

# Developing Psychological Wellness, Coping Ability, and Resilience: A Guidebook for Peer-Led Peer-Groups to Facilitate Human Change

Carl V. Rabstejnek, P.E., M.B.A., Ph.D.

---

## Introduction

*This program evolved from a standup presentation by me to a guidebook that could effectively be used by groups of lay people in order to effectively develop coping skills and resilience — without requiring intervention by psychologists or “certified” apostles selling well-marketed programs.*

A general description of the manuals and material is linked by:

[Psychological Wellness: Guidebooks for Individual Initiative<sup>1</sup>](#)

---

## Development

Human change can be accomplished inexpensively by committing personal time and effort to self-help—facilitated within a group setting. While the material included in the [Guidebook](#)<sup>1</sup> is sufficient for individual study, a peer-group process is recommended. The group’s Interpersonal activity helps to sustain ongoing motivation and provides opportunities to express one’s own ideas and to listen to colleagues interpretation of the same material. Each of us has different needs and processes information differently. Individual uniqueness is why the publication is called a guidebook and not a workbook, encapsulated in the phrases: “**people are different**” and “**one-size-does-not-fit all.**”

This material grew out of a presentation on coping with unemployment done during the recession in the early part of the 21<sup>st</sup> century. Having recently received my Ph.D. in Clinical Psychology, I explored the academic literature to find methods that were empirically supported and, most important, conformed to the age old edict *primum non nocere* — first, do no harm. This dictum is critical because many popular and aggressively promoted hazards, for a time (even centuries), were broadly supported and proselytized. Much that was believed stemmed from dated concepts of the human condition, anatomy, physiology, and self-interest in economic benefits to “certified” agents.

Rather than me standing in front of a group and projecting overhead transparencies and talking, with the audience dutifully taking notes, I felt it would be better to print a booklet that described the essential elements of theory and methods. Attendance at 60 hours every two years at psychiatry grand rounds and workshops is a requirement for me to maintain my psychologist-doctorate license. Therefore, I am well aware of good, bad, and indifferent presentations; and omnipresent PowerPoint® slides. Sometimes handouts with copies of presenter’s slides are distributed. Usually their truncated information lack the clarity of coherent, complete, grammatically correct sentences.

Although the *Guidebook* can be used in a self-study mode, it is readily adaptable and desirable to use it in peer-groups that enhance understanding and change with benefits of interpersonal processes.

A change process takes place against a background of the culture in which it operates. This material was introduced at the beginning of the 21<sup>st</sup> century when the dependency theories and methods of the 20<sup>th</sup> century began to wane, particularly after 9-11-2001. The following three essays were written to set the stage in the early 2000's to save time in answering background questions, when time was limited. I realized that dependency expectations remained, even though the prevailing culture has demonstrated resilience after The World Trade Center, Virginia Tech shooting, and Boston Marathon. There remains many people that still have a vested interest in perpetuating their vocation.

---

---

## The Three Essays

### Resilience

When I started presenting the material from earlier editions of the *Guidebook*—early in the 21<sup>st</sup> century—the late-20<sup>th</sup> century *Zeitgeist* interfered with acceptance of the ideas presented. We exited the last century with an expectation that all “normal” people were devastated by untoward events and needed *professional* help. Psychology’s mainstream followed a medical model that focused on pathology and not health. While a more hopeful view of mankind had a peripheral following, the academic birth of positive psychology can be traced to [Seligman and Csikszentmihalyi’s article](#)<sup>2</sup> on the subject appearing in the January 2000 issue of the *American Psychologist*, introducing a special issue of the journal. Scholarship alone does not sway public attitudes and external events contribute to a new understanding. The aftermath of the nine-eleven disaster was so overwhelmed with a bevy of counselors, such that scholarly researchers studied the New York City area population and found widespread resilience. This basic change was elaborated in my short (831 words) single page essay, available free on my Website, “[A Wind Shift Toward Positive Psychology and Adult Resilience](#).”<sup>3</sup>

### The Zeitgeist

Consistent with the belief in the universal vulnerability of human beings, several approaches were offered to deal with misfortune that supported lucrative and aggressive “help” organizations. The most popularized have *certification* programs (*by the promoter and not an independent agency, as the state*) for devotees who paid substantial amounts to become edified in the proper approach, said to be beyond the unwashed. Founders and apostles evangelized through their house organs and aggressively attacked those who published limitations of the method. Aggressive marketing included self-published “refereed” journals, a fraternity of disciples, owned book publishers, major conferences, expert traveling lecturers, and an army of believers, having membership benefits. While methods have been found detrimental over the ages, it is only within this 21<sup>st</sup> century that scholars have systematically evaluated what Lilienfeld (2007)<sup>4</sup> calls potentially harmful therapies (PHTs); his extensive 14½ page journal article, plus four pages of references, extensively covers ten popular interventions that cause potential harm and an additional two that may adversely affect some recipients. Lilienfeld, Lynn, and Lohr (2003)<sup>5</sup> earlier wrote an extensive textbook on the subject. I wrote a short one-page, 865-words essay, titled “[The Zeitgeist and the Presentation of Ideas](#).”<sup>6</sup> on four once well-accepted “cures,” that were later found to be detrimental, at least for some persons. It has vignettes on approaches that were adopted for centuries and shorter periods of time; namely bloodletting, lobotomies, recovered memories, and [Critical Incident Stress Debriefing](#) (CISD).<sup>7</sup>

### Cognitive Change

Taking into account that the environment needs to be receptive to “new” knowledge that most people have strengths and are not doomed to dependency upon professional counselors and therapists for their well-being, information can be provided that *may be* accepted by the motivated. True, some might need and benefit from *professional* intervention. It would be beneficial to all concerned if limited resources were applied to where they are most needed and can do the most good. The above paragraph discusses drawbacks to allowing proliferation of potentially harmful, well-marketed interventions that sap our resources. There are several methods that show promise for people to *adapt to their own needs*. Cookbook solutions with limited successes, but applied willy-nilly, were shown to adversely affect some individuals. Therefore, the individual is better served by providing background information and allowing the person (I use person to imply uniqueness and people to

indicate groups, even if they are statistical). Statistics are useful to develop ideas but individuals are data points and not averages. Essential information can be provided that suggests directions to the person who wants to grow and is willing to put time, effort, feeling, and thinking into the process. Thinking is an operative word because most of the empirically verified methods can be grouped under the area of cognitive psychology. We have useful habitual beneficial thoughts and others that benefit from change covered in my 784-words essay "[The Pros and Cons of Cognitive Consistency](#)."<sup>8</sup>

These three essays and additional references lay a cultural and intellectual foundation for improving one's own wellness, coping, and resilience. The remainder of this article will elaborate on the facilitation and process provided by peer groups that enhances each individual's change process.

---

### **Chunking, Reason and Emotion**

The material in this 48-page *Guidebook* can be read quite quickly and a test could be passed by a reasonably good student. The intent, however, is not an intellectual exercise, but a change in behavior. For this purpose, the material is divided (i.e., chunked\*) into 15 sections suitable for coverage in peer-group meetings of a couple of hours each. The purpose of the group is to take advantage of the emotional learning that the interpersonal connections provide among equitable associates. Details of the process will be elaborated after the following breakdown of the focus areas.

#### **Subjects of Each Session**

1. Introduction to the program and theories promoting wellness.
2. Families as a benefit or bane.
3. Perceptions and how we "see" the world and relationships.
4. Positive psychology supercedes society's victim mentality.
5. Theories and methods of how we process our mental cognition.
6. Social support that may provide sustenance.
7. Healthy activities that provide a supportive physical and mental base.
8. Benefits of meeting with focused groups of peers (including this one).
9. Expressive writing alone and voluntary sharing with the group.
10. Humor selections that personally appeals to our own sense of humor.
11. Updates on bereavement stages and common cognitive distortions.
12. Religion and spirituality and what helps and what hinders.
13. Resilience, hardiness, and differentiation; with self-assessment.
14. Evaluation of our personal coping menus.
15. Conclusion and self-assessment of our current mental health status.

\*Chunking is defined and discussed on page 5.

## The Basic Material

The *Guidebook* includes major theoretical and practical points, plus questionnaires and exercises, in one or two pages that can be grouped into the 15 chunks, described above and elaborated below.

### Contents

<u>Section</u>	<u>Page(s)</u>	<u>Chunk</u>
Guidebook Guidelines	3	1
Introduction/Positive Psychology	4	1
Develop Resilience	5	1
The Hard and Rewarding Job of Living	6	2
Individuals in Family Systems	7	2
Assessment of Family Interaction	8-9	2
The Four P's Model	10	1
Definitions	11	1
Cumulative Effect of Stressors	12	1
From Stressors to Stress	13	1
Cognitive Processes Between Stressors and Stress	14	1
Information Processing	15	2
Perceptions	16-17	3
Optimists and Pessimists	18	4
Changing our Thoughts	19	5
The Great Cognitive Therapy Trio	20	5
Resistance to Change	21	5
CENTERFOLD		
The Stressor, Stress, and Recovery Complex	22	5
System Flow Diagram of Deployment	23	5
Social Support for Health & Adjustment	24	6
Expressed Emotion in Families	25	2
Mental and Physical Relaxation	26	7
Personal Health Assessment	27	7
Health Symptoms Assessment	28-29	7
Focused Sharing Groups	30	8
Expressive Writing	31	9
Humor	32-33	10
Bereavement Theories & Beck's Cognitive Restructuring	34	11
Religion and Spirituality	35	12
Murray Bowen and Differentiation	36	13
Hardiness and Resilience	37	13
Resilience-Hardiness-Differentiation Evaluation	38-39	13
Areas of Coping	40	14
Balance	41	14
Mental Health Items to Consider	42-43	15
Epilogue	44	15
Can Do Attitude	I.B.C.	15
Resources	B.C.	15

For this program, 15 sessions (or chunks) is consistent with the length of other training programs of this ilk and is the length of the standard academic semester. Of course, students would have to do extra academics for a grade. The essence of a peer group, however, is growth and not a school grade. Online is an elaborated [program outline](#)<sup>9</sup> that can be used for peer groups or modified for a syllabus.

### Chunking

The concept of chunking is discussed in one of the [most cited papers](#)<sup>10</sup> in psychology, "[The Magical Number Seven, Plus or Minus Two: Some Limits on Our Capacity for Processing Information.](#)"<sup>11</sup> It was used as a basis for my MA [thesis in psychology](#).<sup>12</sup> At the time, I was deeply imbued in reading and writing stilted academic style. As a recent convert from engineering, it was refreshing to read a scholar's cute beginning to his paper: "My problem is that I have been persecuted by an integer."

The telephone company recognized the average span of memory as  $7 \pm 2$  digits and this is evident in the exchange and number length of a phone number. Chunking is more evident when including area codes, in that we chunk (123) 456-7890, ordered as — Area Code - Exchange - Phone Number — ten digits. By this simple act of chunking, most people can remember beyond " $7 \pm 2$ ." The agreed upon 3-3-4 chunking can be confused by providing the number as 12-34567-89, etcetera.

Of course, we are undertaking a more complex human change process than remembering spans of numbers, but simple basic memory principles are informative. To enhance the benefits of this *Guidebook* elements are segmented into meaningful chunks with interpersonal interaction of a group.

### Reason and Emotion

Knowledge is fundamental to any problem that intends to promote cognitive change. Adding an interpersonal component to the process helps to promote remembering and assimilation of new behavior, thoughts, and views of the world — which psychologists call schemas. Having the benefit of hearing how others in the group interpret the material broadens one's own perspective. It shows that others may have different viewpoints that are a product of their needs and may satisfy them.

Combining social interaction with the introduction of new material can facilitate it being assimilated into one's belief schemas. This new viewpoint can change behavior, thoughts, and feelings. Emotion is not necessarily a gut wrenching experience. Being with peers wrestling with the same sort of life considerations normalizes differences between humans and the possibilities of changing your own.

The peer groups are focusing on manageable chunks of information that allows each member to consider their present attitudes and reactions to events and to become aware of other ways of living. Too often people believe they are enmeshed in an unchangeable situation and have no recourse. By considering that they are not trapped in a hopeless and endless inflexible life course breeds hope.

We are social animals that tend to live with our challenges in private. Not everyone needs the help of a psychotherapist and knowing something about the subject and ability to discuss our feelings and reservations in a safe environment may be sufficient. Packaged programs that are heavily marketed tend to offer codified solutions that can inhibit the person from adapting to ways that fit their makeup.

The *Guidebooks* are provided to present what we know about coping and resilience and methods that can help many types of persons choose from ways that are sound. They are offered as a menu to be adapted by each person to their personal needs and desires. Knowing what is known and the ability to discuss, adapt, and apply positive knowledge uniquely to our *self* can enhance resilience.

---

## Peer-Led Peer-Groups

Peer-leadership is the rub—because many of these groups are organized and assembled by people in organizations that have an inherent claim to or aura of authority; such as pastors, HR representatives, police sergeants, fire lieutenants, military officers and NCOs, psychologists and social workers. As this *Guidebook* does not push concrete or party-line answers to its material, the leader needs to refrain from seeking particular responses. Leadership in this case consists of making sure that facilities are available and set up at a specific times and adherence to the session’s agenda.

Restraint can be difficult for people who are used to teaching and answering questions. This program has few correct answer, within *limits*. Of course, we are *limited* by prevention of danger. The conflict level should be as innocuous as whether one thinks Leno or Letterman is the better comedian.

### Workgroup

In a nutshell, the peer-group-leader of peers does not teach, direct, answer, define, guide the discussion, except to keep it on the topic of the session. There are brief home readings that each participant needs to have read— i.e., the agenda. From there the interpretation of the material is each individual’s prerogative (much like a book reading group). A leader, or facilitator, or coordinator, no matter what he or she is called, can help to keep the members on subject and deflect a domineering person from monopolizing the discussion and make it comfortable for the more reserved to speak.

Workgroup awareness stems from the work of [Wilfred Bion](#),<sup>13</sup> who is not easy to read. Bion is mentioned here because he pointed out that groups emotionally deviate from their primary task. It is the job of the leader and the members to note when they are going asunder and return to its work.

### Resources for Peer-Group Leaders

The group leadership literature is vast and varied. It has many purposes and objectives, requiring different approaches by the leader. Some are didactic and others are passive. A common denominator of group’s leadership comes down to the person in the chair. One needs to be organized and able to tolerate the anxiety of not providing all the answers and opinions. A close analogy to the peer group is book discussion groups (*not led by the author*). Fortunately, the Internet has many good lists of suggestions that are useful. Adding “pdf” to your search phrase can limit responses to better sites.

### **“Don’t just say something, sit there!”**

There are variations to the introductory header having different meanings. It is bandied around in psychoanalytic training groups and simply means to allow the group to come up with its own solutions and answers without intervention by the leader. While not psychotherapy, these peer groups share the objective of allowing the interpersonal process among the members to change perspectives.

My training was in psychoanalytic and psychodynamic training groups, where leaders moderately responded to members to where the leader said nothing for hours (usually called Bion groups). I am certified in Redecision groups, a derivative of Eric Bern’s Transactional Analysis, where the leader is more active and suggests interaction with an empty chair and interprets meanings. It was by running several cognitive restructuring groups for violent offenders in correctional settings that I learned to modulate interaction. The inmates were bright and experienced at frustrating or sucking up to teachers. They were less accomplished at dealing with a group leader who did not continuously push back on every issue. Prison is a control atmosphere and not demanding conformity raises the anxiety level. *Anxious members may request going over the homework*. Modulating anxiety is an art.

---

### CIRCLES OF CHANGE

Tracy A. Thompson wrote an excellent article titled “Circles of Change” describing leaderless groups where interpersonal interaction results in group and personal growth. The approach is elaborated in the following three links for the purpose herein and suggests the possibility of obtaining a free copy of her article on the Internet. As it is a copyrighted article, I cannot guarantee that my sources will remain active. Successful Circles may continue meeting after the [Guidebook](#) material is completed.

[Essential Elements of  
Yeoman\\* Organized Egalitarian Peer-Group Circles to  
Enhance Resilience by Focused Discussions of Readings](#)

[Circles of Change Intensify Assimilation of Guidebooks to Enhance Resilience](#)

[CIRCLE GROUP PROGRAM OUTLINE \(Syllabus\)](#)

\*The yeoman does not take an active leadership role during the group process.

### Resilience

Nine-eleven and its aftermath *remade* us aware of human resilience. There are many articles and I suggest one, written by a scholar who presents the case lucidly, that can be found on the [Internet](#).<sup>14</sup>

The realization that humans were largely resilient is not a new discovery and can be traced back to World War II. A special network of psychiatric clinics that were set up in preparation for mass mental casualties resulting from the [Battle of Britain](#)<sup>15</sup> were closed due to lack of need. Surprisingly, drunkenness and suicides declined and workers made their way through the debris to their jobs.

Over the post-war half-century we moved from expectations of sturdiness to dependency in the face of loss and trauma. Many reasons can be traced for this change to a victim culture that are beyond the scope here. It could be a good topic for discussion, if the group formed to work with this *Guidebook* continues on as a discussion group. A side advantage of setting up this type of group is members may want to continue to explore the human condition, especially among church groups.

### Resilience, Hardiness and Differentiation

Three paths that have been followed over the second half of the 20<sup>th</sup> century that dealt with human strengths. **Resilience** stemmed from the observation of many children who thrived after being subjected to bad environments; **Hardiness** developed out of a dissertation study that identified three Cs: Commitment, Control, and Challenge; and **Differentiation** was elaborated by [Murray Bowen](#)<sup>16</sup> An integration of the three concepts is shown in the [assessment instrument](#),<sup>17</sup> posted on my web site. To the extent that people can relate to their answers on a questionnaire, this can identify strengths.

<b>Personal</b> <i>It's specific to you!</i>	<b>Perception</b> <i>It's what you "see!"</i>
<b>Four P's</b>	
<b>Promising</b> <i>It can be done!</i>	<b>Persistence</b> <i>It takes time and work!</i>

### Four P's Model

The emblem at the left emphasizes that the process is unique to each **person** and is facilitated by changing one's **perspectives**. It is not easy and takes **persistent** hard work that, as a result, **promises** beneficial results.

Knowledge is the foundation for personal growth that groups help to assimilate into our cognitive system. By devoting time and effort into self-reflection and -assessment, enhanced by participation in peer groups of others with similar, but personally different, beliefs, needs, and goals.

## Discussion

This, as other articles supporting the *Guidebooks*, was written after the material was presented to a group interested in the program. I enjoy making presentations but wish to reach a larger audience. This is consistent with my contention that many humans can develop healthier ways of living without having a “certified” guru to tell them how. Also, training to present a canned program does not guarantee the so-called leader enhances the group. Too often the codified methods treat people as an amorphous mass and not as individuals. This can be a major cause of harm for some people.

In this paper, I have provided links to references that go deeper into certain areas. This elaboration is not necessary, but is included for those who want to delve deeper into some subjects. Availability with a lack of expense was key in their selection. Not everyone has the ready access to academic databases that I have. *Wikipedia* is also cited when they are a worthwhile source. I have found that articles published in so-called and actual peer-reviewed journals also need discrimination by reader.

---

## References

1. *Psychological Wellness: Guidebooks for Individual Initiative*.  
[www.HOUD.info/guidebook.htm](http://www.HOUD.info/guidebook.htm)
2. Seligman, Martin E.P.; Csikszentmihalyi, Mihaly (2000). "Positive Psychology: An Introduction". *American Psychologist*, 55(1), 5–14.  
<http://www.ppc.sas.upenn.edu/ppintroarticle.pdf>
3. “A Wind Shift Toward Positive Psychology and Adult Resilience.”  
[www.HOUD.info/resilience.pdf](http://www.HOUD.info/resilience.pdf)
4. Lilienfeld, S. O. (2007). Psychological treatments that cause harm. *Perspectives on Psychological Science*, 2(1), 53-70.  
(If you do not have access to an academic full-text database, try Interlibrary Loan.)
5. Lilienfeld, S. O., Lynn, S. J. & Lohr, J. M. (2003). *Science and pseudoscience in clinical psychology*. New York: Guilford Press.
6. “The Zeitgeist and the Presentation of Ideas.” [www.HOUD.info/zeitgeist.pdf](http://www.HOUD.info/zeitgeist.pdf)
7. “Evaluating the Efficacy of Critical Incident Stress Debriefing: A Look at the Evidence.”  
[www.HOUD.info/CISD.pdf](http://www.HOUD.info/CISD.pdf)
8. “The Pros and Cons of Cognitive Consistency.” <http://www.HOUD.info/cognition.pdf>
9. “Program outline.” [www.HOUD.info/ProgramOutline.pdf](http://www.HOUD.info/ProgramOutline.pdf)
10. “The Magical Number Seven, Plus or Minus Two.” *Wikipedia*.  
[http://en.wikipedia.org/wiki/The\\_Magical\\_Number\\_Seven,\\_Plus\\_or\\_Minus\\_Two](http://en.wikipedia.org/wiki/The_Magical_Number_Seven,_Plus_or_Minus_Two)
11. “The Magical Number Seven, Plus or Minus Two: Some Limits on Our Capacity for Processing Information.” *The Psychological Review*, 1956, vol. 63, pp. 81-97.  
<http://www.musanim.com/miller1956/>
12. My M.A. Thesis. <http://www.HOUD.info/CharacterSpans.pdf>
13. “Wilfred Bion.” *Wikipedia*. [http://en.wikipedia.org/wiki/Wilfred\\_Bion](http://en.wikipedia.org/wiki/Wilfred_Bion)
14. “Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Survive after Extremely Aversive Events.” *American Psychologist*, 59(1), 20-28.  
[http://www.nh.gov/safety/divisions/hsem/behavhealth/documents/loss\\_trauma.pdf](http://www.nh.gov/safety/divisions/hsem/behavhealth/documents/loss_trauma.pdf)
15. “The Blitz.” *Wikipedia*.  
[http://en.wikipedia.org/wiki/The\\_Blitz#cite\\_ref-Field\\_2002.2C\\_p.\\_15-20.\\_61-2](http://en.wikipedia.org/wiki/The_Blitz#cite_ref-Field_2002.2C_p._15-20._61-2)
16. “Family Systems & Murray Bowen Theory.” [www.HOUD.info/bowenTheory.pdf](http://www.HOUD.info/bowenTheory.pdf)
17. “Resilience-Hardiness-Differentiation.” A questionnaire. [www.HOUD.info/RHD.pdf](http://www.HOUD.info/RHD.pdf)