### Phase 3:

**Six Monthly Psychoeducational Multifamily Group Classes**

<table>
<thead>
<tr>
<th></th>
<th>Engagement Interview</th>
<th>Phase One (Joining)</th>
<th>Phase Two</th>
<th>Phase Three</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>WHO</strong></td>
<td>Veteran (support person as well if present)</td>
<td>Single family: Veteran and support person (dyad)</td>
<td>Multifamily group (4-6 dyads)</td>
<td>Multifamily group (4-8 dyads)</td>
</tr>
<tr>
<td><strong>FREQUENCY</strong></td>
<td>Once</td>
<td>Weekly</td>
<td>Weekly</td>
<td>Monthly</td>
</tr>
<tr>
<td><strong>NUMBER OF SESSIONS</strong></td>
<td>1</td>
<td>4</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td><strong>SESSION LENGTH</strong></td>
<td>20-40 minutes</td>
<td>50 minutes</td>
<td>90 minutes</td>
<td>90 minutes</td>
</tr>
<tr>
<td><strong>PROVIDERS</strong></td>
<td>One</td>
<td>One</td>
<td>Two (due to breakout sessions)</td>
<td>One</td>
</tr>
<tr>
<td><strong>LOCATION</strong></td>
<td>Referral source (e.g., outpatient clinic, inpatient unit)</td>
<td>Provider’s private office</td>
<td>Group room that has a table and comfortably holds 18 people</td>
<td>Group room that has a table and comfortably holds 18 people</td>
</tr>
</tbody>
</table>

**Structure of Each Phase 3 Class**

1. **Part 1:** Welcome, socializing and check-in (~20 minutes)
2. **Part 2:** Review of topic from Phase 2 class (~25 minutes)
3. **Part 3:** Group problem-solving (~35 minutes)
4. **Part 4:** Informal socializing (~10 minutes)
REACH Project, Phase 3

The format for all Phase 3 sessions is:

Part 1: Welcome, socializing and check-in (~20 minutes)
Part 2: Review of topic from Phase 2 class (~25 minutes)
Part 3: Group problem-solving (~35 minutes)
Part 4: Informal socializing (~10 minutes)

The activities of Parts 1 and 3 in each Phase 3 session are constant, so the outlines for those sections will be provided first. The rest of this section includes the curriculum for Part 2 for each month.

Phase 3, Part 1: Welcome and check-in (approximately 10-15 minutes)

1. As participants are arriving, engage in informal discussions.
   a. Ask them to create name tags.
   b. Ask them to sign in on the attendance form.
   c. Provide light snacks (prepackaged cookies or cheese crackers).

2. Review group guidelines and confidentiality (and its limits).

3. Remind the class about emergency procedures, including calling 911, going to the emergency room after hours, etc.

4. Emphasize the importance of regular participation, especially with monthly classes.

5. Encourage them to call to cancel if unable to attend.

6. Check-in/introductions: (as with any activity in REACH, participants are welcome to “pass” if they prefer not to share). Write on the board three questions, such as
   a. What is your name?
   b. What was the best part of the last month?
   c. What is a problem/challenge your family dealt with this month, such as
      1. Our 23-year-old son, his wife and baby moved in because he lost his job.
      2. Our old clunker, one of two cars we need for work, is on its last leg.
      3. I don’t know why, but it seems like we have been arguing more this past month.

   Record these problems on the blackboard as you do the check-in.
7. Review the Foot Stompers (approximately 10 minutes).

8. Recommend an "around-the-room" reading, during which a participant reads a single Foot Stomper, and you lead a discussion. Be sensitive to the fact that some people are not comfortable reading aloud.

Remember: In Phase 3, always go wider and deeper by highlighting similarities and connections among participants, and inviting them to reflect on their experiences with the new skills. You can do so by

- Opening the floor to them: “How are you doing on this issue? What have you found useful? What has helped?”
- Building in an exercise that has each family working some aspect of the topic of the month (e.g., discussing their weekly schedule; role playing a time-out process). Make it as “hands on” as possible.

**Phase 3, Part 3: Group problem-solving** (approximately 35 minutes)

Go back to the list of this month's problems/challenges listed on the board, and take a group vote on which problem they would like to work on this month. Be sure that both family members who “own” the problem are willing to allow us to help them solve this problem.

Distribute copies of the handouts from the Phase 2 “REACH Program Problem-Solving Worksheet” and OPRAH skills. Then proceed with problem solving, using the standard format we presented in Phase 2, class 6. Have one member of the dyad who “owns” the problem complete the worksheet.

After completing problem solving, thank the class for participating in this evening’s discussion. Ask the family that owns the problem to send the worksheet back to the REACH office or drop it off for REACH staff. Give them a self-addressed, stamped envelope.

Review the logistics and schedule for the next Phase 3 class, and encourage them to attend. Encourage them to try out the problem-solving process with a problem at home.

*Therapist Note: When you receive the Problem-Solving worksheet from the family, call them to discuss it. Celebrate what went well, and problem solve with them about challenges that arose and/or next steps.*
# REACH Program Problem-Solving Worksheet

**Veteran's first name:**

**Support person’s first name:**

**Date:**


Be sure to include the clear end point: If this problem were solved, WHO would be doing WHAT differently?

## Step 2: Brainstorm possible solutions

<table>
<thead>
<tr>
<th>Step 2: Brainstorm possible solutions</th>
<th>Step 3: Define Pros and Cons</th>
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<tbody>
<tr>
<td></td>
<td>PROs of this solution</td>
</tr>
<tr>
<td>1.</td>
<td></td>
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<tr>
<td>2.</td>
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<td>3.</td>
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<td>6.</td>
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<td>7.</td>
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<tr>
<td>8.</td>
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<tr>
<td><strong>Step 4:</strong> Select a solution (or combination of solutions) to try.</td>
<td>Our solution:</td>
</tr>
<tr>
<td>---</td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>Step 5:</strong> Develop a specific plan on how to a) implement the solution and b) measure progress.</th>
<th>Vet’s steps to take:</th>
<th>Support person’s steps to take</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th><strong>Step 6:</strong> Evaluate how the plan worked for you.</th>
<th>Veteran’s thoughts:</th>
<th>Support Person’s thoughts:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Overall, did your solution(s) move you forward by at least 1%?</th>
<th>YES</th>
<th>NO  (circle one)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>If not, did you try another solution?</th>
<th>YES</th>
<th>NO  (circle one)</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>If so, what did you try and what happened?</th>
</tr>
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</table>

Please mail this form back to the REACH Office (or give to a REACH Team member) 2 weeks after tonight.  
REACH Team, OKC VAMC, 921 NE 13th Street (183R)  
Oklahoma City, OK 73104  
Or, return it to the next REACH class. Thanks!
Handouts:

- REACH Program Problem-Solving Worksheet
- Foot Stompers (from Phase 2)
- "Recommended Lifestyle Changes for People Living with PTSD" (National Center for PTSD handout)

**Check-in Question:** “What was the best experience/event/part of your month? What was the most difficult/challenging part of your month?”

**Check-in**

I. **Introduction: Theme of recovery as a process.**


Pick one of the students who answered affirmatively and ask, "Think way back to when you first began this sport…what were your very first steps?"

Answers may be

- I watched someone else bowl.
- I read about bowling.
- I saw it on TV.

Ask, “What was your next step in learning to bowl?”

Answers may be

- I went to the bowling alley and watched others.
- I rented shoes and played a few frames with my brother (who is a great bowler).

Ask, “And the second time you went bowling you bowled your first perfect score, a 300, right?”
An answer may be: "No, I was terrible at first, but got better each time I bowled."

Ask, “Did you have help in the process?”

An answer may be: "I got my brother to give me pointers, and I took a couple of lessons at a Saturday morning bowling seminar."

B. Discuss: “What does this have to do with coping with PTSD?”

Answers may be
- Dealing with PTSD is a gradual, daily, ongoing process.
- There is no sudden cure or magical pill that makes all the symptoms disappear.
- Others can help you in dealing with PTSD; you don’t have to do it alone.
- Recovery is slow and steady, step by step. You don’t go from bowling in the 90s to 300 overnight. It takes time and practice.

II. Positive coping choices.

Discuss: “What are some positive choices you both make (or have made) in dealing with the PTSD?”

Answers may be
- Participating in REACH
- Taking medications
- Opening up to my support person/minister/friend
- Doing the CALM procedure

Discuss and celebrate these positive choices and the positive outcomes.

III. Negative coping choices.

Discuss: “Sometimes when we’re hurting emotionally, we make choices to try to help ourselves feel better …but they actually have bad outcomes. What are some choices that you or others you know make that are unhealthy?”

Answers may be
- Using alcohol or street drugs
- Isolating from others
- Dropping out of mental health treatment
- Stopping taking my medications
- Using anger as a shield and way to keep others at a distance.

Discuss: “What have been the outcomes of these choices?”

IV. **Gaining perspective and compassion for others’ experience.**

A. Have dyads back up from the table, and turn toward one another. Write the following open-ended statement on the board:

Something I've learned about you in REACH is:

Knowing this, I try:

**Examples:**

[Family to Veteran]: I've learned that family get-togethers are really stressful for you. Knowing this, I try to limit how long we stay, and sometimes we take two cars.

[Veteran to family]: I've learned that you feel sad and lonely when I hibernate in the back bedroom. Knowing this, I try to let you know it's not about you and check in with you every once in a while.

B. As a large group, process this sharing and the importance of ongoing communication about your needs/feelings. Emphasize that we want to always be learning about those we care about, and that it is helpful to be “gentle” with each other.

V. **Summary.**

Summarize the group's discussion, distribute the NCPTSD handout, “Recommended Lifestyle Changes for People Living with PTSD,” and invite them to read it over the next month.
VI. **Part 3: Group problem-solving** (approximately 35 minutes).

Go back to list of this month’s problems/challenges listed on the board and take a group vote on which problem they would like to work on this month. Be sure that both family members who “own” the problem are willing to allow us to help them with solving this problem.

Distribute copies of the handouts from Phase 2 “REACH Program Problem-Solving Worksheet” and OPRAH” skills. Then, proceed with problem solving using the standard format we presented in Phase II class 6. Have one member of the dyad who “owns” the problem complete the worksheet.

After completing problem solving, thank the students for participating in this evening’s class. Ask the family that owns the problem to send the worksheet back to the REACH office or drop it off for REACH staff. Given them a self-addressed stamped envelope.

Review the logistics and schedule for next Phase III class, and encourage them to attend. Encourage them to try out the problem-solving process with a problem at home!

*Therapist Note: When you receive the Problem-Solving worksheet from the family, call them to discuss it. Celebrate what went well, and problem solve with them about challenges that arose and/or next steps.*
Many people who have experienced trauma go through a wide range of reactions, sometimes including re-experiencing the trauma, avoiding reminders, having strong emotional reactions (including anger) and being numb emotionally. These problems can have a major impact on relationships.

Many treatments are available for PTSD – and they can really help! Remember that treatment can be difficult. It takes a lot of courage and may take some time.

Although there is no “cure” for PTSD, Veterans can lead productive lives. Just as with managing diabetes, managing PTSD requires effort, and may involve medications, psychotherapy, classes, physical exercise, and family involvement. The Oklahoma City VA Medical Center has many excellent programs for Veterans who experienced traumatic events in combat.

It’s important for Veterans and their families to talk regularly and openly about how they can support one another. Remember that everyone (PTSD or not) has challenges and struggles in life. We challenge you to look at the situation from the other person’s perspective. How can you be there for him/her?
Lifestyle Changes Recommended for People Living with PTSD
Reprinted with the permission of the National Center for PTSD

People with PTSD need to take active steps to deal with their PTSD symptoms. Often these steps involve making thoughtful changes in your lifestyle. By making these changes, you can reduce your symptoms and improve your quality of life. Here are some positive changes you could make:

**Have more contact with other trauma survivors.**
Other trauma survivors are a good source of understanding and support. You could join a survivors' organization. For example, Veterans may want to join a Veterans' organization. By having contact with others who have had similar experiences, you will no longer be isolated. You will also begin to break down any distrust of others.

It may be hard to take the first step and join a PTSD treatment group or other peer-support group. You may have said to yourself, "What will happen there? Nobody can help me anyway." Many people with PTSD find it hard to meet new people. They have trouble trusting enough to open up to someone new. Yet it can also be a great relief to feel that you have taken positive action. You will learn that you are not the only one dealing with the types of feelings you have. In time you may also end up being friends with another survivor.

**Start exercising.**
Walking, jogging, swimming, weight lifting, and other forms of exercise often reduce physical tension. It is important to see a doctor before starting to exercise. If your doctor gives the OK, exercise in moderation can help those with PTSD. Exercise may give you a break from difficult emotions. It may distract you from painful memories or worries. Perhaps most importantly, exercise can improve self-esteem. It may create feelings of personal control.

**Change neighborhoods.**
Survivors with PTSD often think that the world is a very dangerous place. You may think it is likely that you will be harmed again. If you have PTSD, living in a high-crime area may confirm these beliefs and make you more fearful. If it is possible, move to a safer area. It may then be easier for you to rethink your beliefs about danger. You may be better able to trust that you will be safe.
Volunteer in the community.

Most people need to feel as though they can contribute to their community. You may not feel you have anything to offer others, especially if you are not working. One way survivors can reconnect with their communities is to volunteer. You can help with youth programs, health services, reading programs, sports activities, building housing, and in many other ways.

Stay away from drinking and drugs.

Sometimes trauma survivors turn to alcohol and drugs to help them cope with PTSD. While these substances may distract you from your painful feelings for a short time, relying on alcohol and drugs always makes things worse in the end. These substances get in the way of PTSD treatment and recovery. Rather than trying to beat an addiction by yourself, you may want to join a treatment program. It is often easier to deal with addictions if you can be around others who are working on the same kinds of issues.

Invest more in personal relationships.

Most trauma survivors have a son or daughter, wife or partner, or an old friend or work buddy. Make an effort to renew or increase contact with that person. This can help you reconnect with others, which in turn helps you cope with PTSD. It will increase the chances you have to feel good and have fun. Others can offer you emotional support as you change your habits and behaviors.
Handouts:

- REACH Program Problem-Solving Worksheet
- Foot Stompers (from Phase 2)
- Catch, Challenge, Change handout (from Phase 2)
- Time-Out Process handout (from Phase 2)

**Check-in Question:** “Please describe a time when you handled a “hot” topic or issue well, perhaps a time when the discussion could have led to a bad argument, but you used good communication skills and resolved the issue well. What did you do that made it go well?”

I. **Review the Catch, Challenge, Change skill taught in Phase 2, Class 2.**

II. **Ask the class to think about triggers/incidents that upset them over the past week.**

A. Ask a volunteer to share a situation in which he/she handled a challenging situation well (he/she felt good about it).

1. Break the situation down in terms of how he/she Caught, Challenged and Changed the behavior.
2. Celebrate the good outcome!

B. Next, ask for a volunteer to share a situation that he/she felt badly about how he/she handled.

1. Break the situation down by talking about how he/she was not able to Catch, Challenge or Change the behavior.
2. Problem-solve as a group how the person could handle the situation differently in the future.
III. **Review the Time-Out Process taught in Phase 2, Class 2, including the rationale and steps.**

A. Solicit feedback from the class as to whether/how they have used this technique.
   - What worked well? What challenges did they encounter?
   - Problem solve as a class how to address obstacles that arose to using the skill.

B. Ask for a volunteer dyad to role-play the time-out process for the class. Ask them to be actors in this situation.
   1. Coach them to start discussing a challenging issue, and then begin to escalate.
   2. Take a “break” in the action when you notice tensions rising. Ask each member of the dyad to identify what is occurring in their thinking, emotions, and body. Decide who will be the person to take the Time-Out.
   3. Resume “action” and have the dyad model the Time-Out Process, including returning later to discuss.
   4. Thank the volunteers for the role play.
   5. Discuss as a large group what you noticed, what challenges arose, and how they can remember to use this in their daily lives.

III. **Summarize the group’s discussion. Invite them to practice the 3C’s and the Time-Out process this month.**
IV. Part 3: Group problem-solving (approximately 35 minutes).

Go back to list of this month's problems/challenges listed on the board, and take a group vote on which problem they would like to work on this month. Be sure that both family members who “own” the problem are willing to allow us to help them with solving this problem.

Distribute copies of the handouts from Phase 2 “REACH Program Problem-Solving Worksheet” and OPRAH skills. Then, proceed with problem solving using the standard format we presented in Phase II class 6. Have one member of the dyad who “owns” the problem complete the worksheet.

After completing problem solving, thank the students for participating in this evening’s class. Ask the family that owns the problem to send the worksheet back to the REACH office or drop it off for REACH staff. Given them a self-addressed stamped envelope.

Review the logistics and schedule for next Phase III class, and encourage them to attend. Encourage them to try out the problem-solving process with a problem at home!

Therapist Note: When you receive the Problem-Solving worksheet from the family, call them to discuss it. Celebrate what went well, and problem solve with them about challenges that arose and/or next steps.
You have control over HOW you choose to respond to the various challenges that come your way in life. No one “pushes your buttons.” You have ultimate control over your switches. What you say to yourself plays a big role in how you respond.

Anger, the emotion, is NOT bad or wrong. It's simply part of being human. Anger, misdirected or used to harm others, can cause problems. People who are angry “all the time” are more likely to have problems communicating with other people, more physical health problems, poor self-esteem, and distant relationships.

Discuss issues at a calm time and practice anger-management techniques (see handout, "Anger Management – Time-Out Process"). Post the handout on your fridge. Practice, practice, practice!

Violence of any kind (emotional, physical, sexual, financial, etc.) is never OK. Even if someone has severe PTSD, that does NOT make it OK for him/her to hurt another person.
GOAL: To help you feel more in control of your emotions by taking time to think through how you want to respond to an event, rather than just reacting quickly in rage. The goal is to learn to manage your anger in a healthy way - not to eliminate it! This approach empowers you to make different choices.

The skill is the 3Cs: Catch, Challenge, and Change.

**Catch** yourself when becoming angry as quickly as possible (this is sometimes the toughest step!)

It’s important to catch yourself just before or just as you are heading into a situation. As you practice, you can recognize the anger earlier and earlier.

How can you **catch yourself at lowest level**?

- Be aware of the physical changes in your body, such as increased heart rate, raised blood pressure, sweaty palms, clinched fist, clenched jaw, churning stomach, feeling your face get hot and red, eyebrow twitches, and tight muscles.
- If you aren’t aware of your own symptoms, ask people who know you well. They may know your anger signs better than you do!

**Challenge** the anger itself to get under control, and prevent yourself from doing something you will later regret.

Ask yourself:

- Is this situation worth my getting so upset about?
- If I act out my anger, will it be helpful? Will I be proud of myself tomorrow?
- Is this the right thing to do?
- Is this the kind of man/woman/husband/wife/partner I want to be?
- What is the cost if I “let it rip?” Is this situation worth going to jail over?

Remember: if your “gut feeling” says that the behavior you’re immediately tempted to do may not be a good decision…YOU take charge of yourself. Only you have the power to decide how to respond to the situation. You’re in control!
Change your behavior.

Now that you’ve “caught” yourself feeling angry and have “challenged” yourself to respond differently, you have the power to CHANGE your response.

You can change in several ways:

- **Change your behavior:** Instead of speeding up after the driver who cut you off in traffic, take a deep breath and remember that he/she is not worth ruining your day over!
- **Change by getting away:** Instead of yelling at the kids, go to the living room and sit down for a few minutes.
- **Change your mind/attitude:** Rather than criticizing your wife, decide to be the “bigger person,” and don’t say anything at all when you’re really angry.
- **Change what you are doing:** If you find that you often get angry with the rude salespeople and big crowds at busy stores, choose to go elsewhere or pick a quieter time.

**Helpful Tips on Using Catch, Challenge, Change**

- The 3Cs are simple, but challenging. It takes practice to learn and use a new skill. As with trying to break other habits, changing how you deal with your anger takes time and effort, but you can do it.
- With practice, you will have freedom, more choices, and more control over yourself. You will also probably feel better about yourself and have fewer regrets/guilt. Others may also enjoy spending time with you more as you improve.
- However, no one can do this for you! You have to want to change and make a commitment to use the skill.

**YOU are in Control of What You Say to Yourself!**

You can try out new ways of thinking to help feel in control. Changing how you talk to yourself (your self-talk) can be very helpful in keeping your cool. Here are some examples of helpful self talk you can use in anger-provoking situations:

- Although I cannot change/control him/her, I am in control of my behavior. No one else can “push my buttons.”
- I can decide what I will do before I get in a situation.
- While I am calm, I can think clearly.
- CATCH, CHALLENGE and CHANGE.
- I will not let him/her control my emotions; I will take charge of me.
- I will cooperate with him and be kind; I choose not to argue. I am going to “kill the enemy with kindness”; I am going to be the ‘bigger person.’
- Stop, take a deep breath, and calm down; I can make reasonable decisions.
- I can walk away if I feel out of control.
**Time-out Process**

**Why?** The goal of a time-out is to prevent an argument from escalating/getting out of control to the point that either of you later regret your words/behavior. Use of the time-out procedure is good for each person, their relationship, and children/others in the home.

**Who?** Time-outs are helpful to use in relationships that you want to maintain. You would not use them with people with whom you have not already discussed the use of the procedure.

**When?** Either partner can call a time out for him/herself if a discussion/argument is starting to feel out of control. You would never tell someone else to “go take a time out!”

Remember: Most people cannot think clearly when angry, so postponing the discussion until a time when both people are calmer is often helpful. As opposed to the old saying, it really IS ok to go to bed angry if you will be able to talk about the issue more effectively the next day!

**VERY IMPORTANT:** You need to discuss the time-out process with the other person at a calm time.

**Key points to discuss:**

1. Mutually agreed upon a signal for use to signal a time-out. It’s best to have a verbal and nonverbal (hand signal) way of communicating that you need to take a time-out.

2. When someone calls a time-out, the discussion ends immediately. It is not helpful to persist in trying to get in the last word.

3. The person who called the time-out physically removes him/herself from the room. The partner will not follow the person who is taking the time-out.

4. Before leaving for your time-out, you need to tell the other person:
   a. What you are going to do
   b. Where you are going (e.g., next room, for a drive, to friend's house, etc.)
   c. When you'll be back (certain number of minutes/hours)
**While taking the time-out**

It is not helpful to obsess about how angry you feel at the other person during this time…or to call someone else and vent about how “wronged” you have been.

Also, do not send text messages, call, or email the other person during the time-out. Posting unkind messages about the other person on Facebook or other social media is also strongly discouraged.

Rather, each person has two tasks during the time-out:

1. Do some activity that is calming for you.
2. Brainstorm possible solutions to the problem. Strive to consider the other’s perspective/feelings and what YOU can do to improve the situation.

**Upon returning to discuss:**

1. The person who called the time-out approaches his/her partner (preferably within a few hours – but definitely within 24 hours) with KINDNESS. You may choose to apologize, express affection (hug/kiss), or express hopefulness (“let’s try this again”…”we can do better this time’). Remember Dr. Gottman’s “softened start-up” research that shows how you START a conversation has a big impact on how it goes.

2. Each person presents his/her solution to the problem, and the other person listens without interrupting.

3. Both people focus on aspects of the solution that will work (rather than focusing on what won’t work).

4. Together, choose parts of both solutions that will make both parties happy.

**Note:** If tempers rise and another argument is brewing, take another time out!
I. **Review the “I” message skill taught in Phase 2.**

“In Phase 2, we talked a lot about the importance of developing and using healthy communication skills. In particular, the “I” message skill can help an individual give feedback without criticizing the other person. As part of this, the speaker needs to identify his/her emotions about a situation and consider what he/she would like from the family member.”

A. Write on the board:

<table>
<thead>
<tr>
<th>When you _______ , I feel ________________ .</th>
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<tbody>
<tr>
<td>In the future, I would appreciate __________ .</td>
</tr>
</tbody>
</table>

B. Discuss how they have been able to use this skill at home to communicate feelings, talk about problems, etc. Also emphasize the importance of approaching each other respectfully/kindly (softened startup).

C. Distribute the handout “I” Messages, Part 2.
   Ask class members to answer a few of the questions in each section.
II. **Review the speaker-listener technique**

A. Engage the class in discussion of if/how they have used this technique. Do they still have the floor ("carpet") we provided, and do they use it?

B. Using the “I” message, Part 2 worksheet they just completed, have them practice this technique in class. Use the coaching procedure outlined in Phase 2.

C. Discuss as a large group how the practicing went, and how they can use this technique in their daily lives. Encourage them to set aside some time each week to use this technique.

III. **Part 3: Group problem-solving** (approximately 35 minutes).

Go back to list of this month’s problems/challenges listed on the board and take a group vote on which problem they would like to work on this month. Be sure that both family members who “own” the problem are willing to allow us to help them with solving this problem.

Distribute copies of the handouts from Phase 2 “REACH Program Problem Solving Worksheet” and “OPRAH” skills. Then, proceed with problem solving using the standard format we presented in Phase II class 6. Have one member of the dyad who “owns” the problem complete the worksheet.

After completing problem solving, thank the students for participating in this evening’s class. Ask the family that owns the problem to send the worksheet back to the REACH office or drop it off for REACH staff. Given them a self-addressed stamped envelope.

Review the logistics and schedule for next Phase III class, and encourage them to attend. Encourage them to try out the problem-solving process with a problem at home!

*Therapist Note: When you receive the Problem-Solving worksheet from the family, call them to discuss it. Celebrate what went well, and problem solve with them about challenges that arose and/or next steps.*
Effective communication in families is very important! When all family members minimize criticism and strong expressions of negative emotion, the relationship/house feels calmer and more peaceful for everyone!

How you approach your family member makes a big difference in how you are received. Remember and practice the “I” messages – speak from your own experience! Also, remember Dr. Gottman’s “softened start up” approach...starting the conversation quietly and respectfully helps every time!

Strive to use ASSERTIVE (rather than aggressive or passive) communication. Remember that assertive communication is HARD (honest, appropriate, respectful and direct).

Listening to another person totally—without judgment, interruption or sarcasm—is a real gift! The “speaker listener” technique we practiced tonight can be very helpful – especially when discussing sensitive matters. Remember that listening requires MUCH more than simply hearing.
“I” Messages, Part 2

I MESSAGE: Expressing Appreciation

WHEN YOU ___________ I FEEL ________________.

Example: When YOU called me because you were running late, I FELT relieved.

1. When you ____________________________, I feel proud of you.
2. When you ____________________________, I feel happy.
3. When you ____________________________, I feel excited.
4. When you ____________________________, I feel loved and close to you.
5. When you ____________________________, I feel ________________
6. When you ____________________________, I feel ________________

Be specific!

I MESSAGE: Asking for Change

WHEN YOU _______ I FEEL ____________________.

IN THE FUTURE, I WOULD APPRECIATE: ______________________________

Example: When YOU yelled at the waitress at the restaurant because your meal was cold, I FELT embarrassed. In the future, I would appreciate if you could be more respectful.

1. When you ____________________________, I feel hurt.
   In the future, I would appreciate ______________________________
2. When you ____________________________, I feel scared.
   In the future, I would appreciate ______________________________
3. When you ____________________________, I feel worried.
   In the future, I would appreciate ______________________________
4. When you ____________________________, I feel angry.
   In the future, I would appreciate ______________________________
5. When you ____________________________, I feel confused.
   In the future, I would appreciate ______________________________
6. When you ____________________________, I feel sad.
   In the future, I would appreciate ______________________________
7. When you ____________________________, I feel ______
   In the future, I would appreciate ______________________________