

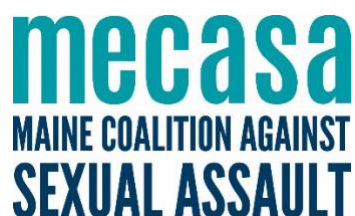


SUPPORT GROUP  
FACILITATOR  
MANUAL

MECASA  
2021

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## Curriculum History

In 2017 MECASA convened a work group to develop a fundamental Support Group Facilitator Training. The group included experienced facilitators from six sexual assault support centers, MECASA staff, and Nancy Ansheles, a consultant who specializes in training on facilitation. Together, we developed a training based on the philosophy and practices of advocate-facilitated support groups and the MECASA Quality Assurance Standards.

After participating in this training, advocates will have the skills, tools, and confidence to convene a support group with an experienced co-facilitator. This curriculum and training manual will be used as an annual in-person training offered by MECASA but is also intended for centers to use to train new staff one-on-one as needed.

Thank you to all the work group participants for their time, wisdom, and sharing of their materials and training content. Thank you to Lydia Christie, Kayce Hunton, Jenna McCarthy, Bridget Mancini, Amy Russell-Goode, and Angel Shaw.

## Sexual Assault Support Group Overview

For years, well before the anti-rape movement began, communities have come together in groups to heal wounds, celebrate victories, and find humor and love in even the darkest of situations. Stories are shared and, in the sharing, paths out of pain, despair and isolation are found.<sup>1</sup>

Support groups for survivors of sexual violence share roots with the establishment of rape crisis centers, Consciousness Raising groups, and Speak Outs organized by feminists in the early 1970s.<sup>2</sup> As more and more women began to share their stories of rape and sexual violence, volunteers and activists began to address unmet needs with hotlines, legislative advocacy, and support groups. Support groups provided an opportunity for sharing and connection, but also to understand how personal experiences relate to the larger systems and culture that support and perpetuate sexual violence.

### Defining Advocate-Facilitated Peer Support

Key characteristics of peer support groups include:<sup>3</sup>

- Groups are not clinically-led, though may have clinical support.
- People gather for support based on a shared issue or experience.
- May be focused on social connections, support, or focused on social

Clinical and therapeutic approaches play a role in healing from sexual violence but differ from peer support. Advocate-facilitated peer support is a free service which does not require a diagnosis. Support for survivors at sexual assault support centers is interwoven with addressing the culture that supports sexual violence and oppression. Peer-to-peer support, with facilitation

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<sup>1</sup> [Facilitating Support Groups for Survivors of Sexual Assault](#), Paupel, Susan Illinois Coalition Against Sexual Assault, ReSHAPE, 2010

<sup>2</sup> [History of the Rape Crisis Movement](#), Gillian Greensite, retrieved from Washington Coalition of Sexual Assault Programs website.

<sup>3</sup> Adapted from: *Peer Support Guidebook*, 1 in 6

by an advocate, honors survivors as experts in their own experiences and healing that is community-driven.

## Purpose

Research shows that support groups lead to many different positive outcomes for survivors of sexual violence. Generally, it can help survivors develop positive coping skills, thereby mitigating negative effects of the trauma<sup>4</sup>. In traditional support groups, individuals who have had similar traumatic experiences can come together, share their stories, and support one another through the healing process<sup>5</sup>.

Engaging in the group healing that support groups offer, especially in addition to individual therapy, is one of the most effective ways to recover from the effects of sexual violence<sup>6</sup>. If nothing else, all types of support groups allow survivors to realize they are not alone. Just by being in a group setting, feelings of isolation, shame, secrecy, and stigmatization from the violence are diluted<sup>7</sup> and safety, support, and belonging can be found.

Peer support is based on the belief that people who have faced, endured, and overcome adversity can offer useful support, encouragement, hope, and mentorship to others facing similar situations.<sup>1</sup>

## Types of Support Groups<sup>8</sup>

Types of support groups offered by sexual assault support centers in Maine have changed over the years to offer more holistic and accessible forms of connection, education, and healing. Like all services at a sexual assault support center, all groups must incorporate the necessary elements of trauma-informed services: safety, trust, choice, control, collaboration, empowerment, and cultural relevance.<sup>9</sup>

### *Traditional Support Groups*

Traditional support groups are rooted in group process and trust building, so they typically are closed to new members after the first meeting and held for a finite amount of time. Survivors are active participants in creating goals and purpose of the group.

### *Experiential Support Groups*

While many of the core approaches to addressing sexual assault, such as talk therapy and crisis intervention, remain critical services for many survivors, research and experience clearly demonstrate that healing sexual trauma must holistically include the mind, body, and spirit.<sup>10</sup> Experiential support groups incorporate those holistic healing practices.<sup>11</sup>

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<sup>4</sup> Leech & Littlefield, 2011

<sup>5</sup> Orange County Rape Crisis Center Manual

<sup>6</sup> Carver et al., 1989

<sup>7</sup> [The Power of Social Connection](#), Graham, Laurie; Powell, Rob; and Karam Anna. North Carolina Coalition Against Sexual Assault and the Orange County Rape Crisis Center

<sup>8</sup> See Appendix for Quality Assurance Standards definitions

<sup>9</sup> [Holistic Healing Service for Survivors](#), Poore, Terri; Shulruff, Toby; and Bein, Kris. Resource Sharing Project 2013

<sup>10</sup> [Holistic Healing Service for Survivors](#)

<sup>11</sup> Recommended: [How Does Cultural Appropriate Affect Rural Sexual Assault Services?](#), Resource Sharing Project

### *Outreach/Educational Support Groups*

Outreach and education groups are held in a community or institutional setting (e.g.: homeless shelter, jail, residential program, elder housing). The purpose is to remove barriers to services and support by having advocates come to participants. While participants needn't identify as survivors of sexual violence, similar themes of trauma, resources, culture, and tools for healing are discussed. It is also an opportunity for survivors to connect and build trust with their local sexual assault support centers.

### *Quality Assurance Standards*

#### *Support Group Management*

1. Each center will have a statement about the nature of support groups. Clients will be informed about the statement and will acknowledge their understanding of the nature of the group.
2. All groups will have a confidentiality statement acknowledged by each group member which explains the limits of that confidentiality, including measures taken in emergency situations.

#### *Group Facilitation*

1. While it is recommended that support groups be co-facilitated, there may be circumstances when only one facilitator is appropriate.
2. Facilitators must have completed the advocate training and support group facilitation training approved by the agency, unless they are a licensed mental health professional with prior experience working with survivors of sexual assault/sexual abuse.
3. Persons facilitating a support group for the first time will co-facilitate with an experienced facilitator.
4. Each center will have written criteria for the selection of group facilitators.

#### *Screening*

Information obtained during screening will be used to determine the individual's appropriateness for group. Each center must have a written screening protocol for group members which includes consideration of the following:

- |   |  |
|---|--|
| 1. Drug/alcohol abuse                         | 8. Do they have a history of abuse?<br>How has it impacted them? |
| 2. Suicide/self-mutilating behavior           |  |
| 3. Medications/hospitalization                | 9. Comfort with diversity  |
| 4. Therapy experience/mental health diagnosis | 10. Medical condition(s)   |
| 5. Ability to participate                     | 11. Coping mechanisms  |
| 6. Nature of support system                   | 12. Eating/sleeping disorders                                    |
| 7. Have they ever abused someone?             | 13. Expectations of group  |
|   | 14. Other, as needed   |

#### *Record keeping*

Centers must maintain a file for all support group attendees, which shall include:

1. Group attendance record
2. Acknowledgement of confidentiality statement
3. Acknowledgement of support group definition
4. Copy of post-group evaluation

## 5. Relevant release of information forms

### *Evaluation*

Support group participants will complete an evaluation following the conclusion of the support group. The evaluation will measure the participant's increase in knowledge of community resources and support systems and decrease in trauma-related anxiety as a result of their participation in the group.

### *Facilitator Training*

Centers will ensure that all center-based advocate training coordinators and group facilitators have training which includes:

1. Group process
2. Group dynamics
3. Screening process for potential group members
4. Limits and boundaries of groups and facilitators
5. Roles and responsibilities of the facilitator
6. Working as a team (co-facilitators)
7. Exercises and activities for groups
8. Creation and purpose of group norms
9. Structure of groups

Additionally, group facilitators are to receive training in adult learning principles and training-of-trainer best practices. This requirement may be fulfilled by attending MECASA's semi-annual training-of-trainers opportunity, or by completing a similar training opportunity, upon approval by their supervisor.

## Starting a Support Group

Below you will find a list of questions you may consider asking yourself prior to starting a support group. Some of the questions provide examples and further points to consider. This list is not all-inclusive and its intent is to help staff and potential facilitators think through some important considerations for the initial stages of support group planning.

What type of group are survivors asking for?

Are there community partners interested in collaborating or supporting a group?

Who will this group be for?

When is the projected start date of the group?

Will the time of year present weather concerns? How will you handle cancellations due to weather or illness?

Is school in session? If you are hoping to do some outreach and advertise at a college or university, are classes in session for the duration for the group?

How many sessions will we have and for what duration?

Where will the group be held?

Is the space confidential? How many people can it accommodate? Is it accessible? Does the space meet the needs of the type of group you are holding? For example, if you are starting a Therapeutic Arts group, you will need soap and running water. If you are starting a Trauma Sensitive Yoga group, you will need space for people to move and stretch.

If the group will be off site, who is your contact for the space, how and when will the building/room be unlocked for set up, what are your responsibilities for locking up, cleaning up, etc?

Who will co-facilitate?

Do you have a good working relationship with them? Have they ever done a group before? What pieces will they be able to take on; for example, help with advertising, screenings, fielding phone calls, etc.? Will they be able to meet with you before and after the group to prepare and debrief? Who is in charge of paperwork and reporting, supplies, etc.?

Will this be a closed or open group?

If this is a closed group, will the group be kept open for a week or two to allow other group members to join?

How will the group be promoted?

Do you have a waitlist of people looking to join a group?

Your waitlist may help determine what type of group you will offer and where. It may also impact the resources you spend on advertising and outreach.

How will screening interviews be scheduled?

As people call for information about the group, who will they be directed to? What if that person is not available?

How will their information be passed along in a confidential manner?

Who will attend the screening interview? What will happen at this meeting?

How will people be notified that they have been accepted into the group, or not?

If it will be a long wait until group starts, how will you stay connected to group members?

At some centers, facilitators may offer one-to-one appointments to group members if the group is not scheduled to begin right away. Other centers may stay in touch by phone or e-mail.

Who will contact group members a few days prior to the first group to check in and provide a gentle reminder for the start date and time, and to answer any questions?

What resources am I going to need to create content for the group?

Were themes heard during the screening interviews that stood out?

Will discussion points and/or activities be pulled from existing models, such as the Trauma Recovery Empowerment Model (TREM), Circle of Support, or the Courage to Heal? (See appendix or the online toolkit for links).

What materials will we need for the first group? Who is responsible for these?

## Support Group Screening Interviewer Guide<sup>12</sup>

Screening interviews are done for traditional and experiential groups prior to someone being accepted into and participating in a support group. This is a part of our Quality Assurance Standards and helps determine if an individual is appropriate for the group process, and if the group is the right fit for the individual at this time.

The role of the interviewer is to make sure that the group is as safe as possible for everyone involved. The screening interviewer should always be one of the co-facilitators. It is best practice for both facilitators to do the interview when possible. If only one facilitator can do the interview it is ideal for each group member to meet the other facilitator prior to the start of the group.

The questions on the support group screening form need to be asked in a sensitive and non-invasive way. The client should know that it is okay to not go into a lot of detail about their experiences of sexual violence and be reassured they may take a break at any time. The interviewer should explain that these questions are being asked as part of the support group screening process and are asked of all individuals interested in joining a group. Information should be provided about the purpose and structure of group, so that the interviewee can decide if the group is the right fit for them.

The screening should be a conversation and not a formal interview. Questions and information are provided in a conversational way, and not necessarily in the order they are written on the screening form. It is important for the interviewer to become familiar with the questions so they can have a more natural interaction with the client. If something is written down during the interview, let the client know what is being written, where the information will be kept, and who it will be shared with.

During the screening conversation, the interviewer needs to provide an overview of the following:

### Group format

- Is this a skill building focused group, experiential group, peer support group, or a combination?

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<sup>12</sup> Adapted from content written by Kayce Hunton, Sexual Assault Prevention and Response Services, 2018



- Stress this is not therapy or a clinical group (even if the facilitators have the credentials to do such a group).
- Be prepared to describe a little bit about what the group might be like week to week. Will any materials be used? Will there be guest speakers? If so, who will they be and how will they maintain confidentiality?

### Group process

- Will there be a check-in each week at the beginning and a check-out at the end?
- What will happen during the group time? Although it is not possible to describe exactly how the group will go, it may be helpful to provide a typical outline for day one. This may help the client to have an idea of what to expect and may be particularly comforting if the person has never been in a support group before.
- It is important to keep in mind that some aspects of a group may be uncomfortable or triggering for participants. For example, sitting in a circle or being asked to participate in meditation may feel very unsafe. Talk with individuals about these potential aspects of group as needed.

### Facilitator roles and expectations

- Describe to the potential participant the facilitator's responsibilities:
  - To provide as safe a space as possible for all group participants.
  - To ensure that confidentiality is maintained.
  - To make sure that each group participant has an opportunity to talk and is not being pressured to talk/share if they do not want to.
  - To ensure that all group guidelines are being followed.
  - To provide education and information as requested and/or appropriate.
- Facilitators may participate in some of the group activities; however, it is important that the facilitator's roles are clear and group members are not put into the position of emotionally or physically taking care of the facilitators. If the client asks about your personal experiences with sexual violence, think through how you will best answer that question in accordance with your agency's boundaries and policies and your personal boundaries. Consult your direct supervisor for guidance or to process this further.
- Share your agency's policy on working with group participants one-to-one outside of group. At some centers facilitators do not meet with group members individually while group is happening. Other centers may not choose to set this boundary or may be unable to given agency capacity.

### Confidentiality

- It is important to discuss issues of confidentiality and how it applies to participants, facilitators, and any guest presenters. All guest presenters should sign a confidentiality agreement prior to visiting the group).
- Provide the agency support group confidentiality agreement at the screening interview, but also go over it again when the group is together. It is important that everyone hear the same information at the same time.

## Participant roles and expectations

Describe to the interviewee what the expectations are of the group participants:

- A desire and willingness to participate in the group process.
  - May participants miss a group session? If so, how many can they miss before it may be no longer appropriate for them to return?
- To maintain confidentiality during and after the group.
- To start and end on time.
  - Will group members receive a reminder call before each group meeting?
- Additional guidelines will be reviewed during the first group.

At the end of the interview assess safety before the person leaves. Answer any questions as thoroughly as possible. Individuals are encouraged to think about all of the information provided during the screening and to follow-up with any additional questions if needed.

Follow-up with the interviewee in 5-7 days to check in and see if they continue to be interested in a group and to ask if they have any additional questions. Provide support and encouragement that it is a big step (potentially) to consider a support group and thank them for their time and for coming to the meeting.

If the person wants to know at the end of the screening if they can be in a group, it is best to let them know that decisions really can't be made about the particular group until all interviews are completed. (Reinforce the concept that you are working to put together a group of people who will work well together in the group). If the interviewer feels that the person is generally appropriate for support groups, they can let the person know that without making a commitment that the person will be in the next group.

After each person has been screened, the facilitators will need to decide who has been accepted into the group and let those people know.

If it is determined that someone will not be able to join a group, the facilitator needs to let the person know as soon as it is appropriate. In some cases this may need to occur during the screening interview if, for example, they disclose they have abused someone or the interviewer feels they may be a danger to others in the group. Be honest and up front about the process and about boundaries that may need to be set.

Not everyone is appropriate for a support group. Some examples are listed below based on actual screening interview experiences:

- Sharing that: "I lash out." The interviewer needs to assess what that means and ask the person if they are able to guarantee that they will not 'lash out' to other group members.

- Disclosure of having harmed someone else physically or sexually. The support group process may be prevented or deeply disrupted if other participants learn a fellow participant has sexually abused in the past.
  - If this happens, provide in-the-moment support, offer referrals and possibly a one-time additional meeting to provide those referrals.
- The client has a hard time hearing about other people’s experiences of abuse or discloses they don’t want to hear about childhood abuse.

One week prior to the start of the group, one of the group facilitators will call each confirmed group member to verify they plan to attend, to discuss the location and time, to review what people can expect at the first group meeting, to discuss parking, and to reiterate the scent policy, if one will be established.

Handling last minute referrals:

Sometimes a group referral will come in the day of or the day before group is scheduled to begin. This can be handled in a few different ways. In some cases the person may be able to be screened quickly and it might be determined that the group is a good fit for them. Other times the group has agreed to accept new members until the second or third week, allowing time and space for new members to join. If these things cannot happen, or it is determined the upcoming group is not a good fit for their needs, they may need to go onto a wait list and have the opportunity to attend future groups.

### Minors, Screening, & Mandated Reporting

As will be reviewed in the Boundaries section of this manual: the obligation to make mandated reports to Child Protective Services and Adult Protective Services remains in the support group setting. Therefore, when preparing to facilitate a group with youth, you will want to think through what questions are being asked during a screening that could prompt a report.

How teenagers will be identified for a support group and the purpose of their support group will impact your screening and how you share your role as a Mandated Reporter, but generally it will look like it does when you support a minor on the helpline: before the screening begins, give minors a clear definition of what being a Mandated Reporter means and what information you would need in order to make a report – then let them decide what information to share.

Under the QAS we are under no obligation to ask details of the sexual abuse they experienced, so if that is included in your screening, perhaps those questions are adjusted. The Washington Coalition of Sexual Assault Programs has a nice framework for this on page 16 of their [Teen Support Group Guide](#).

## Structure & Content

### Structure

The support group structure is designed to create a formal space to explore individual experiences and feelings as well as finding connection in others. This structure creates consistency and common expectations, while also allowing enough space and flexibility for the participants to pursue what they want to get out of the group. The following structure works for traditional, experiential, and outreach/educational groups alike.

#### *Opening*

Opening a group is about creating a welcoming and centering space so that facilitators and participants can be as present and grounded as possible. Group openings might change with time and with the needs of the group.

#### *Norms*

Norms are a commitment made by all group participants that address how they will behave and communicate. Generally, a facilitator will bring one or two core group norms (i.e., confidentiality) and then build a comprehensive list with group participants. Norms are then reviewed at the beginning of every group.

#### *Topic*

The topic is the focus of the group for that session. Topics are identified by the group's needs or by a predetermined curriculum. Topics tend to include themes related to sexual violence, the impact of trauma, coping skills, and the impact of oppression and culture.

In a traditional support group, many of the topics will be identified in the screening process. In experiential support groups, the topic is embedded within the group type, i.e.: yoga, surfing, or walking. In outreach/education groups, topics vary depending on the audience. The longer a group is together, the more capacity they will have for building on topics and delving into harder content.

#### *Discussion/Activity*

Facilitators will offer participants questions to prompt reflection and sharing about the topic at hand. Sometimes a reflective activity or project will be a step prior to discussion, and then participants will have an opportunity to share and explore the topic.

#### *Closing*

The purpose of closing a group is to re-ground participants, check in before leaving, and mark the ending of the group. Some groups do a check-out, others may read a poem or offer a closing activity.

## Content Development

Advocates who are being training to be support group facilitators often get anxious or curious about what they are going to do with their time in sessions with survivors. Folks often want a curriculum or step-by-step agenda for each group. We believe (and have seen over the years) that

groups that are built in collaboration with survivors and on your strengths as a facilitator will lead to amazing opportunities for reflection, sharing, and healing.

Below are some steps to build group agendas and content without a curriculum.

### Determine topics or themes

When you screen for support groups, survivors will tell you what they want to talk about and what they want to learn. These are your topics and themes.

Some examples (from the 2019 MaineTransNet and SARSSM Support Group for Trans/Gender non-conforming Survivors of Sexual Violence):

- Coping Strategies
- Addressing Guilt/Shame
- Navigating seeing your abuser(s)
- Sex and Intimacy
- Family Relationships
- Establishing Boundaries
- Gender Euphoria
- Art and Healing
- Connecting between sexual trauma and gender identity
- Being a trans survivor, bringing our whole selves
- Resilience

Outreach groups don't always have a screening process. In that case, look at the purpose of your group and brainstorm some topics from there. Perhaps your purpose is building trust and providing time to care for the people coming to your group, so you focus on crafts and quiet time. Perhaps your purpose is education and connection with community services, so your topics may include mini training sessions or guest facilitators.

You can also get feedback from on-going outreach group participants through evaluation or conversation about what topics have worked and what hasn't worked.

Here is an example from an Outreach Jail group:

- Grounding techniques
- Boundaries
- Community Services
- Support a Friend
- Defining Sexual Assault
- CSA Prevention
- Self-care
- Impacts of Trauma

### Find relevant content

Then you take one topic and find something that will create an opportunity for reflection, discussion, sharing, and/or learning. This is your content. It can be an article, a couple of questions you created based on the topic, a poem, a worksheet, a craft...the options are truly endless and really well served by your own strengths and skills.

Where to find content:

- Media, articles, music, & literature
- Curriculum (you don't have to use the whole thing! Adapt and use bits and pieces)
- Staff brainstorming & institutional wisdom
- Personal skills & style
- Crafts & art

- The MECASA Intervention Toolkit

### Prepare content for the session

Now you have this article, this poem, as the facilitation you support reflection and discussion. Very often, especially in an established group, just asking the group “So what do you think?” begins a great conversation and then you can facilitate, support, and ask questions as the conversation progresses.

But it’s best to be prepared! So here are some recommendations for follow up questions:

#### *Plan A*

So what do you think?

#### *Plan B*

How does this connect with your experience?

Does this offer a difference perspective than what you walked in with?

Is there anyone you would want to share this with?

Does this connect with last week’s conversation in any way?

#### *Plan C*

This doesn’t seem to be resonating with anyone, am I right?

What shall we move onto?/Let’s move on to this other prompt/activity.

### Ordering your sessions

Every survivor choosing to enter a space to talk about their trauma and the impacts of violence is taking a risk. We can not guarantee safety in all spaces at all times. But we can build our support groups so that there is time for trust to be established, norms to be learned before delving into hard or more intense content.

You may also find that one topic ends up spanning more than one session.

## Skills and Characteristics of an Effective Facilitator

### Skills

1. Models group norms (e.g. confidentiality, self-care)
2. Maintains focus on the agenda and process, while holding and managing a safe space
3. Manages time effectively
4. Is willing and able to work with a co-facilitator
5. Listens actively and effectively
6. Encourages participation in a variety of ways – silence, questions, pairs, dyads, writing, and verbal
7. Recognizes group stages and dynamics and uses that to inform group process
8. Understands options and chooses interventions when necessary, including de-escalation
9. Is comfortable with crisis management
10. Knows how to access debriefing, self-care, and support
11. Utilizes the experience of others in the room
12. Has done their own healing work, as needed, and doesn’t use support group for personal process

### Characteristics

- |  |                               |
|--|-------------------------------|
| 1. Flexible  | 7. Good boundaries            |
| 2. Self-aware  | 8. Has a sense of humor       |
| 3. Is open to style differences and individual roles | 9. Confident                  |
| 4. Seeks a space where everyone has a voice          | 10. Consistent and reliable   |
| 5. Non-judgmental                                    | 11. Honest                    |
| 6. Open and engaging                                 | 12. Comfortable with silence  |
|  | 13. Knows what you don't know |

## Limits and Boundaries

One of the responsibilities of sexual assault support group facilitators is to engage in a continual process of examining and identifying your organizational and personal boundaries in doing this specific work. Here are some things to think about:

### Organizational boundaries

Organizational boundaries are guidelines, policies, and protocols organizations create to structure relationships between staff and clients. They most often exist in written form and are derived from laws, regulations, grant requirements, and codes of ethics that govern staff roles. Policies such as protecting confidentiality and privacy or not driving clients in your car are examples of organizational boundaries. It is important that you understand your organization's policies and practices that govern relationships with the survivors you are supporting.

Program boundaries are specific to support groups and may vary agency to agency. These may include whether or not group participants are permitted to communicate outside of group, substance use, honoring gender identity, and/or engaging outside services if someone is in crisis.

### Personal boundaries

Personal boundaries are guidelines, rules, or limits that a person creates to identify reasonable, safe, and permissible ways for other people to behave towards them and how they will respond when someone passes those limits. They are built out of a mix of past experiences, conclusions, beliefs, opinions, and attitudes.

Take the time prior to starting the first group to think through common boundary issues, such as self-disclosure, relationships outside the group, or running into a group member at the grocery store.

Deciding if and when to share personal experiences is often a very difficult skill to master, and the level of self-disclosure with which each individual facilitator is comfortable varies. Here are a few useful questions to consider anytime you are wondering whether you should disclose something personal:

- Would disclosing this information be helpful for the members of this group?
- Would the self-disclosure meet a personal need in some way (i.e., is it more for your benefit than the group's benefit)?
- Does my agency have a policy or practice about self-disclosure?

## Mandated Reporting

The obligation to make mandated reports to Child Protective Services and Adult Protective Services remains in the support group setting.

## Confidentiality and Privilege

The legally protected privilege that an advocate has with a survivor does not apply anytime another person is in the room. So, in a support group setting, while all practices of confidentiality remain in place, privilege does not. Take this into consideration always, but especially if you have a support group member whose experience is connected to an active civil or criminal case. You might want to have a conversation with that participant ahead of the first meeting so they make informed decisions about what they choose to share (or not) in group.

## Duty to Warn

Duty to Warn and Duty to Protect are legal terms that describe someone's legal obligation to report threats of homicide or suicide to law enforcement or crisis. All advocates nationally follow the Violence Against Women Act (VAWA) regulations regarding confidentiality which, in the most recent version (2016) say an advocate can share information about a client, if:

1. There is a written, time-limited release of information from the client, or
2. A statutory mandate, or
3. A court mandate, which includes case law.

But every state is different in its reporting requirement regarding Duty to Warn/Duty to Protect. In Maine there is no case law or statute that creates permission or mandate for advocates regarding Duty to Warn or Duty to Protect – which means reporting threats of homicide or suicide without a release of information from a client violates VAWA regulations.

Agencies need to have training, support, and policies to address what to do if a group member presents a threat to harm themselves or someone else. Overwhelmingly it will be a plan to work in collaboration with the participant to access crisis supports.

## Boundaries and Co-facilitators

Discuss boundaries with your co-facilitator prior to starting a support group and as a regular part of your debriefing after each group. Co-facilitators could be bound by the same organizational boundaries but can have very different personal boundaries. For instance, one facilitator may be more likely to engage in self-disclosure in a support group; another facilitator may think it is never acceptable to offer personal information or experience to the group. It is important to have some awareness of each other's approach, style, and boundaries before the first group begins. This will avoid group member confusion about what is acceptable and not.

## Group Stages

As support group participants get to know each other, understand their shared group purpose, and build trust, the group will shift and change. All groups and group dynamics are different, but there are some common stages of group development:



## Forming

Lack of clarity about the purpose and process, a feeling of testing the waters, who are we, why are we here, what's allowed, and building trust.

### *What they may need*

Clear information about the process, norms, etc., modeling of participation and communication, development of group guidelines/norms, and leadership.

## Storming

Testing each other and group agreements, conflict with each other and the facilitator, and discovering roles and communication styles.

### *What they may need*

Opportunities to express differences and see different perspectives, modeling good listening and conflict resolution skills, involving quiet members, as well as paying attention and helping the group move into claiming the space for themselves.

## Norming

Learn from storming stage how to work together, making decisions and resolving conflicts, an increase in trust and potential for the group.

### *What they need*

Challenge the group think if it develops, review big picture, push to focus on their shared goals.

## Performing

Achieving common goals, motivated, and participation by all members.

### *What they may need*

Good listening skills from facilitator, motivation/resources to build skills, recognition, perhaps to develop new goals.

## Intervention Strategies

All sorts of behaviors are normal and part of group dynamics. They all happen for different reasons and needn't be pathologized. The behaviors below are listed because they could impact the safety, growth, and trust within a support group. But not always – someone monopolizing the time might need that support and the group may want to provide it, so it's important we ground ourselves in the question, "How is this behavior impacting the group?" And remember, there's always – "In the interest of time..."

## Steps for Intervention

If there is a behavior impacting the group (any behavior) there is a series of questions you are going to ask yourself. Depending on the answers, you may choose to take steps to address the behavior.

1. Go inward first (Is it just me?)
2. Be curious vs. certain
3. Determine if the behavior is impacting safety and/or the whole group
4. Consider your options
5. Gently intervene
6. Determine if further discussion is needed in the moment or later
7. Reflect later on learnings

## Aggressive

Criticizing or blaming others, showing hostility against the group or some individual, deflating the ego or status of others, using aggressive language, volume, or tone.

### *Suggestions*

- Touch base with the individual after group. "You seemed angry. Can you tell me about that?"
- Remind everyone that this is a safe place to express feeling and anger is a feeling we often suppress. Explain that it is ok to express anger but not to become aggressive with the other group members as they need to feel safe as well.
- "Tonight was a really rough night. Maybe it would be helpful to take a break."

## Conflict Between Participants

### *Suggestions*

- Identify differences, normalize them, and remind folks to respect one another.
- Refer to the group agreements.
- Take a break and address folks one-to-one.
- Role model communication by recognizing discomfort and focusing on the goals of the group.

## Monopolizing the Conversation

Taking up space in the conversation without consideration to other participants.

### *Suggestions*

- "Let's take 5 or so minutes to talk about it and then move on"
- "I'm wondering what this may be bringing up for others?"
- Use a "talking stick" to allow others to speak without interruption.
- Tell the group it's time for someone else to speak, may need to redirect.
- Offer the person a chance to continue conversation after group.

## Self-confessing

Using the group as a sounding board, expressing personal feelings or points of view unrelated to the group or their sexual assault experiences.

### *Suggestions*

- Follow up with member after group and check in on how they are doing.
- Acknowledge, validate, and redirect: “Wow that sounds like a very difficult experience for you, thank you for sharing. Others might be able to relate to you. Would anyone like to share their experience?” or “Your experience is related to our next question...”
- If the content is especially detailed, pause to check in to see how the group is doing.

## Withdrawn

Acting indifferent or passive, resorting to excessive formality, daydreaming, doodling, whispering to others, non-verbal participation.

### *Suggestions*

- Touch base with the individual after group. Ask if there is something about the group that is uncomfortable for them. Ask if there are ways that would make it easier for them to contribute.
- Remember that some are better listeners than they are talkers and will get more out of it by not contributing and that is OK.
- Ask if you could remind the group that everyone contributes in different ways and one way may be, to be silent.
- State that you would like to hear everyone’s perspective.
- Create norms that provides space for all to talk.
- Recognize and validate possible discomfort and vulnerability.
- “Do you have anything you’d like to add?”
- Notice if someone is trying to speak and protect that space for them.
- Recognize that you value their participation when they do speak.

## Co-Facilitation

The benefits of co-facilitation include having two people to facilitate the group in addition to being able to support an individual who may need to step out of group when triggered. Each facilitator brings their own qualities and skills which can help the group feel like a good fit for a wide audience. It also means a group doesn’t need to be canceled if one facilitator cannot make it. At the same time, co-facilitation requires more time both before and during the group to tend to the relationship between the facilitators.

### Benefits of co-facilitation

- Learning from one another, especially a newer facilitator learning from an experienced facilitator.
- Someone to reflect and debrief with.
- Sharing in responsibility for preparing and facilitating through alternating or shared tasks.
- Strength from different styles of facilitation and advocacy.

- Offering choice to participants regarding said style of facilitation and advocacy.
- Building rapport and trust among coworkers.
- A balance of assumptions when interpreting participant needs and responses.
- Modeling support (and respectful conflict) to one another.
- Reduction of potential harm or danger if intervention is needed with participants in conflict or crisis.

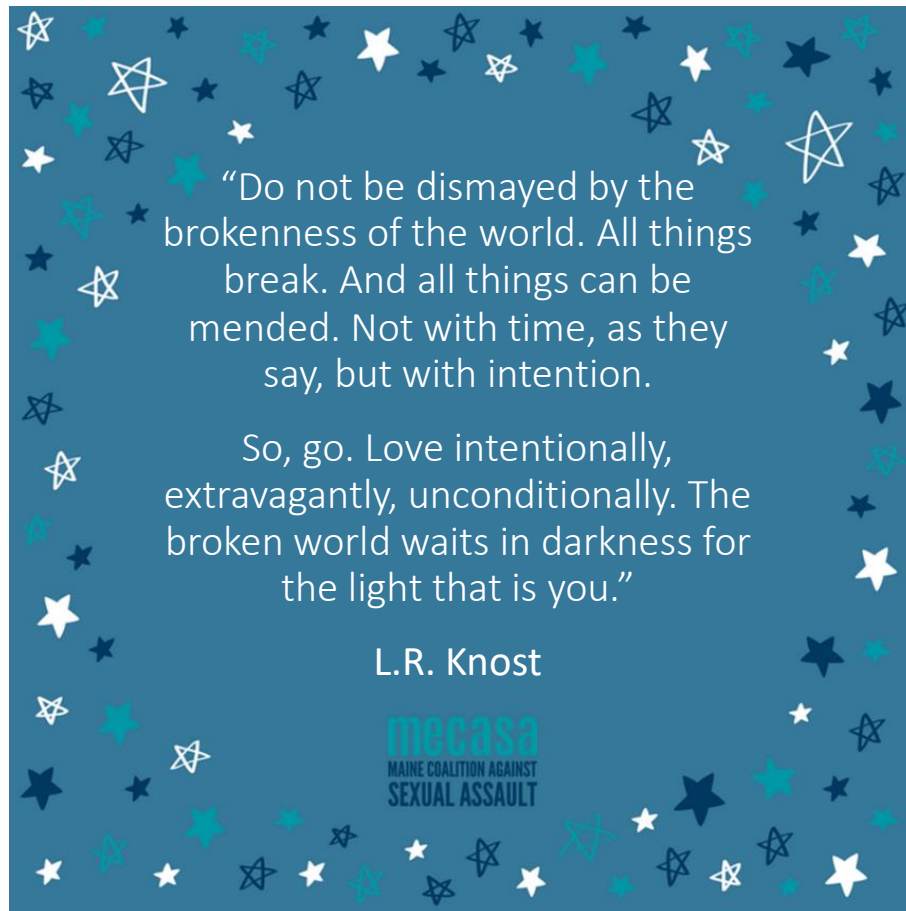
For co-facilitation to serve the group well, the facilitators need to develop a relationship that allows them to work together seamlessly within the group. Developing that relationship takes intention, time, and effort and it needs to start well before the group does. In the appendix you will find two check lists: one for preparing for your co-facilitator relationship (questions to explore, conversations to have) and the other for the two of you to use when prepping and debriefing groups.

### Consideration for working with community partners

Partnering with another agency can benefit support group participants by connecting them with more community resources and specialized support. Since organizational policies and practices are different, it's important to review those boundaries before you even beginning planning a group.

Things to review:

- How both of your agencies view the purpose of support groups
- Both agencies' structure and philosophy around peer support.
- Boundaries regarding personal disclosure.
- Agency policies regarding providing transportation.
- Agency safety practices and mandated reporting policies.
- How you will share in group preparation and facilitation.
- How to make referrals to services and support outside of group.
- Communication with participants outside of group.
- If you are in a community space/community agency, review host agency policies regarding mandated reporting, safety practices, and communication about crisis.



## APPENDIX

### Support Group Definitions

The following guide was compiled by Client Services Managers at a MECASA Affinity Meeting when revamping the Quality Assurance Standards in 2013.

	Participant Characteristics	Goals & Purposes <sup>13</sup>	Group Examples
Traditional	<ul style="list-style-type: none"> <li>• Has begun and can talk about their healing process</li> <li>• Ready to explore new options for healing</li> <li>• Has more stability in their lives</li> <li>• Can coordinate their own transportation, child care, etc.</li> <li>• Identifies as either male or female.</li> <li>• Self identifies as a victim/survivor of sexual violence</li> </ul>	<ul style="list-style-type: none"> <li>• Connect with other survivors (breaking isolation and sense of being ‘alone’)</li> <li>• Foster healing</li> <li>• Increase personal knowledge of the dynamics and impact of sexual violence on themselves</li> <li>• Develop and maintain coping skills</li> <li>• Provide peer-to-peer support for others</li> </ul>	<ul style="list-style-type: none"> <li>• Traditional Support Groups tend to include an identified audience: Women, Men, CSA Survivors, LGBTQ+ Survivors, etc.</li> </ul>
Experiential	<ul style="list-style-type: none"> <li>• Higher self-management/regulating skills</li> <li>• Often a supplement to on-going healing process, e.g.: referred by current therapist</li> <li>• Next/different level of healing for when verbal processing has plateaued</li> <li>• Self identifies as a victim/survivor of sexual violence</li> </ul>	<ul style="list-style-type: none"> <li>• Increase/create a mind &amp; body connection</li> <li>• Exposure to multiple means of healing and multiple aspects of integration</li> <li>• Enhance self-care and coping skills</li> </ul>	<ul style="list-style-type: none"> <li>• Yoga</li> <li>• Surfing</li> <li>• Drumming</li> <li>• Art</li> <li>• Physical movement (see Orange County Rape Crisis Center’s Walking Support Group!)</li> </ul>
Outreach & Education	<ul style="list-style-type: none"> <li>• Marginalized and highly victimized populations who have high barriers to accessing services, including: individuals with disabilities, elders, incarcerated women, homeless and street involved adults &amp; youth, victims of domestic violence</li> <li>• Traditionally underserved by population</li> <li>• Do not have to identify as victims of sexual violence.</li> <li>• Self-selects attendance at group</li> </ul>	<ul style="list-style-type: none"> <li>• Increase participant awareness of resources— both from the SA agency and the community</li> <li>• Build peer and community support systems</li> <li>• Increase skills designed to increase protective factors and decrease risk factors</li> <li>• Build trust with SA agency and other systems</li> <li>• Refer to SA agency services</li> </ul>	<ul style="list-style-type: none"> <li>• My Life My Choice</li> <li>• Jail groups</li> <li>• Groups at shelters</li> <li>• Tea and Tips in housing for older adults</li> </ul>

## CO-FACILITATION: Before the groups starts

### Things to discuss

- Share your experienced with facilitating and co-facilitating support groups.
- Any reflections you have on your facilitation style and vibe.
- What are your hopes and expectations for this group?

<sup>13</sup> MECASA Quality Assurance Standards

- Share what areas of facilitation you feel least confident about and what support or feedback you'd like from each other.
- Share what areas of group or facilitation you feel excited about and are interested in taking the lead.
- Each other's personal and organizational boundaries and how you'll support each other.
- How will screening interviews will be coordinated?
- If you can't both be there for interviews, how will the information be communicated, and group participants be decided?
- How group details will be communicated.
  - Contact info you will give potential participants:
  - Person to confirm with participants:
  - Snow day communication:
  - Day-of questions and communication:
- Agreement of strategies to address specific situations in group:
  - Someone steps out of group:
  - One facilitator is on call:
  - Someone is in crisis:
- Review specifics for the first session: how you will set up the room, where you each will sit, etc
- Schedule a regular time after each session to debrief. Consider a brief chat immediately after the session and a longer conversation within a couple of days. Whenever it is, make sure you meet before the next session.
- Put together a box of essential materials to take to every session. It could include things like name tags, pens, paper, handouts, new member folders, a sign-in sheet, snacks and paper products, tissues, and anything else you think will be needed.

## CO-FACILITATION: prepping & debriefing groups

### Before group begins

- Concerns about the upcoming group meeting.
- Review plans/outline for the group and assign sections.
- Assign necessary tasks: materials for activities, needs for the space, etc.

### After each group

- Briefly check-in with each other. Confirm longer debriefing time.
- At the scheduled longer session, discuss:
  - Any specific situations that happened in the group.
  - What went well, from each of your perspectives?
  - What could be improved next time?
  - Feelings/thoughts and any vicarious trauma.
- Prep the next group
- Decide who will track data and enter data.
- Follow up with any participant needs.

After the final group

- Briefly check-in with each other. Confirm longer debriefing time.
- At the longer session, debrief last session as above
- Review evaluations and debrief entire support group
  - What went well, from each of your perspectives?
  - What could be improved next time?
  - Decide how to record/store your conclusions so that it can inform future groups.

SAMPLE: Standard Support Group Screening Form

Date: \_\_\_\_\_ Interviewer(s): \_\_\_\_\_

Name: \_\_\_\_\_

Pronoun: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number (s): \_\_\_\_\_ May a message be left? \_\_\_\_\_

*(Detailed or nonspecific)*

Best time to contact: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency contact (and signed release): \_\_\_\_\_



How did you hear about our services?

What interests you about being part of a support group at this time?

Do you have any hesitations or concerns about being in a group?

What has helped you in your healing process? (Counseling, groups, self-help, etc.)

Who lives with you at this time?

Do those individuals know about the sexual abuse? The support group?

How does the family interact/communicate?

What are the stresses in your life?

How do you take care of yourself?

Type of abuse/assault: At what age?

How long did the abuse go on? Who was the perpetrator?

Has it stopped?

If so, When/how?

Have you always remembered the abuse?

Did you tell someone? If yes, who? Their reaction?

Have you noticed changes in yourself since the abuse? (eating, sleeping, socialization, substances, etc.)

Have you ever felt suicidal? When? How did you cope with those feelings?

Are you feeling suicidal now? How do you cope with those feelings?

Do you have a history of substance abuse? Are you currently using?

Have you ever been given a mental health diagnosis? If so, what was that diagnosis?

Have you ever been in a treatment program for mental health or substance abuse?

Do you have any health concerns that you would like the group facilitators to know about?

Have you ever abused or assaulted anyone?

**Other information:**

- Due to many people having scent-based allergies we are requesting all group participants refrain from wearing perfumes, colognes, after shave, etc.

- Do you have reliable transportation to and from the group?
- Are you comfortable with diversity (age, beliefs, sexual orientation, etc.) within a group setting?
- Best days/times for a group meeting?
- Do you anticipate being able to commit to weekly meetings for the duration of group?

## SAMPLE: Multi-agency Screening Guide

### Trans Support Group Conversation Guide

In 2019 advocates from sexual assault support centers and Maine Transgender Network co-facilitated groups for trans and non-binary survivors of sexual violence. Part of that partnership included developing a screening process (and an evaluation process) that fit the style, values, and policies of both agencies. Below is the shared screening tool centers and MTN facilitators used for prospective group participants.

Participant Name: \_\_\_\_\_ Pronouns \_\_\_\_\_  
 Facilitator Name: \_\_\_\_\_ Pronouns \_\_\_\_\_  
 Facilitator Name: \_\_\_\_\_ Pronouns \_\_\_\_\_  
 Date: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Voicemail Message okay? Yes \_\_\_No\_\_\_

What the best way to get a hold of you if group is canceled?

Preferred way to be contacted: Text\_\_\_ Phone Call\_\_\_

Is there someone you would want us to call in case of an emergency? What pronouns or name should we use for you? Does this person support your gender identity? If no, how would you like us to navigate coordinating your care with them?

Navigating emergency contact instructions:

## Introduction

### *Purpose of this conversation*

Mostly this is a chance to get to know each other and see if we are a good fit. It is a space for you as a potential participant to learn a bit about us as facilitators and our ideas for what this group will be like. Lastly, this is an opportunity for facilitators to listen to you and learn how we can make this group a safe(r) and healing space for you. We hope to do this by discussing our conversation guide questions below.

### *Purpose of the group*

This program, one of the first of its kind, will offer a confidential and safe environment for trans identified and gender non-conforming folks to talk about their experiences as survivors, to learn coping skills, access resources, and create a community of support.

### *Logistical information*

Group will begin on \_\_\_\_\_ and run for \_\_\_\_\_ weeks. Last Session will be \_\_\_\_\_

Location \_\_\_\_\_

Time \_\_\_\_\_

Are there any sessions you won't be able to attend?

Snow day protocol: Facilitators will notify you through your preferred method of contact if we have to cancel due to snow. We plan to make up any missed sessions.

### *Accessibility*

Here is a rundown of what the space has: (Facilitator expands on navigating the space. Address, entrances, bathrooms, privacy, accessibility offerings, etc.). Here is what the space looks like currently: (show picture.)

Is there anything we can do to make sure the meeting space is accessible for you? Physical accommodations like chairs without armrests, wheelchair ramps, gender neutral and/or handicap toilets etc.? Do you have any sensory needs that we can assist with? Certain lights, smells, sounds etc., anything that would interrupt your participation in the group?

Any questions about space logistics?

## Conversation Questions

You are in control of how you share your experiences. This can be a space for you to share the details of your story if you feel empowered doing so, but it is not expected nor required to participate.

1. What made you consider coming to a support group?
2. Have you thought about your personal goals for the group? What are you interested in addressing?
3. We plan on having the group create ground rules together. Is there any group norm you would like to share? What is important to you about how the group operates? Share handout of MTN ground rules and discuss.
4. Do you have any other experience with groups? If yes, what was the best thing about the group? What was the hardest thing?
5. We recognize that healing is not linear. We don't think you need to be any amount of "healed enough" to be in this group. At the same time, we accept that the nature of this group is intense and has the potential to be triggering. Being triggered or "sent back into your trauma" can look like many different things to different people. What have you noticed about how you react when you are triggered? What has been helpful to support you? What has not been helpful? Can we make a plan about how we can help when that happens?
6. In life when coping with really difficult circumstances, it's not uncommon to have behaviors that are harmful to yourself or others. We believe you know what's best for you and are not here to put a judgment on the ways you cope. This is an opportunity to talk about the ways we cope and provide support if a coping mechanism is being more harmful than helpful to you. Are there any ways in which you cope that feel harmful and that you would like support around from us? Are there any healthy coping skills we can reinforce or suggest?
7. What does your support system look like? Are there folks you can lean on when things are tough?
8. We recognize that healing is really complicated and has many different paths. Our support group is just one of those paths. Are there other healing paths you have tried or are interested in?
9. Safety is a complicated subject but so important to the space we are trying to cultivate in this group. What do you need to feel safe within a group?
10. Many survivors seek out mental health support after a sexual assault. Have you had mental health/medical/medication experiences that were helpful? Any that there were unhelpful? Anything important we should know about how to best support you? Anything you are worried might impact your participation in group?

11. Is there someone or anyone in the trans/queer community that you would feel unsafe and unable to participate in this group with?
12. What do you do to take care of yourself? What do you do for fun?
13. Any questions or concerns about the group?

*In the moment needs*

Example 1. You are listening to another group member share their story of sexual violence and you need to leave the room. Would it be helpful for us to check in on you? Do you just need time alone? For how long? Do you have a favorite grounding exercise we could plan to do with you? What else?

Follow up needs.

Example 2. If you feel you are having a tough night, is there anyone it would be helpful to call for you, or call with you, on that night or the following day?

*Things you should know about the group*

1. Though this group can be therapeutic in nature, our role is to be your advocate, not your therapist. We are committed to being with you in this space for healing and can help connect you to therapy and other resources for continued support in your healing.
2. A reality of this work\* and community is that sometimes survivors have also caused others sexual harm. If this is true in your experience, that does not stop you from participating in this group, but due to how we are funded, we are not able to discuss those experiences in this group. (\* unpacking and undoing the impacts of sexual violence within society as a whole)
3. Our support group is a sober space. If that's ever an issue for you and need support around that, we want to work with you to maintain accessibility in the space.
4. Review Maine Trans Network Guidelines, they also apply in this group.

*Next Steps*

We will be meeting with folks for the next couple of weeks and from our list of potential participants will be trying to craft a group of 6-8 people who will be a good fit for each other and this group. We will be getting back to you between \_\_\_\_\_ and \_\_\_\_\_ to follow up.

## SAMPLE Support Group Referral Form

When a caller requests information about participating in an agency support group, please complete the following information and give to the Client Services Coordinator or another designated person.

Caller's Name: \_\_\_\_\_ Staff Completing this Form: \_\_\_\_\_

Today's Date: \_\_\_\_\_ Date of Contact: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ May a message be left? \_\_\_\_\_

*(Detailed or nonspecific)*

Best time to contact: \_\_\_\_\_

Type of Support Group Requested:

- (Adult) Survivors of Childhood Sexual Abuse
  - (Adolescent) Survivors of Sexual Abuse
  - (Adult) Survivors of Sexual Assault
  - (Non-Offending) Parents & Caregivers
  - Concerned Others Support Group *(18 and over)*
  - Experiential Based Support Group: *Examples: Trauma Sensitive Yoga or Art/Craft*
  - Other
- 

Caller requests follow-up contact:

- Within 72 hours
- Within one week
- Other \_\_\_\_\_

Any Additional Information:

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## SAMPLE: Support Group Guidelines/Group Agreements

### Self-Care

Please do not use substances before the group meeting.

Please be honest and ask for what you need.

If you feel you may harm yourself/someone else or you are in danger, please tell someone and ask for help.

It is okay to ask questions and okay not to answer questions asked of you.

You may leave the room at any time but please come back into the group.

### Supporting Others

Please maintain confidentiality during and after group ends.

Please let each person finish what they are saying and only talk one at a time.

Respect each person in the group.

Give listening and support, not advice or judgment.

### Boundaries

We will begin and end on time. If you need to miss a group, call the office at XXX-XXXX.

Some people may have been in a group at XXXXXX before or met individually with one of the facilitators. Please keep in mind this is a new group. We ask that when talking about past conversations, everyone in the group is clear about what is being shared.

We request that group members do not socialize outside of group until the last group session is complete.

### Additional Information

Smoking is not permitted in the building.

Cancellations: Group may be canceled due to weather or illness. The decision will be made by (time) on the day of the group. The facilitators will call each group member to let them know of a cancellation.

Is there anything you would like to add?

## Confidentiality Agreement for Support Group

\_\_\_\_\_ is committed to creating a safe group environment. What is talked about in the group is private and confidential.

1. The names of group members and their families are not shared with anyone.
2. Only the first names of group members and facilitators will be used.
3. What is said in the group stays in the group.
4. The day and place of the group will not be shared with anyone.
5. The privacy of group members and their families continues when group is over.

Advocates are mandated reporters. That means information shared about a child or adult who is possibly in a dangerous situation may be reported.

I understand and agree to the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

—

Witness \_\_\_\_\_ Date \_\_\_\_\_

—



## MECASA's Favorite Support Group Resources

### Manuals

[Circle of Hope: A Guide for Conducting Effective Psychoeducational Support Groups](#), Washington Coalition of Sexual Assault Programs  
[Power of Social Connection](#), North Carolina Coalition Against Sexual Assault  
[Holistic Healing for Survivors](#), Resource Sharing Project  
[Support Group Manual](#), AMHC Sexual Assault Services

### Facilitator Guides & Curriculum

[A Guide for Facilitators of Transgender Community Groups: Supporting Sexual Violence Survivors](#) - Forge  
[LGBTQ+ Support Group Facilitator's Guide](#), MECASA  
[Trauma Recovery and Empowerment \(TREM\)](#), Maxine Harris  
[How to Support and Facilitate a Support Group for Victims of Stalking](#), Stalking Resource Center

### Webinars

[Part of the Solution: Gender-Integrated Sexual Assault Support Groups](#), Forge.