Social Skills Training for Serious Mental Illness (SST): Overview of the Intervention

Prepared by the
VA Psychosocial Rehabilitation Training Program
The VA Psychosocial Rehabilitation Training Program (VA PRT)

• This presentation was produced by the VA PRT. The VA PRT provides training, support, and consultation to VA practitioners and MH leaders working with Veterans with serious mental illness.

• Current focus of the VA PRT is on the nationwide VA roll-out of clinician training for Social Skills Training for Serious Mental Illness (SST).

• The VA SST Clinician Training program involves: Required Readings, Didactic course, Experiential Learning Session, Consultation Orientation Session and 6 months of consultation.

• The VA SST program also includes a Train the Trainer program where SST Regional Master Trainers are trained to provide trainings in their VISNs

• Presentation today is an overview of the intervention intended for mental health trainees.
Important Notice

- Review of this PowerPoint is **not** sufficient training or experience for you to be able to lead Social Skills Training groups or individual sessions.
Learning Objectives

You will be able to:

1. Explain why SST is important to VHA
2. Define social skills
3. Outline the components of an individual goal setting session
4. Define the Recovery Model of Care and how it ties to SST
5. Discuss socially-related S.M.A.R.T. goals for Veterans
6. Discuss the importance of relevant goals for SST participation
7. Outline the steps used in the SST model
8. Describe important teaching strategies
9. Explain logistical considerations in an SST group
10. Summarize common challenges in SST groups
11. Become familiar with the Social Skills Group Observation Checklist
Research: Social Skills Training for Individuals with Serious Mental Illness

Meta-analysis of Controlled Research on SST (Kurtz & Mueser, 2008)
- Significant improvement in behavioral measures of social skills
- Moderate but significant improvement in social functioning

Identified as an Evidence-Based Practice (Dixon, et. al, 2010)
- “Individuals with schizophrenia who have deficits in skills that are needed for everyday activities should be offered skills training in order to improve social interactions, independent living, and other outcomes that have clear relevance to community functioning.” p. 51
SST in the VA

• Designed for Veterans with a primary diagnosis of:
  • Schizophrenia
  • Schizoaffective disorder
  • Bipolar disorder
  • Treatment refractory depression (with social skill development as an area of growth)

• VHA mandates Veterans have access to SST, per the Uniform Mental Health Services Handbook (2008)
  • Psychosocial Rehabilitation and Recovery Centers (PRRCs)
  • VA Medical Centers (VAMCs)
  • Very Large Community Based Outpatient Clinics (CBOCs)
VA-SST Model

Recovery is “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.”

• Substance Abuse and Mental Health Services Administration (SAMHSA)
So, What Are Social Skills?

“Social skills are interpersonal behaviors that are normative and/or socially sanctioned. They include such things as dress and behavior codes, rules about what to say and not to say, and stylistic guidelines about the expression of affect, social reinforcement, interpersonal distance, and so forth.”

Bellack et al, 2004, Page 3
SST Promotes Recovery

Components of Recovery Addressed in SST:

- Hope
- Person-Driven
- Holistic
- Peer Support
- Relational
- Culture
- Strengths / Responsibility
- Respect
- Recovery

www.SAMSHA.gov/recovery
Behavioral Components of Social Skills

• Speech Content

• Paralinguistic Features
  • voice volume
  • pace
  • pitch
  • tone

• Nonverbal Behavior
  • proxemics (personal space)
  • kinesics (body language)
  • gaze
  • facial expression
Key Components of SST

1. Individual session for engagement, orientation, goal setting

2. Group sessions for teaching specific skills
Benefits of Individual Goal Setting Session

- Establishes rapport, engagement
- Prepares Veteran for group sessions
- Links SST to recovery
- Allows collaboration in setting SST goal, which is useful for:
  - Constructing curriculum
  - Setting up meaningful role plays
  - Developing outside practice assignments
  - Tracking Veteran progress in SST groups
Components of an Individual Goal Setting Session

- Provide Overview of SST Groups
- Obtain informed consent for participation in SST
- Review components of recovery
- Review 4 quality of life domains and select most important
- Together, identify a long-term goal and a SST goal
Components of Individual Sessions: Provide Overview of SST Groups

- Introduce group leaders
- Purpose of groups
  - SST focuses on skill practice
  - SST will help Veterans move toward recovery goals
- Discuss group format
  - Outside practice review, skill introduction, role plays, feedback, outside practice
  - Emphasis on role plays
  - The role of positive feedback
  - Importance of outside practice
- Discuss group expectations
Components of Individual Sessions: Recovery and SST

- Hope
- Self-respect
- Empowerment
- Holistic
- Non-linear
- Strengths
Guideline for Individual Sessions: Quality of Life Domains for SST

- Interpersonal Relationships
- Treatment Services
- Community Participation / Engagement
- Well-Being
Collaborative process

Sources:
  - Veteran’s Quality of Life Domains
  - Providers, Others

Improving interactions with others
Components of an Individual Session: Identify Long-Term Goal and SST Goal
Components of an Individual Session: Examples of Short-Term and Long-Term Socially-Related Goals

<table>
<thead>
<tr>
<th>Short-term for SST Group</th>
<th>Long-term</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interview for a job in a restaurant in the next 3 months</td>
<td>Obtain full-time employment</td>
</tr>
<tr>
<td>Start a conversation with a new person each week for the duration of the SST group</td>
<td>Make a new friend</td>
</tr>
<tr>
<td>Ask someone on a date in the next three months</td>
<td>Get a girlfriend/boyfriend</td>
</tr>
<tr>
<td>Attend appointments with building managers to tour three different apartments before the end of SST group</td>
<td>Move into independent housing</td>
</tr>
<tr>
<td>Find a work-out buddy I can meet with 1-2 times a week by the end of SST group</td>
<td>Have a healthy Body Mass Index</td>
</tr>
</tbody>
</table>
Components of Individual Sessions: Breaking Goals Down into Steps

- Long-term (Meaningful) Goal: I will obtain a full-time paying job
- Goal for end of the SST group: I will find a part-time volunteer job.
- Steps for achieving goal:
  1. Attend SST group biweekly and practice skills taught in group, including Interviewing Skills.
  2. Research and prepare a list of possible volunteer locations. Decide which volunteer locations seem most promising.
  3. Prepare a list of questions for a volunteer coordinator.
  4. Contact volunteer coordinator and ask questions from list about opportunities.
  5. Prepare for volunteer interviews (if required) by practicing mock interviews with case manager and then attend the interviews.
Selecting a Curriculum

- Similar goals among Veterans
- Identify skills that can help most (or all) of your group members to achieve their goals
- Assist group members in identifying role play scenarios related to their goals
Monitoring goals is important to:

- Measure progress
- Inform when to modify goal(s)
- Clarify when Veteran completes group
Points to Remember: Individual Goal Setting Sessions

- Critical component of VA SST Model
- Build rapport
- Obtain informed consent
- Orient Veterans to SST
- Help them develop recovery goals for SST
Key Components of SST

1. Individual session for engagement, orientation, goal setting

2. Group sessions for teaching specific skills
Characteristics of SST

• Positivity of SST
• Skills-based
• Consistent agenda / Structured sequence
Positivity

SST sessions are:
- FUN!!!!
- Filled with laughter, applause
- Affirming and supportive
- Focus on success
- Have high levels of Veteran involvement
- Positive for clinicians and Veterans!
- Helps Veterans move toward important goals
Skills-Based

A new skill each week/session

• 4 Basic Skills:
  • 1. Listening to Others
  • 2. Making Requests
  • 3. Expressing Pleasant Feelings
  • 4. Expressing Unpleasant Feelings

• 9 Categories of Skills
SST Curriculum: 9 Basic Categories

1. Basic skills
2. Conversation
3. Assertiveness
4. Conflict management
5. Communal living
6. Friendship and dating
7. Health maintenance / communicating with providers
8. Vocational / work
9. Coping skills for drug and alcohol use
Consistent Agenda/Structured Sequence

• Same basic agenda each session:
  - Outside practice review
  - Skill practice
  - Outside practice planning

• Same multi-step structured sequence every session
Format of Teaching a Social Skill

Welcome and set agenda

1. Review outside practice assignments (for sessions other than the first session)
2. Establish a rationale for the skill
3. Briefly have members share a relevant experience or rationale
4. Explain the steps of the skill
5. Model the skill; review with members
6. Have a group member role play
7. Elicit and provide positive, then constructive feedback
8. Have the member role play again
9. Elicit and provide positive, then constructive feedback
10. Repeat role play again and elicit/provide positive feedback
11. Repeat Steps 6-10 with each group member
12. Develop outside practice assignments
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Training Procedures

In Session
1. Instructions
2. Modeling
3. Role Plays
4. Repetition of Role Plays for Overlearning
5. Positive Feedback
6. Shaping

Out of Session
Outside Practice to generalize skills taught in session
Training Procedures: Modeling

- Demonstrate doing the steps of the skill
- Group members asked to observe the leader
- Group members give positive feedback on model
Training Procedures: Role Playing

• Brief and focused on steps
• Lively and focused on individualized goals
• Use same scenario for all role plays
• 3rd time is the charm!
Training Procedures: Feedback

- Specific and behavioral
- Focused on positives
- Corrective feedback framed as “one thing that might make your next role play even better…”
Training Procedures: Shaping

- Reinforcement of successive steps toward a desired goal
- Skills are broken down into smaller steps
- At least three role plays of a skill
- Improvement of social skills with positive and corrective feedback
Training Procedures: Outside Practice

- Individual, specific plan
- Relevant to goal
- Use of practice sheets is helpful
Supplemental Teaching Strategies

1. Supplementary Modeling – taking the role of the Veteran
2. Discrimination Modeling – showing differences between good and poor examples
3. Coaching – giving verbal prompts
4. Prompting – giving non-verbal signals
Group Room Layout

- Board with Skill Title and Steps
- Seats for facilitators to introduce and model skill and for Veteran and role play buddy (role playing)
- Group Members
Logistical Considerations

• Allow for some flexibility with:
  • Setting
    • Outpatient, inpatient, PRRC, MHICM, Domiciliary, Telehealth (in development)
  • Group Composition: Open or Closed
  • Size of groups: 6 – 10 Veterans
  • Length and frequency of Sessions: Usually 60 to 90 minutes, 2 to 3 times a week
  • Co-therapists preferred but not required
  • Curriculum
    • Can be pre-defined for Veterans with similar goals
    • Veterans with different goals
• Length of Group
  • Curriculum
  • Setting
Common Challenges

1. Reluctance to role play
2. Group member providing negative comments
3. Group member not participating
4. Varying skill levels in group members
5. Group member demonstrating difficulty staying on topic
6. Difficulty choosing a role play scenario
Common Challenges: Reluctance to Role Play

- Observe others before role playing
- Try one or two steps before doing the entire skill
- Role play from their seat
- Elucidate the value of a particular skill
Common Challenges: Group Member Provides Negative Comments

- Develop group expectations
- Remind group to start with positive feedback after role plays
- Rephrase critical comments into constructive feedback
Common Challenges: Group Member Not Participating

- Encourage the Veteran
- Call on the Veteran specifically by name
- Keep the group sessions lively and animated
- “Assign” the Veteran to provide feedback on a specific step of a role play
Skillful
- Encourage the use of skills and feedback to other group members
- Ask the Veteran to help model the skill
- Use more complex role play scenarios

Difficulty completing a skill
- Encourage completing one or two steps at a time
- Write out Veteran’s words and use as a visual prompt
- Draw on Supplemental teaching strategies
Common Challenges:
Group Members Demonstrating Difficulty Staying on Topic

• Acknowledge and redirect back to the group
• Use the agenda or group expectations to get back on track
• Acknowledge and encourage them to speak with you after group / another forum
• Practice a role play scenario related to the topic being discussed
• Post “Group Expectations” or provide as handouts
Common Challenges: Difficulty Choosing a Role Play Scenario

• Encourage the Veteran to think of a scenario related to their goal
• Encourage the Veteran to think of a scenario that can be also used for outside practice
• Make a simple suggestion
SST Group Observation Checklist

GROUP LEADER: ________________________  DATE: __________

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CONTINUED
Resources for SST


• Presentation Citations:
  • Uniform Mental Health Services Handbook: 
  • VISN 5 MIRECC: 
    [www.mirecc.va.gov/visn5/training/social_skills.asp](www.mirecc.va.gov/visn5/training/social_skills.asp)
  • SAMHSA Recovery: [www.samhsa.gov/recovery](www.samhsa.gov/recovery)
Course Summary

1. Explain why SST is important to VHA
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End of Presentation

- VA Staff interested in the VA SST Clinician Training Program can find more details about the program on the VISN 5 MIRECC website: www.mirecc.va.gov/visn5/training/social_skills.asp
- Thank you!