Significant Articles:**

1. Frost, N. D., Laska, K. M., & Wampold, B. E. (2014). The Evidence for Present‐Centered Therapy as a ‎Treatment for Posttraumatic Stress Disorder. Journal of Traumatic Stress, 27(1), 1-8.‎
2. Sloan, D. M., Feinstein, B.A., Gallagher, M.W., Beck, J.G., Keane, T.M. (2013). Efficacy of group ‎treatment for posttraumatic stress disorder symptoms: A meta-analysis. Psychological Trauma: ‎Theory, Research, Practice, and Policy,5, 176-183.‎
3. Bisson, J. I., Berliner, L., Cloitre, M., Forbes, D., Jensen, T. K., Lewis, C., Monson, C. M., Olff, M., Pilling, ‎S., Riggs, D. S., Roberts, N. P., & Shapiro, F. (2019). The International Society for Traumatic Stress ‎Studies new guidelines for the prevention and treatment of posttraumatic stress disorder: ‎Methodology and development process. Journal of Traumatic Stress, 32(4), 475-483. ‎https://doi.org/10.1002/jts.22421‎
4. Hamblen, J. L., Norman, S. B., Sonis, J. H., Phelps, A. J., Bisson, J. I., Nunes, V. D., Megnin-Viggars, O., ‎Forbes, D., Riggs, D. S., & Schnurr, P. P. (2019). A guide to guidelines for the treatment of ‎posttraumatic stress disorder in adults: An update. Psychotherapy, 56(3), 359-373. ‎https://doi.org/10.1037/pst0000231‎
5. Wattenberg, M. S., Gross, D., Niles, B. L., Unger, W. S., & Shea, M. T. (2021). Present-Centered Group ‎Therapy for PTSD: Embracing Today. New York: Routledge.‎

**Agenda:**

1. Introduction of workshop presenters and attendees and current treatment settings, discuss objectives of workshop (All presenters, 15 mins, Obj 1/3).
2. Demo of PCGT group with commentary from presenters (Gross, Unger, 25 min, Obj. 1/2/4)
3. Discuss PCGT theory, definition of PTSD, rationale for treatment, stages of treatment (complementing information provided in handout). Identify how DEI are handled in present-centered group, including intersection of trauma, social justice, and cultural identity. (Niles, Wattenberg; 15 min Obj 1/2/3)
4. Provide experiential opportunity for understanding and assimilating PCGT skills (Wattenberg, Gross, 25 min, Obj 1/2/3/4)
5. Facilitate discussion of common themes/challenges experienced in PCGT (referenced in handout), including issues emerging in the context of differential social status, personal backgrounds and cultures, and political divides among group members. (Niles, Unger, 15 min, Obj 1/2/4)
6. Provide experiential opportunity to practice strategies for further skill integration and management of common challenges. (All presenters, 40 Obj 1/3/4)
7. Debrief experiential component, Q&A with panel provides and attendees (Gross, 10 min Obj 1/3/5), including acknowledgment of how themes of social justice and diversity arose in experiential process, and how PCGT addressed those themes.
8. Participant evaluations (5 min)

**Assessment Questions:**

Question 1 (include possible answers)

(Multiple Choice) DSM-5 symptom clusters of PTSD include: A. Depression and panic attacks B. Paranoia and dissociation C. Avoidance and Moral Injury (e.g., self-blame) D. Re-experiencing (such as intrusive thoughts, nightmares); Increased arousal (such as poor sleep and irritability); Negative thoughts or feelings that began or worsened after the trauma; and Avoidance of trauma-related thoughts and feelings.

Correct Answer 1

Answer: D

Question 2 (include possible answers)

(Multiple Choice) Which of the following statements IS TRUE about Present Centered Group Therapy (PCGT) for PTSD? A. PCGT is new and experimental and has very little empirical evidence to support it. B. PCGT has been studied a lot as a comparison group for other group psychotherapies. C. PCGT has been shown to be vastly superior to trauma focused treatment for PTSD. D. PCGT has a step-by-step manual for each session so requires very little clinical training and group experience.

Correct Answer 2

Answer: B

Question 3 (include possible answers)

(Multiple Choice) Which of the following is NOT accurate. A. Encouraging healthy lifestyle behaviors is important for clients with PTSD. B. In PCGT, therapists should take time to address client issues with group members when they are disruptive and seem triggered by trauma memories. C. Therapists in PCGTs should assign set goals for the group members rather than allow group members to set challenging goals for themselves. D. Guiding clients in setting goals they can accomplish is an important part of PCGT.

Correct Answer 3

Answer: C

Question 4 (include possible answers)

(Multiple Choice) In PCGT for trauma, expression of anger A. is encouraged because people with trauma histories need to release their anger and sense of outrage through direct expression. B. can often be successfully be managed through the group process. C. is best contained by removing group members from the group. D. rarely comes up.

Correct Answer 4

Answer: B

Question 5 (include possible answers)

(Multiple Choice) Most clients with PTSD A. should not be interrupted when speaking in a Present Centered Group group to allow them to process their trauma. B. demonstrate good emotion regulation skills and are not triggered by other group members. C. have healthy lifestyles and sleep well. D. All of the above. E. None of the above.

Correct Answer 5

Answer: E

Question 6 (include possible answers)

(T/F) Present Centered Therapies encourage people to avoid the past rather than integrate the trauma.

Correct Answer 6

Answer: FALSE

Question 7 (include possible answers)

PCGT group members who are triggered by trauma memories often A. can remain in the group or rejoin the group. B. can be encouraged to utilize stress management (breathing) techniques. C. are not encouraged to talk about their trauma experiences. D. All of the above E. None of the above

Correct Answer 7

Answer: D

Question 8 (include possible answers)

(Multiple Choice) Which of the following is true about Present Centered Group Therapy. A. The focus of PCGT always remains on the index or identified trauma. B. Group members who are very numb are helpful to the group process because they allow the therapists to present important didactic content without interruption. C. Enlisting group members to provide feedback to other group member is an important intervention in PCGT D. Group therapists should refrain from interrupting when group members get triggered by trauma memories as it is important to let these play out in the group.

Correct Answer 8

Answer: C

Question 9 (include possible answers)

(Multiple Choice) Focus on coping methods in the present day A. can be helpful and pleasant, but does not address core symptoms of PTSD. B. is a core part of PCGT. C. is a minimal focus in PCGT. D. is only valuable if it causes people to relive their trauma.

Correct Answer 9

Answer: B

Question 10 (include possible answers)

(Multiple Choice) In present-centered group therapy, cliques that form among group members based on cultural identities, social disparities, and/or trauma-based trust issues should A. be allowed to intensify naturally in order to promote close connections for some members. B. play out organically without intervention. C. be addressed by facilitators through affirming and acknowledging group members’ cultural backgrounds, respecting individual identities, and supporting self- and other-acceptance. D. be ignored so that facilitators can focus on other topics.

Correct Answer 10

Answer: C