Setting Up for Success: How Avoid Common SST Pitfalls

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Today’s Agenda

1. Review SST case studies
2. Identify common pitfalls SST group leaders encounter
3. Discuss possible solutions
4. Explain the logic behind the solutions
Common Pitfalls in SST

• Accepting overly complex or inappropriate roleplay scenarios
• Allowing veterans not to roleplay
• Arguing or debating with veterans
• Not holding to group expectations
• Not stopping the roleplay when needed
• Roleplaying yourself
• Vague homework instructions
Scenario #1

GL: So those are the steps for Disagreeing with Another’s Opinion without Arguing. Any questions before we begin the roleplays?

V: That’s stupid. No one really talks like that. That’s not how I’d handle it.

GL: Those are the steps so right now you have to do it this way.
Scenario #1 Pitfall

• Pitfall: Arguing or Debating

• Veterans have the right to ask questions about their treatment

• Reacting negatively to questions tells Veterans they aren’t welcome

BUT

• You don’t want to impact other Veterans’ right to receive care by getting derailed with debating
Scenario #1 Response

• Possible Response: Clarify the purpose and move on

• “We certainly aren’t suggesting that this is the only way to talk to people. The skills you learn in SST are meant to be used with people you want to keep a good relationship with, and using these steps helps with that. But as people get more comfortable with the skills they can tailor what they say to “make it their own.” If you have more in-depth questions I’m happy to talk about it after group.”
Scenario #2

GL: You haven’t done a roleplay yet. How about you take a turn today?

V: No way. Nope.

GL: Ok. Anyone else willing to roleplay?
Scenario #2 Pitfall

• Pitfall: Allowing Veterans not to roleplay; Not holding to group expectations

• Veterans won’t fully benefit from SST if they don’t roleplay and it’s not fair to other group members who put themselves out there.

• Allowing one person to avoid roleplays can encourage others to refuse.
Scenario #2 Response

- Possible Response: Explore, support, set expectations

- “Is there a reason you don’t want to roleplay?”

- Start by affirming: “We’re all here to support each other as we practice these skills. Everyone wants you to succeed.”

- Uncomfortable at front of the room/with everyone staring at them: “You don’t have to come to the front of the room. Let’s do the roleplay right where you’re sitting and I’ll sit next to you.”
Scenario #2 Response cont.

- **Power struggle**: “I know it can make people feel anxious to do the roleplays but being in this group means you have to take turns doing roleplays. [Address other Veterans] Can you all give Gary some encouragement to try it out?”

- **Unspecified but insistent**: “I’ll sit next to you and we can just do one roleplay. We can work up to doing three roleplays next time.”

- **Absolutely refuses**: “Ok. I would like you to commit to doing a roleplay next week. Let’s you and I talk about the roleplays after group today.”
Scenario #3

GL: Now we’re going to practice Entering into an Ongoing Conversation. What scene are we going to roleplay?

V: I’m here at the PRRC and you and my case manager, Francis, are talking and I want to join the conversation. You play you and we’ll pretend Francis is standing there.

GL: Ok, let’s begin.
Scenario #3 Pitfall

- Pitfall: Roleplaying yourself
  - Just don’t do it.
  - This can lead to confusion or inappropriate/unprofessional roleplays
#3 Further Consideration

- Possible pitfall: Only roleplaying in VA settings

- The goal of SST is to help veterans practice skills for everyday life, to strengthen and expand their social support networks.

- Obviously there are exceptions, like Health Maintenance Skills, that may be best roleplayed in VA settings.
Scenario #3 Response

• Possible Response: Explain and redirect

• “This is a roleplay so I have to pretend to be someone else. I could pretend to be [make suggestion].”

• “Ok, that’s a good example, but we want you to practice these skills here so you can be ready to use them in your day-to-day life, like when you’ll do the homework later this week. What’s a situation where you could use this skill outside the VA?”
Scenario #4

*(roleplay for Responding to Untrue Accusations)*

GL: I think you stole my clothes out of the communal dryer.

V: Are you kidding me? I would never do that! You’re a liar! If you want to spread lies about me then I’ll tell the house manager you’ve been sneaking drugs in here.

GL: You have to give me back my clothes.

V: I don’t have to do anything! You’re a liar and a drug addict and if you ever accuse me of being a thief again I’ll punch you!

GL: I think you took my clothes.
Scenario #4 Pitfall

• Pitfall: Not stopping the roleplay when needed

• We give you permission to stop roleplays!

• There are many reasons you may need to halt a roleplay.
  • The person has completely deviated from the steps of the skill.
  • The person is verbally wandering with no roleplay end in sight.
  • The person is saying things that are inappropriate, traumatic, or confidential.
  • The person is confused or unsure how to proceed.

• Don’t leave Veterans out to dry. Stop the roleplay and help them try again more successfully.
Scenario #4 Response

• Possible Response: Stop and restructure the roleplay

• “I’m going to stop you there.”

• After halting the roleplay, generally you should proceed as if it ended normally. Give positive feedback then address the issue.

• “When we do these Health Maintenance skills I want you to make up medications and symptoms. Your health care is between you and your providers so I want to respect that.”

• “Did you notice we got a little off track from the steps? For this next roleplay I’d like you to focus on doing each step of the skill and then ending the roleplay.”
#4 Further Consideration

- Preventing the need to stop

- Before all Health Maintenance skills, clarify that people should not use their real physical or mental health information.

- For Conversation skills or Compromise and Negotiation, Veterans may need to ‘think on their feet’ to come up with compromises or conversation topics.

  - Depending on symptoms, medication side effects, or stage fright, this may be hard.

  - Before the roleplay, ask the Veteran what they will talk about or what compromise they will suggest.
Scenario #5

GL: For the roleplay, what is an example from your life of a situation where you can practice Compromise and Negotiation?

V: Mmmmmh... My mom thinks I should take a job at my uncle’s business. He can give me a full time job but first I’d have to get my CDL, which is going to take some time and money, and I’d rather just start working and save my money. I also have a job offer for a fork lift driver position, which I’d like more, but she doesn’t want me to do that because it’s only a part time job. I don’t know what to do. I mean, I know I want to take the fork lift job but I know my mom wants what’s best for me so I don’t want to ignore her, you know. We can roleplay that and figure out a compromise.

GL: Ok, I’ll pretend to be your mom. Let’s start.
Scenario #5 Pitfall

• Pitfall: Accepting overly complex or inappropriate roleplay scenarios

• This is the #1 SST pitfall. Picking manageable roleplays sets you and the Veteran up for success.

• Ask yourself:
  • Can this scene be roleplayed in a few minutes?
  • Can I envision how the Veteran can successfully apply the steps?
  • Is this roleplay more appropriate to a different skill?
  • Is this emotionally fraught?
Scenario #5 Response

• Possible Response: Clarify what makes a good roleplay

• Time: “That sounds like a pretty complex issue. We have to keep the roleplays brief so let’s think of a simpler situation.”

• Direction: “For step 4 you have to suggest a compromise. Do you know what compromise you are going to suggest?”

• Appropriateness: “It sounds like you know what you want to do, it’s just that your mom doesn’t agree. This is better for a skill like Responding to Unwanted Advice or Disagreeing with Another’s Opinion without Arguing.”

• Emotions: “I can tell this is causing you a lot of stress. This should be fun so let’s pick a roleplay that’s not so intense and just practice doing the steps.”
Scenario #6

GL: For your homework, I want you all to practice Asking for Help this week. Do you think you can do that?

V: Yes. I’ll try.

GL: Great. I’ll see you next session.
Scenario #6 Pitfall

• Pitfall: Vague homework that isn’t likely to be done

• You may not have time. That’s ok!

• BUT, if you do...

• The more concrete the plan, the more likely people are to execute it.

• If the Veteran says they don’t go anywhere or talk to other people, encourage them to use homework as a reason to do so.
Scenario #6 Response

• **Possible Response:** Probe for people, place, time, activity

• “Who could you practice this skill with, by asking for help?”

• “Will you see them in the next week/before the next session?” or “When will you see that person next?”

• “Where will you be in the next week that you could practice asking for help?”

• “What could you ask for help with?”

• **Recap:** “Ok, so you’ve decided you are going to practice asking for help by asking your sister to show you how to do laundry when you see her this Wednesday.”
Any Questions?