INTRODUCTION

Quinnipiac

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The Dorey Method[™] (TDM) Program of Integrative Study is a comprehensive approach that works with trauma survivors – specifically, those who have been subject to violent crime, sex trafficking and/or labor trafficking – in efforts to restore their emotional and social well-being. Additionally, TDM tests (through the EQi 2.0 measure) the veracity of the hypothesis that breaking the generational/cultural barriers that precede, support and drive much of this trauma, can be broken.

TDM is a one-year program of study, which incorporates nine in-field tested methodologies: Your Belief System (based on Peterson & Seligman work in the Positive Psychology domain); Creative Problem-Solving (Miller-Firestien-Vehar/2001); the Thinking Skills Model (Puccio-Mance-Murdock/2010); The Leadership Challenge (Kouzes-Posner/2007); EQi[®] 2.0 (MHS Inc./2011 and Bar-On/1997); Foursight[®] (Puccio/1999); The SAVI Approach (Meier/2000); The Chain of Defense[™] (Dorey/2019 and Aviram/2009); and Servant Leadership (McNeal/2006).

With the administration and analysis of a paper and pencil self-report qualitative psychometric measure (the EQi[®] 2.0), insight can be gained on the emotional and social functioning composite scales of Self-Perception, Self-Expression, Interpersonal, Decision Making, and Stress Management - more specifically, in the subscales of Self-Regard, Assertiveness, Problem-Solving, and Optimism.

TDM hopes to restore and reinforce emotional and social functioning through the facilitative use of applied creative discussions/exercises anchored in The Affirmative Environment, while simultaneously teaching positive value-driven behaviors; creative problem-solving skills; cognitive thinking and affective skills; leadership practices; emotional and social well-being competencies; creative preference styles; utilization of all four senses when learning new subject material; self-defense skills; and instilling the importance of paying it forward.

This novel, innovative approach for trauma survivors' restoration, quantified by the EQi 2.0 psychometric measure, aids the cohort emotionally, socially, intellectually, spiritually, and physically. Our work during TDM also centered around achieving financial and trafficked independence, which included financial and academic monies toward education and vocational training, healthcare costs, and safe shelter for participants and their children.

The absolute goal of TDM hopes to break the generational/cultural cycle of violence and trafficking, while establishing new protocols for the treatment of those affected trauma survivors.

OBJECTIVES

- Collect and analyze data on emotional and social intelligence and wellbeing of a unique population pre-, mid-, and post-intervention of The Dorey Method Impact Study.
- Assess and analyze the intervention method and gain the ability to educate survivors, communities, healthcare organizations, and various medical professionals.
- Build a trauma survivor's adaptability; self-efficacy; positive valuedriven behaviors; creative problem-solving skills; cognitive thinking and affective skills; leadership practices; emotional and social well-being competencies; creative preference styles; utilization of all four senses when learning new subject material; self-defense skills; and instilling the importance of paying it forward – anchored within an applied creative, affirmative environment.
- Break generational/cultural barriers within existing and future subject pool in order to break the cycle of violence.

WHEN CO-RESEARCHER FANWI SERAPHINE KAKWI WAS ASKED, "WHAT IS THE ONE FACET WITHIN TOM THAT MAKES ALL THE DIFFERENCE?" SHE REPLIED:

"THE FEELING OF BELONGING BRINGS LIFE TO THE INDIVIDUAL WHO KNOWS ONLY DESPAIR, COUPLED WITH A RESOLUTE FAITH THAT IS OPENLY SHARED."

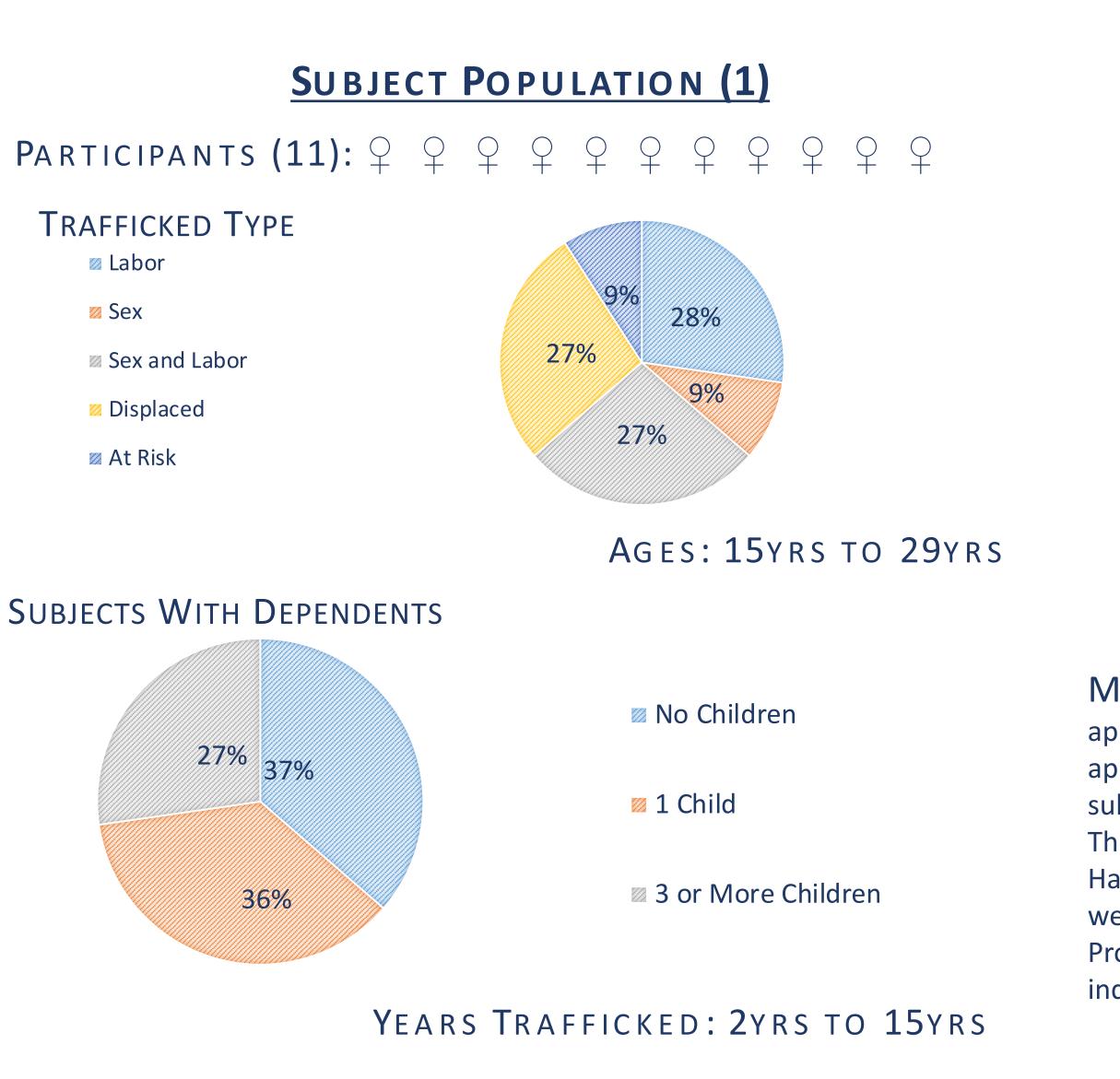
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SUBJECT POPULATION 1: All participants in the Impact Study (1) live in or around the city of Bamenda, Northern Cameroon (Africa). They range in age from 15 to 29, are female and of African race and nationality. All have experienced moderate to severe emotional and/or physical trauma. One of the 11 dropped out of the Impact Study. Of the 10 remaining, six have children ranging in ages from infant through young adult. When TDM began, all participants were either being trafficked, displaced or at risk; today, all are free. Northern Cameroon has been in a Civil War with the Republic of Cameroon since September 2017, disputing the use of the English language over French. To date, over 3,000 have been killed with a half million displaced. All societal frameworks within Northern Cameroon have been greatly strained inclusive of medical care, jobs, education, and living conditions. The one participant in the Experimental Group (2) and one participant in the Control Group (3) live in the United States, are male and female, respectively, and have experienced severe emotional and/or physical trauma from being sex trafficked. They are currently free from trafficking

THE DOREY METHODTM PROGRAM OF INTEGRATIVE STUDY: AN INNOVATIVE AND DYNAMIC APPROACH TO RESTORATION AFTER TRAUMA

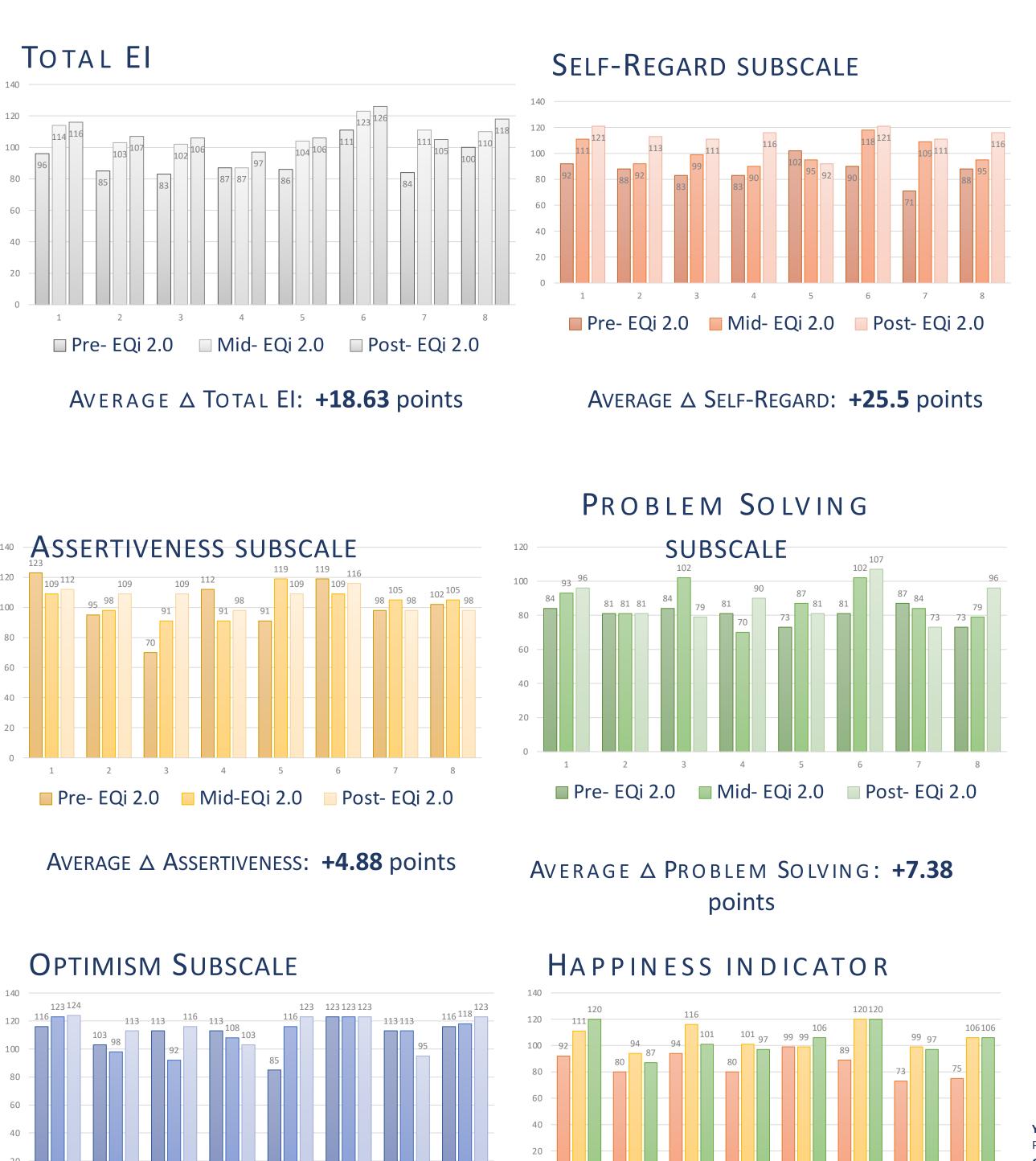
KATHYSUE DOREY¹, RANI PATEL², AND FANWI SERAPHINE KAKWI³

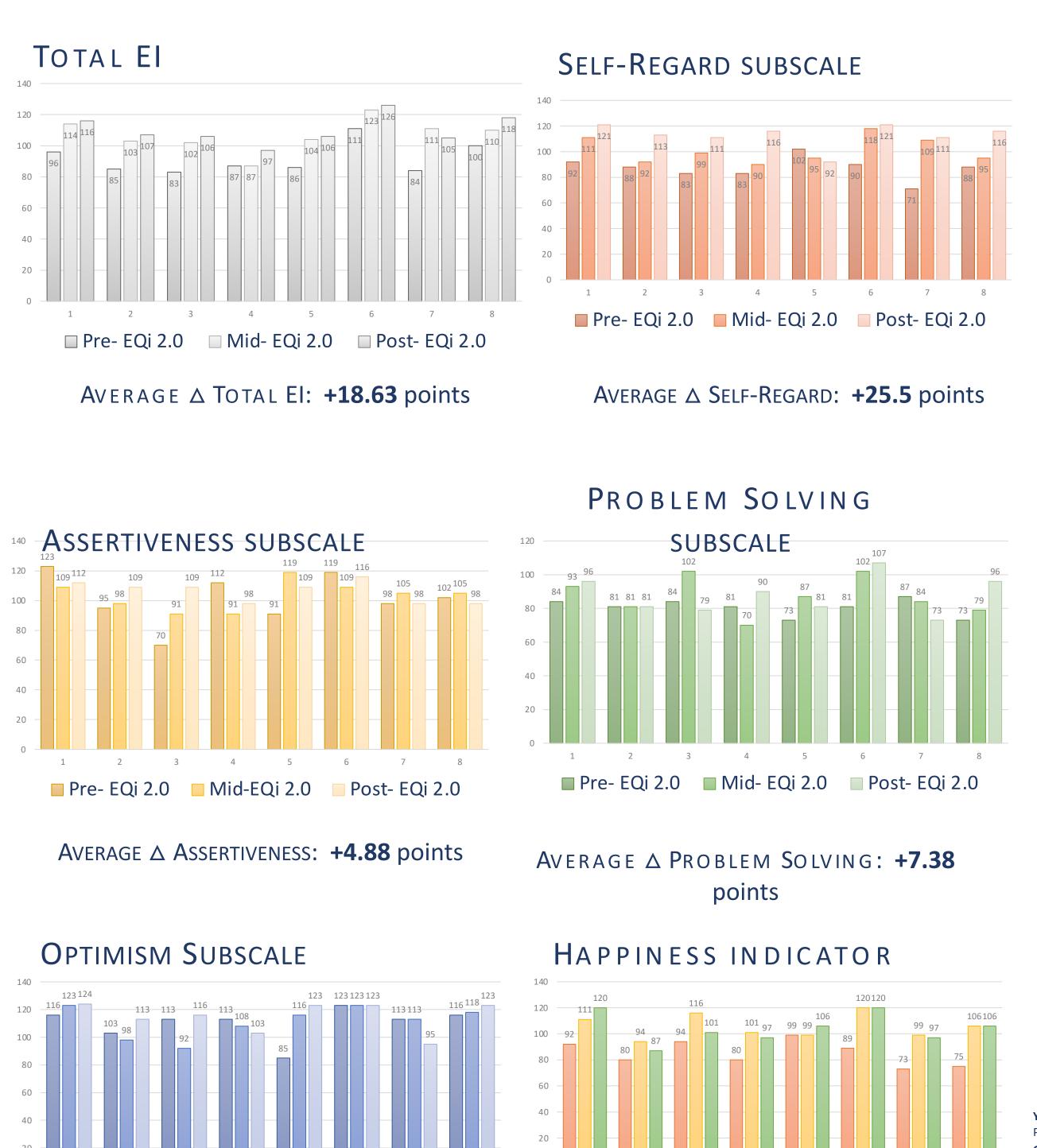
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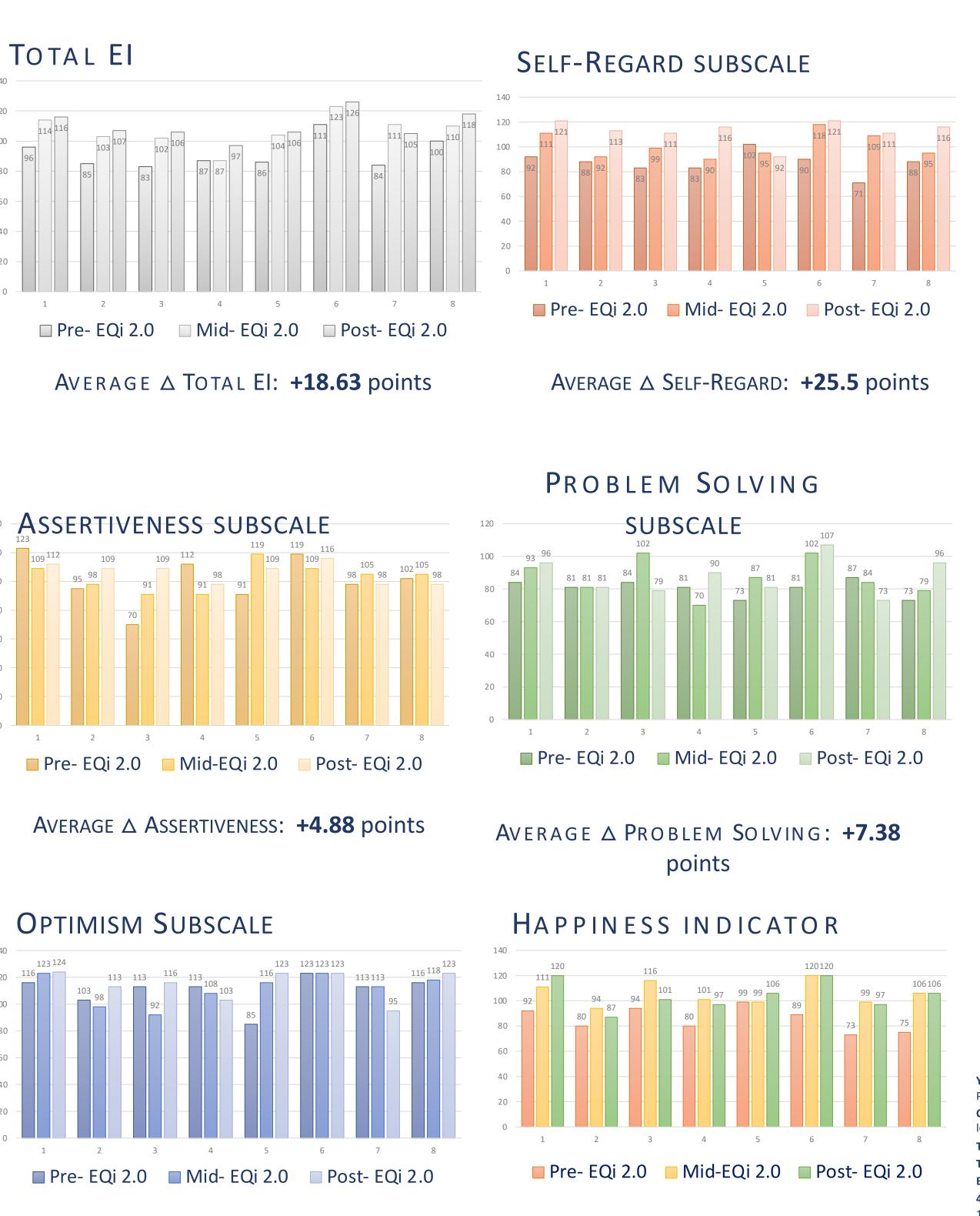


METHODS & MEASURES

PROCEDURE: Subject Population 1 took the EQi 2.0 pre-, mid- and post-intervention; Subject Population 2 and 3 took the EQi 2.0 pre- and post-intervention. Subject Population 1 met once per month for 2-3 hours at an off-site, safe location for a one-year time frame. They were responsible for their consistent attendance and all in- and out-of-class assignments. The curriculum included integrated, comprehensive exercises, tools, and strategies that taught the components within each of the methodologies contained within TDM (see chart below).









MEASURE: The EQi 2.0 was used to track the success rate of the integrative approach of TDM as opposed to when TDM was not used (other traditional approaches, i.e., used by Subject Population 2 & 3). TDM looked at the 15 subscales of the EQi 2.0 that make up the 5 composites (see diagram above). The average "normed" score of the EQi 2.0 falls between 90 and 110. A Happiness indicator is also included to gauge a person's emotional and social well-being. While TDM specifically looks at Self-Regard, Assertiveness, Problem Solving and Optimism, each subscale in addition to the Happiness indicator is taken into consideration.

FINAL RESULTS IMPACT STUDY GROUP (1)

AVERAGE \triangle OPTIMISM: +4.75 points

AVERAGE \triangle HAPPINESS: +19 points

THE EQI 2.0 FINAL RESULTS: TDM Impact Study began March 2019 and ended March 2020. The combined Overall EI in Subject Population 1 increased 18.63 points; and while the 5 composites and 15 subscales are taken into consideration, the Impact Study specifically looks at the Self-Regard, Assertiveness, Problem Solving, and Optimism subscales – all of which have increased as shown in the charts to the left. Additionally, our study takes heed of the Happiness Indicator, which increased by an average of 19 points. In contrast, the combined Overall EI in Subject Population 2&3 increased 15 points; Self Regard decreased 7 points, Assertiveness increased 3.5 points, Problem Solving increased 21.5 points, Optimism increased 3.5 points, and Happiness increased 1.5 points. Aside from the Problem Solving subscale, all other subscales in consideration either decreased or increased LESS than those in Subject Population 1 who went through TDM Impact Study. These promising results highlight the effectiveness of TDM, showing that TDM is doing its job of restoring the emotional and social well-being of its participants.

THE DOREY METHOD FINAL RESULTS: When we met the Impact Study of action; (3) understand firsthand the significance of an Affirmative practice mindfulness; (6) take risks based on a balanced sense of reality;

group participants in March 2019, we observed sadness, despair, financial hardship, cultural barriers, lack of educational and vocational training means, and a sense of intense loneliness. Today, we observe happiness, an unwavering hopefulness, a re-imagined future vision, and a resiliency to resolve daily challenges anchored in a renewed sense of Self. And today, participants: (1) have established their individual Belief Systems inclusive of Trust Circles; (2) know how to ideate, strategize and implement a plan Environment; (4) dream in pursuit of their passions; (5) deliberately (7) exemplify and practice leadership skills; (8) incorporate all their senses when learning new subject material; (9) non-physically and physically defend themselves; (10) speak up for themselves; and most importantly, (11) engage in and propel forward the entrepreneurial and community spirit while paying it forward.

The Dorey Method Program of Integrative Study provides a novel approach to the treatment and restoration of trauma survivors that has yet to be explored in the medical arena. Through the use of nine infield tested methodologies, TDM provides an integrative program with emphasis on emotional and social wellness that would be a great fit for continuing medical education (CME). Unlike any treatment available todate, TDM has great potential to become a field of study used to build the 21st century physician that our patients deserve. With education on TDM and its implications in the management of trauma survivors, physicians of the future will gain practical insight and expertise, enhance the quality of the care for their patients, and change the overall dynamic of the medical industry along with its approach to emotional and social wellness.

In addition to the potential for a vital role in medical academia, TDM serves as an outlet to educate physicians and their communities about the realities of human trafficking and the management of trafficking survivors. Through use of community networking, TDM could be used to create greater awareness to build a vigilant society ready to combat the threat of human trafficking that looms right in our own backyards.

Fundamentally, The Dorey Method Program of Integrative Study and its practice, has meaningful implications in terms of state, national and global health policy, medical school curriculum, and CME.

Press, Inc. 171-178. York, NY: McGraw-Hill Education KY: self published.



FUTURE DIRECTIONS

REFERENCES

YBS: Peterson, C. & Seligman, M.E.P. (2004). Character Strengths and Virtues: A Handbook and Classification. Washington, D.C.: APA and Oxford University

CPS: Vehar, J., Miller, B., Firestien, R.L. (2001). Creativity unbound: An introduction to creative process. (3rd ed.) and Facilitation: A door to creative leadership (3rd ed.). Williamsville, NY: Innovation Resources, Inc. TSM: Puccio, G.J., Murdock, M.C., & Mance, M. (2010). Creative leadership: Skills that drive change. (2nd ed.) Thousand Oaks, CA: Sage Productions. TLC: Kouzes, J.M. & Posner, B.Z. (2007). The leadership challenge. (4th ed.). San Francisco, CA: Jossey-Bass.

EQi 2.0: Bar-On, R. (1997a). Bar-On Emotional Quotient Inventory: Technical Manual. Toronto, ON: Multi-Health Systems. **4SITE**: Puccio, G.J. (1999). Creative Problem-Solving preferences: Their identification and implications. Creativity and Innovation Management, 8(3), pp.

SAVI: Meier, D. (2000). The Accelerated Learning Handbook: A Creative Guide to Designing and Delivering Faster, More Effective Training Programs. New

TCOD: Aviram, B. (2009). Krav Maga: Use of the human body as a weapon philosophy and application of hand to hand fighting training system. Lexington,

SRL: McNeal, R. (2006). Practicing greatness: 7 Disciplines of extraordinary spiritual leaders. San Francisco, CA: Jossey-Bass.