

**FOUR DAY INTENSIVE TRAINING IN GROUP SCHEMA THERAPY:
A Master Class with Joan Farrell, Ph.D & IDA SHAW, M.A.
Joined by Paul Kasyanik, Ph.D.**



Authors of **Group Schema Therapy for Borderline Personality Disorder: A Step-by-step Treatment Manual with Patient Workbook**, Wiley-Blackwell, 2012
The Schema Therapy Clinician's Guide: A Complete Resource for Building and Delivering Individual and Group Integrated Mode Treatment Programs, Wiley-Blackwell, 2014 and the DVD Set: **Group Schema Therapy: An innovative approach to treating patients with personality disorder**, IVAH-Hamburg, 2011



This 4 day Master Class gives you an opportunity to learn Group Schema Therapy (GST) from its developers (Farrell & Shaw, 1994, 2009, 2012, 2014). The unique GST model integrates their original group work with Young's individual Schema Therapy (ST)(Young, Klosko and Weishar 2003). GST strategically uses the therapeutic factors of the group modality to catalyze the work of schema mode change. GST is an innovative approach to ST that goes far beyond traditional group therapy models; furthermore, it does not simply incorporate individual ST interventions into a group format, rather, has developed new adaptations of ST interventions for the group modality. The central idea behind GST is that the group members, with the guidance of the therapists, add sibling socialization to the reparenting the therapists provide providing a "re-family" corrective emotional experience. As part of this group corrective emotional process patients do imagery and roleplaying exercises in which they take on the roles of each group member's various modes (e.g., the Detached Protector, the Healthy Adult, Punitive Parent) and ultimately heal them. The experience of ST in a supportive, validating group can directly impact and heal key schemas such as, abandonment, defectiveness, emotional deprivation, social isolation and mistrust/abuse. Like individual ST, GST improves: stability of self, interpersonal relationships, social, family, and occupational functioning and quality of life. There is considerable research now supporting the effectiveness of the GST approach, including empirical validation from a randomized controlled trial (RCT) (Farrell & Shaw, 2009) and pilot studies conducted in the US, the Netherlands and in Germany (Reiss, Lieb, Arntz, Shaw & Farrell, 2013;). These studies demonstrated very large positive effects from even a short group treatment of thirty sessions. A large multisite international RCT of GST for Borderline Personality Disorder is in progress in collaboration with Dr. Arnoud Arntz (Wetzelaer, P., Farrell, J., et al., 2014). Outcome studies to evaluate the effectiveness of GST for Cluster C Personality disorders and social phobia (Balje, et al., 2016) and mixed groups of Clusters B & C are being conducted in the Netherlands and Switzerland, which Shaw is providing clinical supervision for. GST was developed with BPD patients but like individual ST it is trans-diagnostic and adaptable to other personality disorders, complex trauma and other challenging populations as well as entrenched maladaptive schema and mode effects in any patients.

This four day training presents the GST model and its core interventions. Group Schema therapy functions in the same way as individual ST – i.e. therapist limited reparenting and mode change interventions are determined by the mode a patient is in rather than by disorder. Demonstrations by trainers ask participants to play their own patients thus providing examples of using GST interventions for the presenting modes of various diagnostic groups. Core GST interventions include: group limited reparenting, group imagery re-scripting, mode-specific group role-plays, experiential group work and the distinctive two therapist model that is considered crucial for maintaining the essence of limited reparenting with the more severe disorders. These interventions can also be used in individual schema

therapy and individual use is discussed based upon the interests of participants. The workshop incorporates: didactic sections with powerpoint and group discussion, demonstrations by trainers in which the workshop participants play patients, DVD segments of the trainers leading a group and opportunities for participants to practice interventions with coaching and feedback. The first two days are primarily didactic with numerous demonstrations of interventions with participants playing the patient group. Day three includes practice and day four is focused on practice of interventions in small self-therapy groups (experiencing being in a ST group as oneself).

The training follows the curriculum of the ISST approved certification training program in Group Schema Therapy offered by the Schema Therapy Institutes Midwest – Indianapolis and St. Petersburg. It provides the 24 hours required for Standard level ISST certification. You will receive a certificate of attendance upon completion that can be used for certification documentation. Those who complete this training will be given priority in receiving the supervision requirement of certification from the trainers.

A quote from the founder of Schema Therapy, Jeffrey Young PhD, who attended a Farrell-Shaw Workshop:

“Group Schema Therapy has the potential to deliver the powerful treatment strategies of the schema approach in a more cost effective manner than has been possible with individual schema therapy -- with equivalent or perhaps superior results. The experience that the authors have gained over 30 years is evident throughout. The approach Joan and Ida have developed is truly unique, exciting and promising. Joan Farrell is an outstanding schema therapist who serves as the “stable base”, emotional center, and “educator” for the group as a whole – a role I can imagine myself learning to fill, given enough time and experience. What truly amazed me – perhaps because her style is so different from mine and Joan’s -- was the remarkable group work of Ida Shaw. It is hard to convey the level of originality, creativity, and spontaneity she brings to the group experience. She is able to blend elements of gestalt, psychodrama, role-playing, and her own infectious style of play into an approach that perfectly fits the intensive demands of schema mode work, cajoling patients to change in profound ways.”

Jeffrey Young Ph.D.
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