**AGPA Connect 2023 Presenter Information**

**Course Code:** 13

**Course Title:** Understanding Group Traumatization Due to Therapist Public Exposures: Clinical Implications and Interventions

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

**Course Dates:** Thursday, March 9

**Instructors:** Bonnie Buchele

 Barry Helfmann

**Course Description:** The presenters will examine the experience of the group therapist subjected to unintended public, personal exposure and the traumatic effect on the group. Given the nature of today's world allowing accessibility to private information about all clinicians, heretofore considered private, this workshop is relevant for all group therapists. They will discuss the role of attachment in recovery from those events for both the group therapist and group members.

**Learning Objectives**

The attendee will be able to:‎

1. Analyze the special effects on the group and group leader when trauma is experienced by the ‎clinician in the practice of the individual’s profession.‎
2. Distinguish at least three interventions when the professional is in treatment consultation in ‎response to trauma experienced directly in the context of the work.‎
3. Discuss optimum therapeutic effectiveness in the group when the trauma of the leader is the ‎forefront of the group’s life.‎
4. Detect the relationship among attachment style, group cohesion and the impact of trauma, both ‎direct and indirect.‎

**Significant Articles:**

1. Allen, J. & Fonagy, P. (2017). Trauma In Handbook of Psychodynamic Approaches to Psychopathology. ‎Luten, P., Mayes, L., Fonagy, P., Target M., Blatt, S. (Eds.) The Guilford Press.‎
2. Buchele, B. (2012). Group Psychotherapy with High-Functioning Adults Or, People Like Me! In the ‎Wiley-Blackwell Handbook of Group Psychotherapy. J. Kleinberg (Ed.). John Wiley and Sons.‎
3. Craig, C. & Sprang, G. (2010) Compassion satisfaction, compassion fatigue, and burnout in a national ‎sample of trauma treatment therapists, Anxiety, stress, and coping, 23 (3) 319-339.‎
4. Makadia, R., Salon-Farrell, R., & Turnin, G. (2017) Indirect exposure to client trauma and the impact on ‎trainee clinical psychologists: secondary traumatic stress or vicarious retraumatization? Clinical ‎psychology & psychotherapy, 24, 10.1002/cpp2068.‎
5. Sandgrund, Ronald (2017). So, How Does It Feel to Get Sued for Legal Malpractice? (Part 2). The ‎Colorado Lawyer, 46 (4), 60-66. Sodeke-Gregson, E.A.,Holttum, S., & Billings, J. (2013).‎

**Agenda:**

1. Introduction to attachment and trauma theories as well as use of self-disclosure (20 min.), Obj. 1, both presenters, Lecture
2. Description of specific traumatic experience, impact on therapist and group and interventions chosen, Obj.2, Barry Helfmann
	1. Lecture (40)
	2. Q & A (15)
3. Description of specific traumatic experience, impact on therapist and group and interventions chosen, Obj. 3, Bonnie Buchele
	1. Lecture (40)
	2. Q & A (15)
4. Summary discussion, (15 min.), Obj.4, both presenters
5. Evaluation (5 min.).

**Assessment Questions:**

Question 1 (include possible answers)

Therapist self-disclosure can occur in the following: A. All groups B. Only if deliberate C. Only if accidental D. All the above

Correct Answer 1

A

Question 2 (include possible answers)

Inadvertent self-disclosure: A. Always damages treatment B.Can damage treatment when not full explored C.Rarely occurs D.All the above

Correct Answer 2

B

Question 3 (include possible answers)

Secure attachments: A. Are not enhanced by inadvertent self-disclosure B.Can be enhanced by skillful management of inadvertent self-disclosure C.Inadvertent self-disclosure has no effect on secure attachments D.Secure attachments are not a goal of therapy

Correct Answer 3

B

Question 4 (include possible answers)

True/False Elaboration of self-disclosure has more importance then the self state of the therapist

Correct Answer 4

False

Question 5 (include possible answers)

Self Disclosure: A. Should be kept as general as possible B. Should be discouraged whenever possible C. Should be tailored to benefit the treatment D. All the above

Correct Answer 5

C

Question 6 (include possible answers)

The following theorist has not written about self-disclosure: A. Robert Grossmark B. Sigmund Freud C. Wilfred Bion D. Richard Billow

Correct Answer 6

C

Question 7 (include possible answers)

Factors that should be considered when self disclosing are the following: A. The history of the patient B. The security of attachment C. The therapist’s state of mind D. All the above

Correct Answer 7

D

Question 8 (include possible answers)

Consultation is crucial to the therapist’s management of inadvertent self-disclosure due to the following: A. Potential legal liability B. The therapist’s inability to think clearly C. The potential for vicarious traumatization of patients by the therapist D. All the above

Correct Answer 8

D

Question 9 (include possible answers)

The state of the patient’s transference to the therapist is central in thinking about the management of inadvertent self-disclosure in the group: A. Usually B. Without exception C. Occasionally D. Never

Correct Answer 9

B

Question 10 (include possible answers)

Cultural considerations are essential when inadvertent self-disclosure occurs and are: A. Conscious and unconscious. B. Less central when therapist and group members have the same cultural background. C. Not always easily discerned. D. A and C.

Correct Answer 10

D