

Using a Supportive Community Group Process to Cope with the Trauma of Social Fragmentation and Promote Re-Socialization in the Bahamas

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Received date: January 26, 2015; Accepted date: February 19, 2015; Published date: February 26, 2015

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Abstract

The Family: People Helping People project is a supportive group process modality involving the sharing of personal stories, self-examination, reflection and transformation using psychotherapeutic principles. The group process was developed to confront the prevailing social fragmentation in the Bahamas associated with or caused by the continuing effects of the country-wide crack cocaine epidemic of the 1980s and the fall-out due to the recent international financial downturn. Facing community disintegration, high youth unemployment and burgeoning rates of violent crime and murder, many persons have been severely traumatized. This paper reviews the major themes presented in 776 group process sessions indicating the pervasive nature of the negativity of the shame process expressed in the high incidence of anger, violence, grief, relationship issues and abuse. This innovative project has been proven to enhance the re-socialization of many participants in the program.

Keywords: Social fragmentation; Traumatization; Shame; Re-socialization

Introduction

The Bahamas, like many other countries in the Caribbean and South America, is facing a serious social fragmentation process related to: (a) the widespread cocaine epidemic of the 1980s and its present sequelae involving drug trafficking, executions and plentiful supply of guns and (b) the high unemployment relating to the recent international financial downturn [1]. Manifested by family and community disintegration, the social fragmentation has spurred a culture of violence associated with burgeoning murder and violent crime rates (Figure 1), widespread domestic violence, the formation of violent youth gangs and different types of abuse [2].

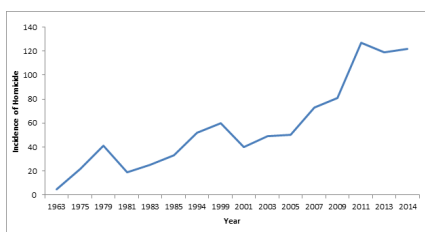


Figure 1: In 1983, there was an increase in homicides. Between 1983 and 1999 the crack cocaine crisis was at its height. The epidemic moved to a chronic relapsing state in which the violence became somewhat endemic. The continuing chronic violent drug syndrome was worsened by the international financial downturn of 2008 with massive unemployment, leading to a powerful social fragmentation and exponential increase in the murder rate.

‘The Family: People Helping People’ Project is a community based intervention designed to confront the prevailing social fragmentation

in the country and promote re-socialization. The program is a dynamic supportive group process, involving storytelling, reflection, self-examination and transformation using psychotherapeutic principles. Persons are encouraged to share their stories in a contemplative environment of love, mindfulness and non-judgemental listening. This produces a powerful healing bond within the group. It is this bond which we define as ‘Family’, hence the name ‘The Family: People Helping People’ project. The program is currently offered in 18 marginalized Bahamian communities and selects populations, including the adult prison, juvenile detention centers for males and females, orphanages, emergency medical personnel and a program for expectant teenage mothers, and involves an average of 250 participants weekly. Since being awarded a grant from the Templeton World Charity Foundation in October 2013 to study the quantitative aspect of re-socialization, The Family has hosted 776 group therapy sessions. The groups are led by trained psychotherapists and often assisted by facilitators who have undergone the training program for laypersons.

The purpose of this article is to present a qualitative analysis of the various praxes or reports written by the therapists or facilitators of the Family groups to give us an indication of the issues of shame and their resolution. The qualitative and quantitative analysis along with the testimonial data all give us a clearer understanding of what is happening in the group process, and hence, by extension, the country. Similar types of research using psychotherapeutic approaches by lay persons in marginalized communities have been conducted in Uganda. In one community-based, randomized controlled trial, it was found that group interpersonal psychotherapy significantly reduced depression and functional impairment in treated patients. In addition to the substantial treatment benefits found immediately following the intervention, mental health benefits were maintained up to six months after the end of formal treatment [3].

Thesis

Shame is a powerful, multi-faceted emotion which results from the shattering or loss of cherished expectations, wishes or dreams, creating in us the sense of abandonment, rejection and humiliation [4]. Though hidden and attached to our deepest, personal secrets, the faces of shame are seen in society as anger, violence, revenge and abuse. As a result, the person becomes at war with themselves so that shame may be defined as Self Hatred Aimed at M.E. Social fragmentation is caused by the negativity of shame, giving persons a diminished view of themselves, others and the world. Conversely, re-socialization is the liberation of the person from the negativity of shame to experience the positive emotions of love, forgiveness and gratitude, resulting in increased self-esteem and the development of meaningful community. Our thesis is that by analyzing the themes of the Family groups in the country, we would see evidence of the predominant prevalence of the faces of shame shown in society and have the opportunity to confront and work through them.

Methodology

In this paper, we present a thematic analysis of the themes discussed in all Family sessions since the inception of the program (October 2013) until November 2014. After each group session is conducted, the therapist or group facilitator writes a praxis report reviewing the overt and covert themes of the discussion that took place as well as a personal reflection on the session. Family group sessions have presented a number of themes reflecting social fragmentation involving: (1) violence (including trauma), (2) grief, (3) anger, (4) relationships, (5) abuse, (6) infidelity and domestic violence, (7) addiction and (8) suicide and depression. In an effort to identify which themes occurred most frequently, all the praxes from the 776 group sessions were reviewed and themes of each evaluation noted. While this report encompasses themes explored in 776 group sessions, the total number of themes surpasses 776, as a session can and most often does have more than one theme.

Results

Participants in the Family project have testified that their overall functioning and coping abilities have improved. For example, they claim that they are less depressed, have more tolerance of frustration, less tendency to seek revenge after violent attacks on themselves or family members, improved anger management and conflict resolution and less involvement in abusive relationships. They also said that they have a greater sense of contentment and a more positive outlook in their life [5].

The thematic analysis of the group sessions indicated the following results. Anger (n=150) and violence (which includes trauma) (n=137) were the two themes discussed most frequently during Family sessions. Grief (n=117) and relationships (n=112) were discussed with similar frequency. Abuse (sexual, physical, mental and verbal) was the theme of 59 sessions, while suicide and depression were the themes in 48 sessions. Infidelity and domestic violence were discussed in 39 sessions. Although it is undoubtedly an important issue for the Family's population of interest, addiction was discussed the least frequently (n=36) (Figure 2). Other themes, such as disappointment, shame, revenge, frustration, etc. accounted for the remainder of the Family sessions.

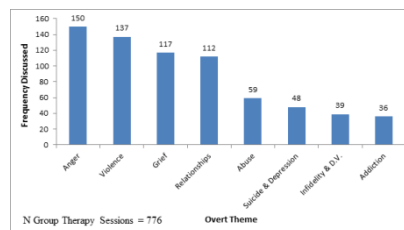


Figure 2: Sessions not represented in this graph centered on other themes such as disappointment, frustration, revenge, etc. However, for the sake of publication, only the eight (8) most prevalent themes are represented in this graph. The prevalence of social fragmentation in the community is represented by the high incidence of the first five themes. Anger leads to violence, which always involves loss and grief. The cycle of anger and violence affects relationships and also creates various forms of abuse in the home and community.

Discussion

Shame is a multifaceted, hidden emotion which is manifested in society by anger, violence, grief, abuse etc. This stresses the need for the development and expansion of the The Family: People Helping People project which has been proven scientifically to decrease shame manifested by violence, revenge, anger, negativity, loneliness and abusive relationships. The project has also been proven to increase self-esteem and gratitude (Figure 3) [5].

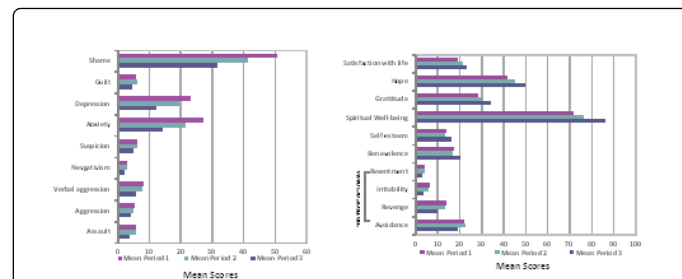


Figure 3: Increases in many positive measures in Testing Period 3 (Oct. 2014) compared to Period 1 (Oct. 2013). Indication that positive emotions and actions are increasing in participants in The Family over time, which suggests efficacy of The Family in nurturing community re-socialization. Note that forgiveness (right panel) is inversely related to resentment, irritability, revenge, and avoidance.

Anger

Anger and shame are intimately related [6]. Due to the social fragmentation in the Bahamas, the group processes indicate a widespread phenomenon of alexithymia which is the lack of expression of strong, negative feelings. Thus, instead of expressing these feelings, they are acted out in violent or destructive behavior [7].

Case Vignette: During an adolescent session, members identified common triggers of anger, such as disrespect, annoyance and provocation. When asked how they express anger, they replied they

use foul language and engage in fights. For instance, one of the members described that when a school mate entered her classroom and verbally abused her, she retaliated by throwing a chair at her. Instead of expressing her anger verbally, she acted it out behaviorally, demonstrating alexithymia. The facilitator helped the participant to recognize the importance of managing the expression of her anger rather than acting violently.

Case Vignette: A member with a history of gang banging and drug dealing, described that in order to survive on the streets, he threatened and confronted people who made him angry. The facilitator responded that when we are angry, it means that we are deeply hurt and even though we act out the anger violently, it does not resolve the hurt within us. The young man has continued to attend the group regularly, working on anger management and conflict resolution.

Data analysis carried out on The Family project demonstrated that after joining The Family, subjects felt significantly less anger toward others ($t=-2.83$, $p=.0142$, Cohen's $d=-.756$). Subjects also showed significantly decreased desire for vengeance ($t=-3.32$, $p=.0061$, Cohen's $d=-.922$), and experienced significantly fewer thoughts of both violent and nonviolent revenge ($t=-2.28$, $p=.0437$, Cohen's $d=-.658$) [5].

Violence and trauma

Burgeoning crime rates in the Bahamas (particularly Nassau) have left much to be desired (Figure 1). As the media and police provide constant updates of criminal activity, most Bahamians have been forced to live in fear. It is now accepted that shame (Self Hatred Aimed at ME) is a powerful precursor to violence. In his book, *Violence: Reflection on a National Epidemic*, James Gilligan concluded that most criminal violence can be understood as a desperate attempt to ward off shame [8,9]. Scheff and many other authors also describe violence as a form of avoiding shame [10]. When a shamed person is threatened or continues to be hurt, it breaks down their shame defense of self-absorption, self-gratification and control and they enter the violent destructive tunnel. In this tunnel, there is cognitive disintegration involving a decreased IQ, ethical fragmentation (the loss of values and moral restraint) and a compulsive, repetitive desire to be destructive. If the shame rage is directed at the self, this leads to masochistic violence (for example, self-injury or suicide). If the hurt is directed towards others, it leads to sadistic behavior, that is, violent destruction or homicide (Figure 4).

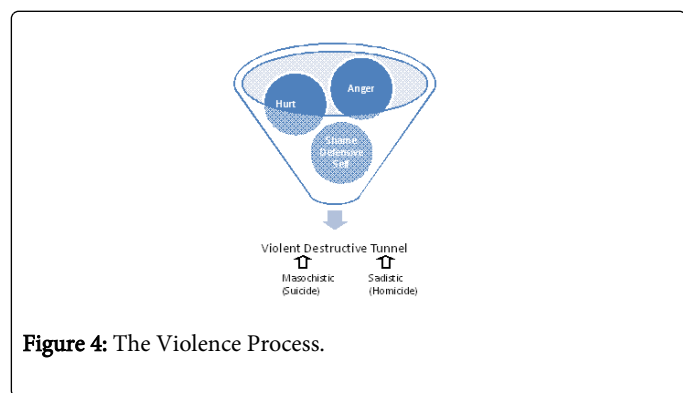


Figure 4: The Violence Process.

Case Vignette: A distraught mother rushed into a Family group session crying profusely. As persons listened intently, she shared how her son was brutally murdered. Apparently, an altercation leading to the murder involved a disagreement between his younger brother and the perpetrators. Upset and afraid, the lady said her younger son told

her he felt guilty for his brother's murder, and wanted to commit suicide. This was a very painful experience for the group to hear this lady share her deep hurt and pain. The loving support of the group and the sharing of similar experiences helped to comfort the mother. The mother continued to attend the Family sessions, working through the violence and trauma of her son's murder.

The discussion of violence has been a continual theme in the Family group. For example, a young man shared how he witnessed his friend being shot in the head after a gambling game. Similarly, another gentleman described how his sister, a peaceful and loving person, was burned alive in her home. These stories are very painful and affect the group deeply. However, the loving and healing support of the group gives hope and helps people to cope. Of particular note, the contemplative silence of love and non-judgmental listening is a healing balm for many deeply traumatized persons.

Grief

Many of our Family members are dealing with grief. Results from our most recent testing period (October 2014) confirm that more than 70% of our Family members know at least one person who has been killed violently (Figure 5).

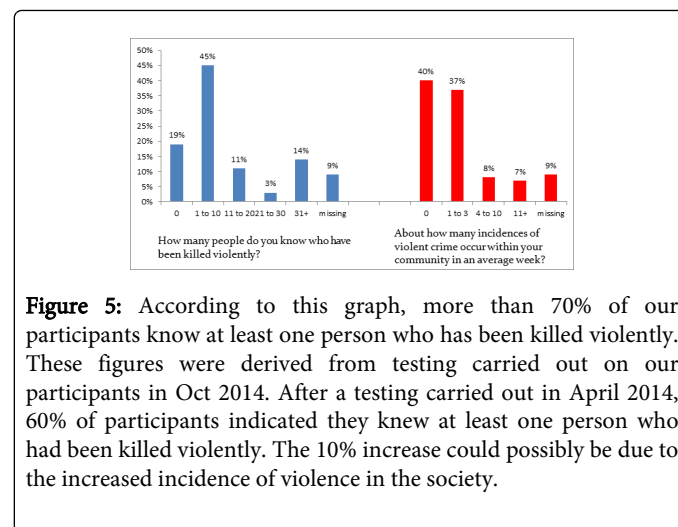


Figure 5: According to this graph, more than 70% of our participants know at least one person who has been killed violently. These figures were derived from testing carried out on our participants in Oct 2014. After a testing carried out in April 2014, 60% of participants indicated they knew at least one person who had been killed violently. The 10% increase could possibly be due to the increased incidence of violence in the society.

Case Vignette: A facilitator described how upon entering the group, some of the participants' heads were bowed low, while others stared blankly at the walls. Sitting down, a member of the group grabbed the facilitator's hand and said 'she is gone, my best friend is gone'. The group shared that a group member was tragically murdered two days prior, leaving them shocked and in disbelief. Some members did not want to discuss the death, while others wanted to share their feelings and memories of their deceased colleague. A number of group members shared their experience of losing family members and felt they could identify with the feelings of grief and loss. Describing grief, a member said "it's as if I lost me, I became someone else, enraged, living recklessly life was never the same". The facilitator reinforced the idea that although painful, loss can be used as a catalyst to help us develop and grow.

Case Vignette: Sadly, at one of the facilities, the group experienced the suicide of a fellow member. One of the therapists said when she arrived at the group she was shocked and traumatized to see the police still processing the scene. A week later, participants seemed un-phased by the event, possibly because they were still in shock. After being

prompted by the therapist, members disclosed various lifestyle changes they intended to make. One member compared the young lady's death to that of a fallen leader whose life was lived with meaning and purpose. However, the consensus was that this young lady died without having lived out her purpose. The realization of this was devastating and one of the young ladies wrote a poem about the incident, titled 'November's Death' (Appendix 1).

November's Death

A new girl came a week ago
Short, dark and hair cut low
Sometimes she talked a little slow
And she always kept her hands below.
Her name was Tasha
When she talked the room would be full with laughter
She always would have a smile on her face
I'm sure nobody could take her place.
She came in [here] Wednesday 29th of October last week
When we came from school and she saw us she only did a little peek.
Now on Monday the 3rd of November we left her with her breath
When we came back from school we heard of her death.
Maybe she was feeling stressed
But now I hope her soul may rest.
We didn't know she was going to be November's death.
Who knew I would be writing a poem about her without breath.

Relationships

Dysfunctional relationships are a common theme in Family group discussions. Male members shared how they often feel manipulated in their relationships because of the high expectations of females. Similarly, females shared their difficulty in expressing their feelings to males who were often emotionally distant. Sadly, a harsh realization of the group was that the people we love deeply make us most angry because where we expected love, we received hurt. When love is expressed, the hurt love presents itself as anger, resentment, bitterness and hardness of heart [7].

Case Vignette: A group member shared a major source of her frustration and depression was her relationship. She is involved with a man who makes no apology for his unfaithfulness. But because he pays for her rent and helps to support her, she feels indebted to him. She is afraid that if she confronts him, he would leave her and she would be unable to cope. Group members challenged her that regardless of the financial ramifications, she should have the courage to do what is in her best interest. However, at the same time, they understood that dysfunctional relationships are very complex. It takes time in the Family group to process the issues to develop the fortitude and self-esteem to make constructive decisions.

We have found that if a person involved in a negative or destructive relationship continues to work on themselves in the group, they develop the courage to become more assertive, less co-dependent and make decisions to live independently. When this does happen, often the partner (usually the male) is surprised that the person would leave them to function on their own.

Abuse

Many of the participants in the Family program have been victims of different forms of abuse – physical, sexual, verbal and emotional. The shame and painful negativity associated with abuse is a powerful

precursor to violent behavior. Helen Lewis has described the direct correlation between abuse in childhood and violent acts committed in later teenage years. A number of persons who had committed serious violent acts in their late teens have shared that they experienced various forms of physical and sexual abuse in childhood [6].

Case Vignette: A young worker shared that he was molested and abused as a child. He said he did not meet his mother until he was 18 years old and was abandoned by his father. This had a powerful effect on his life and many times he despaired of living. Two years ago he attempted to kill himself by taking an overdose of pills. He said he was always there to help other people, but when he needed help, no one was there for him.

In the Family group, we have found that the scars from emotional abuse may not be as visible as those from physical abuse, but nevertheless, the person is deeply hurt and their life is marginalized. Our work shows that if persons continue to work on the issues of emotional abuse, they can be released from the negativity of the shame and develop healthy and meaningful relationships.

Case Vignette: During a Family session, a group member shared that his stepfather used to beat his mother. As a result, she ran away with them. Being very attractive and unable to find work, she became a prostitute. This experience in his home had a negative effect on him, leaving him traumatized with a loss of confidence in himself. Fortunately, his mother who used to drink a lot has changed and taken a renewed interest in him. In fact, he said he was very touched when she said to him "I love you".

According to the Allen Contemplative Discovery Pathway Theory, the heart or psyche, like a sponge, absorbs all the hurt occurring in our life. Becoming so filled with the negativity of shame, such as anger and fear, there is no space for love. The Family, by encouraging participants to share their stories, allows them to empty their heart, releasing the repressed negative feelings of their hurt trail. As a result, they are able to open to love and become their authentic self [7]. According to results from testing carried out on participants in October 2014, significantly fewer participants reported being in abusive relationships after joining the Family (Figure 6).

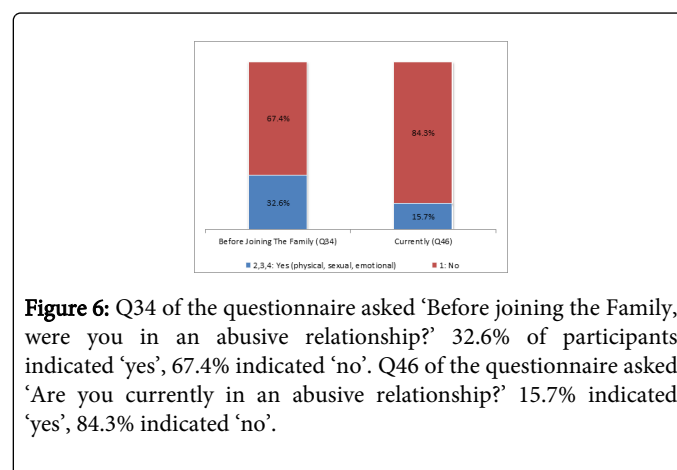


Figure 6: Q34 of the questionnaire asked 'Before joining the Family, were you in an abusive relationship?' 32.6% of participants indicated 'yes', 67.4% indicated 'no'. Q46 of the questionnaire asked 'Are you currently in an abusive relationship?' 15.7% indicated 'yes', 84.3% indicated 'no'.

Suicide and depression

In 2013, a suicide study was carried out by Bethell and Allen. It was reported that the rate of suicide in the country during a 14 year period (2000-2013) was 2.1 per 100,000. That is, 2 out of every 100,000

Bahamians committed suicide during the time [11]. Suicide has been the topic of discussion at a number of Family sessions. Some of our members have struggled with suicidal ideations and/or have survived suicide attempts, while others are left to grieve close family members who committed suicide.

Case Vignette: One of our adolescent participants attempted to hang himself. He was sent to the state mental hospital. The young man who found him hanging was also a member of our group. He said that he didn't think his friend wanted to die, but was crying out for help.

Surprisingly, another adolescent had the same sentiments about self-harm. She said that you can cut yourself to express your feelings of anger but it doesn't necessarily mean you want to die. Participants in a different group session also shared this notion. They said that they did not want to really die, but they wanted "a break from suffering". They believed that death represented being at peace. Another young lady said that this was a lie and our mind seduces us with negative thoughts.

Depression is a causative factor of suicide. One of our participants stated "I am confused, depressed, and disappointed". Although she wants to feel happy, she said she feels she has let herself and everybody around her down. Consequently she does not know what to do. As a result, she feels vulnerable to hurting herself because of the choices she's made. In times like this, the group is extremely supportive with empathy and sharing similar feelings. This has been very effective because our quantitative study shows that participation in the group process decreases depression and suicide [5]. Data demonstrated that persons who participated longer in The Family (four to twelve months) had significantly less depression compared to those who participated for a shorter duration (zero to three months) ($t=-3.71$, $p=.0099$, Cohen's $d=-2.001$) (Figure 7). Similarly, significantly fewer participants reported contemplating suicide ($t=-2.91$, $p=.013$, Cohen's $d=-.808$) after joining The Family (Figure 8).

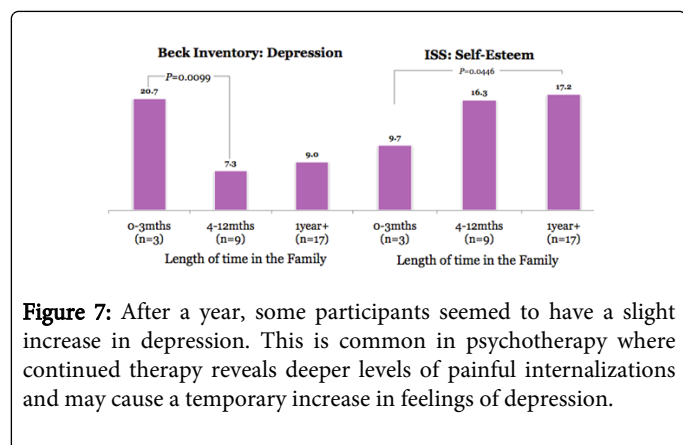


Figure 7: After a year, some participants seemed to have a slight increase in depression. This is common in psychotherapy where continued therapy reveals deeper levels of painful internalizations and may cause a temporary increase in feelings of depression.

Infidelity and domestic violence

Infidelity and domestic violence have pervaded our culture. As such, scores of our participants have been grappling with these issues. Sadly, it would appear as though most have become angry and bitter because of their broken relationships. The Family group process has provided a space for them to express their pain and work through their feelings, leading to a decrease in the desire to seek revenge (Figure 8).

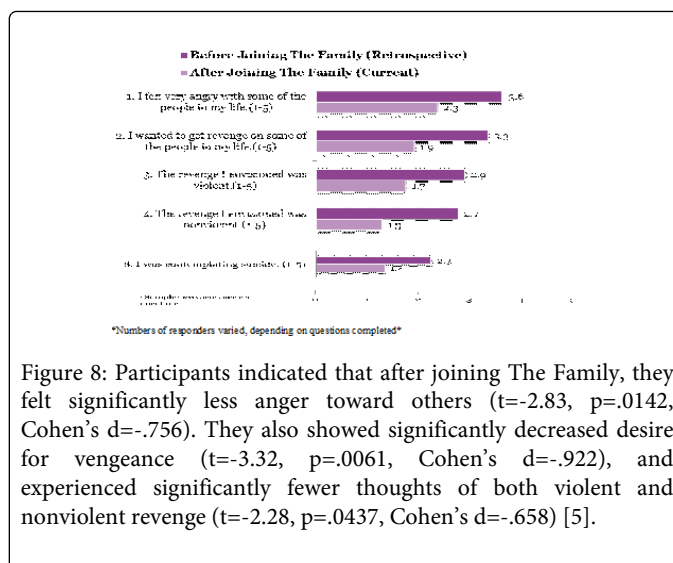


Figure 8: Participants indicated that after joining The Family, they felt significantly less anger toward others ($t=-2.83$, $p=.0142$, Cohen's $d=-.756$). They also showed significantly decreased desire for vengeance ($t=-3.32$, $p=.0061$, Cohen's $d=-.922$), and experienced significantly fewer thoughts of both violent and nonviolent revenge ($t=-2.28$, $p=.0437$, Cohen's $d=-.658$) [5].

Case Vignette: A young lady expressed her disappointment with her husband's infidelity because he had an affair with her close friend of three years. This was very painful and caused much conflict. In spite of this, by working on their feelings in the group, they have decided to stay together and continue to work on their marriage.

Addiction

The widespread crack cocaine crisis of the 1980s had a powerful effect on the Bahamas. Crack cocaine was the first drug to feminize addiction, causing many mothers to be ejected from the home. This left a powerful family and community disintegration, causing a severe social fragmentation.

Case Vignette: One of our members claimed that whenever he drank alcohol mixed with marijuana and other drugs, he became extremely violent. As his addiction became worse, the violence was directed toward his wife and child. On one occasion, after using drugs heavily, he returned home to find the doors were locked. He took up blocks and broke down the door, trying to hurt his wife and child. She was able to barricade herself in a room and called the police who helped to resolve the situation. Eventually, he joined the Family group and has been working on himself, along with his wife, for five years. He has stopped using alcohol and drugs and they are happily married and running a successful business.

Conclusion

The Family: People Helping People Project was developed as a safe space to help traumatized persons work through their shame and pain. The mantra of the Family is 'jaw jaw, stops war war'. As such, participants are encouraged to share their personal stories and accept their part of the responsibility for their issues. In so doing, they admit that they are their problem; therefore, they can work toward their solutions. The thematic analysis of the Family groups, described in this paper, indicates the depth of the negativity of shame but also provides hope for re-socialization by helping people work through their difficult issues, increasing their self-esteem and developing their ability to live in meaningful community. Our hope is that this community group process intervention could become more widespread in dealing with the painful traumas of marginalized persons.

Acknowledgments

We acknowledge with gratitude the funding of the Templeton World Charity Foundation in the development of the Family: People Helping People project.

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