

**COGNITIVE PROCESSING  
THERAPY—SEXUAL ABUSE  
(CPT–SA)**

**INDIVIDUAL TREATMENT  
MANUAL**

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## PCL-S: WEEKLY

Instructions:

1. Consider the most stressful experience you have experienced \_\_\_\_\_.  
(event)
2. Here is a list of problems and complaints that people sometimes have in response to stressful life experiences. Please read each one carefully, and then indicate, using the numbers to the right, how much you have been bothered by that problem in the past **week**.

	Not at all	A little bit	Moderately	Quite a bit	Extremely
1. Repeated, disturbing memories, thoughts, or images, of the stressful experience?	1	2	3	4	5
2. Repeated, disturbing dreams of the stressful experience?	1	2	3	4	5
3. Suddenly acting or feeling as if the stressful experience was happening again (as if you were reliving it)?	1	2	3	4	5
4. Feeling very upset when something reminded you of the stressful experience?	1	2	3	4	5
5. Having physical reactions (e.g., heart pounding, trouble breathing, sweating) when something reminded you of the stressful experience?	1	2	3	4	5
6. Avoiding thinking about or talking about the stressful experience or avoiding having feelings related to it?	1	2	3	4	5
7. Avoiding activities or situations because they reminded you of the stressful experience?	1	2	3	4	5
8. Trouble remembering important parts of the stressful experience?	1	2	3	4	5
9. Loss of interest in activities that you used to enjoy?	1	2	3	4	5
10. Feeling distant or cut off from other people?	1	2	3	4	5
11. Feeling emotionally numb or being unable to have loving feelings for those close to you?	1	2	3	4	5
12. Feeling as if your future will somehow be cut short?	1	2	3	4	5
13. Trouble falling or staying asleep?	1	2	3	4	5
14. Feeling irritable or having angry outbursts?	1	2	3	4	5
15. Having difficulty concentrating?	1	2	3	4	5
16. Being "super-alert" or watchful or on guard?	1	2	3	4	5
17. Feeling jumpy or easily startled?	1	2	3	4	5

*PCL-S for DSM-IV (11/1/94) Weathers, Litz, Huska, & Keane National Center for PTSD – Behavioral Science Division.*

# Individual Treatment Plan

## Session/Week 1

### Introductions:

The purpose of this first session is largely to get to know each other and to go over the format for this treatment in more detail. Because I'll be giving you some new information, I will be talking much more than I normally will in future sessions.

### Explain PTSD:

The reason you have been asked to participate in this treatment program is because the assessments you completed revealed you have Posttraumatic Stress Disorder (PTSD). This treatment is designed to help reduce the symptoms of PTSD. Have you ever heard of PTSD before? This disorder is most often associated with Vietnam Veterans or with natural disasters, but it is also found in survivors of childhood sexual abuse. PTSD is made up of three clusters of symptoms:

1. **Reexperiencing**—consisting of disturbing thoughts, nightmares, and flashbacks or suddenly feeling that the abuse is recurring. (Stop and discuss: What type of reexperiencing have you had?) It is common to have these intrusions when you are falling asleep, when you relax, or when you are bored.

2. **Arousal**—consisting of problems falling or staying asleep, irritability or outbursts of anger, difficulty concentrating, startle reactions, feeling on-guard, & having strong physical reactions to reminders of the abuse. (Stop and discuss.) If someone is having these strong reexperiencing and arousal reactions, he/she is likely to want to do the final symptom category which is to avoid.

3. **Avoidance**—consisting of active avoidance of anything which may remind you of the trauma(s) like television, movies, people, sex, dating, reading or watching the news, and/or thinking or feeling your feelings. (Stop and discuss.)

\*\* It is important that you abstain from alcohol and drug use, if possible throughout the treatment, but especially on days of treatment and days you complete homework assignments.

Because you have PTSD, and because a category of PTSD is avoidance, it makes perfect sense that you will want to avoid doing your homework and coming to session. As part of the treatment, I am going to ask you to do some things you may try to avoid in your everyday life (like thinking and talking about the abuse). So, there will be times when you will want to avoid coming to sessions and doing the homework assignments.

The truth is that avoiding probably *worked* for you in some situations and avoiding may have helped you survive through today. What you have told me, though, is that avoiding is not working very well for you right now. In fact, it sounds like avoiding gets in the way much of the time (restate some areas of avoidance the client mentioned previously). The challenge for both of us will be to figure out when you are avoiding and to find a new way for you to cope. Please call me if you feel a need to avoid sessions or your homework.

This treatment is designed to reduce all of these symptoms of PTSD and it follows a structured format. Here is an outline of what we will be doing for the next 16 weeks. (Pass out treatment outline and give client a folder to use for weekly assignments.) Now that I have told you

what some of the goals are of this treatment, I would like to know what your personal goals are. What is your purpose for beginning therapy?

Provide the Treatment Rationale: (You need to allow at least 20 minutes for this.)

Now I would like to explain why you developed these symptoms. When you were growing up you learned about the world and organized it in your mind into categories or files. For example, when you were small, you learned that a thing with a back, seat, and four legs is a chair and you created a file for “chair.” As you got older, through experience, you learned more complex categories of chairs such as dining room chair, rocking chair, recliner, or folding chair. You then had a file for “chair,” which was further divided into all of these different subcategories. As another example, have you ever spent time with children? Perhaps you have noticed them doing the following. First, kids may learn that a “doggie” is an animal with fur, four legs, and pointed ears. Then when they see a cow they excitedly call it a “doggie;” they call a cat “doggie;” and they call a horse “doggie.” Everything fits into that category of “doggie” until they are able to create new files for all the different animals through experience. Well, just like we develop categories for things or objects, we also develop many categories for ideas and beliefs. Any questions?

You learn beliefs from parents, religion, friends, television, etc. We use beliefs to help us make the world seem safer and more predictable. One common belief that many people have is that “good things happen to good people and bad things happen to bad people.” This is called the “just-world belief.” If you have ever had things go bad and you said “Why me?,” then you have a just-world belief. For example, have you ever had a day when you had a really important event where you got all dressed up, and then everything seemed to go wrong? You spilled something on your outfit; you got stuck in traffic; you got drenched in the rain, etc.? When that happened, if you asked “Why me?” that is an example of the just world belief. What you are really saying when you say “why me” is “I am a good person, so why is this bad thing happening to me?”

When an unexpected event occurs that does not fit your beliefs, one of two things usually happens. One, you either change your memories or interpretation of the event to fit your beliefs, or two, you change your beliefs about the world and these events.

(1) People often change their interpretation of the abuse because they have an existing rule that conflicts with the experience such as, “Adults do not abuse children.” When this conflict arises, people may change their interpretation to fit the belief. Examples of changing your interpretations or memories of the event are: to blame yourself for not preventing the abuse, to question whether the incident(s) were really abuse, or to believe you misinterpreted what happened. Many people cannot label what happened to them as abuse. Changing the event or your beliefs about yourself is easier than changing your entire set of beliefs about the world and how people behave.

(2) It is possible that instead of changing the event, you may change your beliefs to accept what happened. This is one of our goals for therapy. Examples of changed beliefs are: to accept that the abuse occurred and to believe that you were not responsible for the abuse - the abuser was. Unfortunately, some people go overboard and change their beliefs too much, which can cause other problems. Examples that reflect an extreme change in beliefs include thinking that “I can’t trust *anyone*” or that “I am never safe.”

Our goals for therapy will be to help you recognize and modify what you are saying to yourself—in other words, your thoughts and interpretations about the abuse, which may have become automatic. These altered beliefs may become so automatic that you aren’t even aware that you have them. Even though you may not be aware of what you are saying to yourself, your beliefs and self-statements affect your mood. Often, people aren’t aware that they are having thoughts about whatever they are experiencing. For example, on the way here today, you were probably wondering

what this therapy would be like or what I would be asking you to talk about. Do you remember what you were thinking about before the session?

One problem with our system of making beliefs is that when something does not fit, you have no place to put the file. We have talked about creating files for chairs and for doggies, but where is your file for sexual abuse? We do not have one. So, what happens when you have a file and you don't have a place to put it? Well, when I have a file in my office and I don't know where to put it, I will set it out of the way for a little while. I will start by putting it on a bookshelf, but then I have to go get a book and it is staring me in the face. So then I move it to a table and, sooner or later, it hits me in the face again. Then I try to really get it out of the way by shoving it in a drawer but it still pops out at me when I least expect it. This is the same thing that happens with the abuse. Because you do not have a file for abuse, there is no place to put it away. So, then it pops out at you when you least expect it or want it to—like when you are being intimate with a partner, when you are watching a movie, or when you are just driving down the road. The abuse will keep jumping out at you until you are able to create a file for it and put it away. That is what this therapy is about. We are going to help you create a place to put this “Sexual abuse” file so it will stop getting in the way of your life. To put this file away, you will need to process all of the thoughts and feelings that are tied to your memories. By processing your thoughts and feelings, the abuse memories will lose their power over you. Any questions?

I will be helping you to identify what your automatic thoughts are and how they influence what you feel. You will also learn ways to challenge and change what you are saying to yourself and what you believe about yourself and the event. We will be focusing on changing the beliefs that are interfering with your recovery. These problematic beliefs are called “rules.” Introduce “Rules Handout.” Help client identify some rules they already have, perhaps focusing on overgeneralized beliefs about safety and trust.

#### HOMEWORK:

- (1) Read “Rules” Handout.
- (2) Begin to create “Rule Log”
- (3) Review the “Developmental Stages” handout.

Before ending session, ask client how he/she is feeling at the end of the first session?

If time allows, you may address other issues such as:

What is going on in your life right now? Friends? Family? Partners? Job?

What are some of your strengths and limitations right now?

How do you take care of yourself? Stress management?

Is there anyone that is not supportive of you that I should know about? (Assess for persons who may not be very safe and have potential for continuing the client's abuse.)

What coping skills work best for you?

If in therapy previously: What did you like best about your previous therapy experience? What was most helpful to you?

## **SESSION 1 HOMEWORK ASSIGNMENT**

- (1) Please review the “Rules - What are they?” sheet.
- (2) After you have read this sheet, write down some of your rules or beliefs on your “Rule Log”. Make sure you bring this list of your rules to the next individual session.
- (3) Read over the “Developmental Stages” handout.

## **Cognitive Processing Therapy for Sexual Abuse (CPT-SA)**

### Treatment Overview

CPT-SA will be conducted in sixteen 50 minute sessions. A general overview of the session content is as follows:

### Week 1

Introduction and education about the treatment, symptom responses, and self-trauma theory.  
Homework: Handouts on Rules and Developmental Stages

### Week 2

Review homework in session. Discuss developmental issues and their impact on current beliefs and behaviors. Explore family dynamics.  
Homework: Write an Impact of Event(s) statement on the ways in which the abuse has affected your beliefs about yourself, others, and the world.

### Week 3

Review homework in session. Introduce connection between thoughts and feelings.  
Homework: A-B-C sheets

### Week 4

Review homework in session. Look at link between thoughts, feelings, and behaviors.  
Homework: Write a full account of the most traumatic incident of childhood sexual abuse and read it to yourself daily. Continue A-B-C sheets.

### Week 5

Review homework in session. Read written account in session, process emotions, and review the account for rules.  
Homework: Rewrite the account of the most traumatic incident of childhood sexual abuse incorporating more sensory detail and read it to yourself daily. Continue A-B-C sheets.

### Week 6

Review homework in session. Read second written account in session, process emotions, and review account for rules.  
Homework: Write an account of the next most traumatic incident (if there is one) and read it to yourself daily. Continue A-B-C sheets.

### Week 7

Review homework in session. Read third written account continuing to process emotions and looking for rules. Introduce Challenging Questions Sheet (CQS).  
Homework: Rewrite account of second incident or write about a third incident and read it to yourself daily. Challenge at least two rules related to the abuse using the CQS.

### Week 8

Review homework in session. Read last written account and continue to process emotions and review the account for any additional rules. Review the CQS. Introduce Problematic Thinking Patterns.

Homework: Identify Problematic thinking patterns as they relate to your rules. Challenge at least one rule with the CQS. Continue to read account(s) daily.

### Week 9

Review homework in session. Review homework on Problematic Thinking Patterns, their development, and their impact. Introduce the Challenging Beliefs Worksheet (CBW) and the first of five issues to be addressed: Safety.

Homework: Read Safety Issues handout. Challenge rules using the CBW. Continue to read accounts.

### Week 10

Review homework in session. Discuss safety and challenge rules related to safety. Introduce Trust Issues.

Homework: Read Trust Issues handout and challenge rules using the CBW.

### Week 11

Review homework in session. Discuss trust and challenge rules related to trust. Introduce Power and Control Issues.

Homework: Read the Power and Control Issues handout and challenge rules using the CBW.

### Week 12

Review homework in session. Discuss power and control and challenge rules related to power and control. Introduce Esteem Issues.

Homework: Read the Esteem Issues handout. Review Identifying Assumptions Sheet. Challenge rules on esteem using the CBW.

### Week 13

Review homework in session. Discuss esteem and challenge rules related to esteem.

Homework: Continue to confront esteem rules using the CBW and read Assertiveness and Communication handouts.

### Week 14

Review homework in session. Continue to discuss esteem and explore how assertiveness is tied to self-esteem. Introduce Intimacy Issues.

Homework: Read the Intimacy Issues handout and challenge rules on intimacy using CBW.



### Week 15

Review homework in session. Discuss Intimacy. Challenge rules related to intimacy. Introduce topic of Social Support.

Homework: Use CBW to confront rules on Social Support. Rewrite Impact of Event(s) statement.

### Week 16

Read Impact of Event(s) Statement in session, discuss social support, and identify goals for the future.

## Developmental Stages

**The following is a list of the stages of development through which children progress as they grow. Beneath each age range is a list of abilities that a typical child, of that age, will accomplish. It is also normal for some children to accomplish these tasks at earlier or later stages in their lives. As you read through each list, try to remember yourself at that age. The list represents both the level of development you may have accomplished at a given age, and those developmental tasks that may have been impacted by the abuse.**

### Infant 0-24 mo.:

0-6 mo.

- vision not well developed
- hearing acute
- learn to reach, grab, hold objects
- may begin crawling
- can stand without support
- if basic physical needs are cared for, ability to trust begins to develop

6-12 mo.

- can walk holding a hand
- learns to crawl
- by 12mo., can walk unassisted
- development of specific wants, i.e. pursues a favorite toy
- if child experiences loving touch, ability to love begins to develop
- children begin to explore their own bodies

12-18 mo.

- discovery and exploration of environment
- walking
- identity as a male or female begins to develop

18-24 mo.

- development of the ability to anticipate and solve simple problems
- learns by imitation of modeling
- learns to be more self-sufficient
- if parents support child's budding independence, confidence develops

### Early Childhood 2-6 yrs.:

- by age 5, the typical child weighs 40 pounds and is 3 feet 7 inches tall
- fine motor skills develop (coloring, writing, drawing)
- by 5 years, most children can ride a tricycle, climb a ladder, pump a swing, run well, kick a ball, etc.

- the ability to represent thoughts through words or images begins to develop
- child believes that other people and objects think and act like her/him
- become curious about the human body
- become curious about sexual parts of the body
- language skills and ability to communicate are improving
- learn to pretend and engage in fantasy play
- engage in play with others as opposed to the individual play of previous stages
- need for warm and loving parents who set good limits and establish clear, consistent rules with consequences

#### Childhood 7-11 yrs.:

- by age 10, the typical child weighs 70 pounds and is 4 feet 6 inches tall
- motor skills developed
- memory skills, and the ability to reason and learn, are increasing
- good, or poor, self-esteem continues to develop as children master or fail new tasks
- ability to recognize individual differences and take on others' points of view develops

#### Adolescence 10-16 yrs.:

- development of personal identity is the primary task of this stage
- puberty begins (physical changes take place, onset of sexual desire)
- ability to think abstractly develops
- the process of questioning traditional customs, laws, and values begins
- the opinions and thoughts of peers, as well as peer relations, are extremely important to the adolescent

## Rules - What Are They?

Throughout the rest of therapy we will be talking about rules and helping you identify your own. Basically, rules are conflicting beliefs or strong beliefs that create unpleasant emotions and/or problems for you. Rules can be formed in a couple of different ways:

### 1. Rules may be conflicts between beliefs and the abuse.

#### Prior Belief

a) Good things happen to good people.

#### Abuse

You are abused.

#### Results

- \* If you cannot change your belief to accept what happened to you (i.e. bad things can happen to good people), you may find yourself asking “Was it really abuse?”
- \* If you are questioning if it was really abuse, you may be making sense of the abuse by saying: “I must have misinterpreted what happened...I didn’t make myself clear...I must be crazy or I must have done something to mislead him/her...I am bad...”
- \* If you are stuck here, it may take some time until you are able to get your feelings out about the abuse.

#### Goal

- \* To help you change the prior belief to “Bad things can happen to good people.” When you are able to do this, you are able to label the event as abuse (accept that it happened), and move on from there.

### 2. Rules may also be formed if you have negative beliefs that are confirmed or reinforced by the abuse.

#### Prior Belief

a) Sex is bad.

#### Abuse

You are sexually abused.

#### Results

- \* If you see the abuse as further proof that “sex is bad” then you will believe this very strongly, and it may become a “rule.”
- \* If you are stuck here, you may HAVE strong emotional reactions that interfere with your ability and desire to have sexual relationships. This may feel “safe” to you, but unless this is how you wish to live the rest of your life, it deserves some attention.

#### Goal

- \* To help you modify your beliefs so they are not so extreme. For example, “Sexual abuse is bad but sexual intimacy is not bad.”



## Individual Treatment Plan

### Session/Week 2

Administer PCL

Review homework:

Go over homework from last week, the “Rules Log”. Help client elaborate on or identify additional rules throughout this session.

Give client lots of praise for finding his/her rules. Normalize how difficult it can be to identify one’s “rules of the road” that steer one’s life.

Any thoughts or comments on the “Developmental Stages” handout?

Discuss the client’s family and help him/her identify where some rules may have originated in his/her family:

What was your family like?

What was it like to grow up in your family?

What was your role?

What was the role of your Mom? Dad? Siblings? Others?

How would an outsider looking in describe your family?

How would a close family friend describe your family?

Who made the rules in your family?

Who was the disciplinarian?

Normalize:

“The reactions you are experiencing now (e.g., your rules or beliefs) are normal considering what you’ve experienced in the past.”

\*\* You can discuss how the client’s rules impact his/her relationships.

What are some of your rules affecting how you are in relationships?

What are some of the patterns you have noticed in your relationships (with co-workers, significant others, friends, family, etc.)? How are these patterns related to family dynamics?

What are the positives in your current relationships (work, significant others, friends, family)?

What are the negatives in your current relationships?

How might these patterns affect how you are in session?

How will we know when this is happening? What can I do to help you with this?

\*\* You can continue to discuss client’s coping skills and available social support system. Find out what the client does to take care of himself/herself and encourage doing these things.

Note: The goal of this session is to get a picture of clients including their family rules, roles, experiences, etc. Do not challenge clients or disagree with any of their rules. If you do disagree with them, you risk alienating them and having them think that you just do not know them well enough and/or that you do not understand. Instead of agreeing or disagreeing with them, praise them for their work and their ability to identify their rules/beliefs.

**HOMEWORK:**

(1) Write impact of event statement.

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## SESSION 2 HOMEWORK ASSIGNMENT

Please write at least one page on what it means to you that you were abused. Consider the effects the abuse has had on your beliefs about yourself, others, and the world. Do not just list your beliefs, but write about the impact the abuse has had upon your life. I am not asking you to write about the trauma events, we will do that later. Also, consider the following topics while writing your answer: safety, trust, power/control, esteem, and intimacy. Bring this with you to your next individual session. As you identify additional rules please write them on your log.



## Individual Treatment Plan

### Session/Week 3

Check in briefly.

Review homework:

Have client read the Impact of Event statement straight through without interruptions. We often place tissues near the client before he/she begins reading.

After the client has read the statement, ask him/her to go over it again looking for rules. Cover the whole statement during the session. Do not spend too much time on any one point.

If the client did not address the five main areas, ask if he/she has any additional rules regarding: Safety? Trust? Power/Control? Self-Esteem? Emotional and/or physical intimacy?

To help explore the rules, you can ask:

What are the rules in relation to?

How do the rules affect your current life? Work? Friends? Family? Significant Others?

How do you think the rule was created?

How is it maintained?

NOTE: Praise client for finding rules. Do not challenge the rules. Do not disagree with the client by telling him/her that he/she (as a person) is good, etc. The client will assume you do not understand. You will be able to challenge the negative self cognitions later.

\*\* How do you take care of yourself? What are some of the good things you do to take care of yourself? What are the negative things you do or have done to care for yourself? What are some things you could do?

Introduce connection between thoughts and feelings:

Start by going over basic emotions - mad, sad, glad, scared. These four basic emotions represent a continuum of emotions. For example, "mad" can range from slightly irritated or annoyed to extreme rage. The four emotions also can be combined to create other emotions like jealousy (mad plus scared).

\*\* Can you give me an example of something that makes you mad? When do you feel sad? How about happy? How do you feel physically when you are feeling angry? How are mad and scared different for you?

Discuss with the client how his/her self-statements and/or interpretations of events can affect feelings. Provide the following example: Imagine you are walking down a street and you see a friend of yours walking toward you. You are pretty sure he/she sees you but he/she passes right by you without saying anything to you. When this happens, what do you tell yourself? (Have client respond. Some common answers are: "He/she doesn't like me." "He/she must be angry at

me.” “What did I do to him/her?”) So, when you tell yourself \_\_\_\_\_, how do you feel? (Have client respond. Some common responses are: sad, angry, disappointed, etc.)

Now, what if I told you right before this happened that your friend had just found out that his/her significant other was in a car accident and he/she was in a rush to get to the hospital. When he/she passes you now without saying anything to you, what do you say to yourself? (He/she must really be preoccupied . . . I hope everything will be okay . . . I'm sorry that happened, etc.) Then, how do you feel? (sad for him/her . . . okay . . . sorry for him/her, etc.)

#### HOMEWORK:

##### (1) A-B-C Sheets

These homework sheets will help you to see the connection between your thoughts and feelings following events. Try to fill the sheet out in order from left to right. Anything that happens to you or you think about can be the event to look at in Column A. To begin with, you may be more aware of your feelings than your thoughts. If that is the case, go ahead and fill out Column C after Column A. Next, try to recognize what you were saying to yourself (Column B). Eventually, you will get very good at identifying your thoughts and the resulting feelings, but it will take some practice.

Try to fill out these sheets as soon after the event as possible. If you wait until the end of the week, you are less likely to remember what you were saying to yourself. The events you record do not have to be negative events. You also have thoughts and feelings about pleasant and neutral events. If you have any memories or thoughts about the abuse, please record these as well. Do not avoid thinking about the abuse and feeling your feelings.

A-B-C sheets -- Give about 7 A-B-C sheets and ask them to do **one every day** and to bring them to the next session.

**Collect Impact Statement from client!!!!**

Date: \_\_\_\_\_

Client #: \_\_\_\_\_

## A-B-C Sheet

**ACTIVATING EVENT**

**BELIEF**

**CONSEQUENCE**

**A**

**B**

**C**

“Something happens”

“I tell myself . . . ”

“I feel . . . ”

I was abused.	I let it happen.	I feel ashamed.
My virginity was taken.	I am used.	I feel a loss.
My partner is supportive.	Someone cares about me.	I feel good.

Date: \_\_\_\_\_

Client #: \_\_\_\_\_

## A-B-C Sheet

**ACTIVATING EVENT**

**BELIEF**

**CONSEQUENCE**

**A**

**B**

**C**

“Something happens”

“I tell myself . . . ”

“I feel . . . ”

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### **SESSION 3 HOMEWORK ASSIGNMENT**

Please complete the A-B-C sheets to become aware of the connection between events and your thoughts, feelings, and behaviors. Remember to fill out the form as soon after an event as possible. Please do at least one sheet every day and bring them to your next individual session.

## Individual Treatment Plan

### Session/Week 4

#### Administer PCL

#### Review A-B-C sheets:

Have client take out completed A-B-C sheets and go over them with you. Let the client do most of the work but be there to assist if he/she needs help differentiating between the event, thoughts, and feelings.

Take some blank sheets with you to process the client's past week.

If the client did not do any sheets on abuse, do one/some within the session. The event can be "I was abused." Then use rules or beliefs as the thoughts and identify the subsequent emotions.

You may do some *mild* challenges of the client's disruptive cognitions. If possible, challenge using Socratic questioning. You will have plenty of time to challenge the client later.

Stress to the client that you are not trying to take his/her thoughts away, that these beliefs and thoughts have been helpful for survival in the past. The thoughts were also accurate considering the environment the client grew up in (you can refer back to information you obtained in session two). "Now, however, these thoughts/beliefs are getting in the way so I want to help you add to them, to give you a larger repertoire to choose from based upon the situation (e.g., being on subway in NYC vs. in park with friends)."

See if the client notices any patterns within the completed ABC sheets (i.e., look for predominant emotions, recurring thoughts, putting thoughts as emotions or vice versa, etc.)

Discuss what it was like for the client to do these sheets. What did he/she learn? What aspects were easy? Difficult?

Make sure you continue to add to the Rule Log with assimilated/trauma focused rules that come from their account

Do not let the client tell stories at length!! Use the sheets to help the client focus on the most important parts of the situation he/she is relating.

#### HOMEWORK:

(1) Write account of the *most traumatic* incident of *childhood sexual abuse*. You will have the opportunity later to write about other events if you choose, but I need you to write about a childhood sexual abuse event for this week. Deciding which incident is "most traumatic" is up to you. It may be the one that comes back to you the most in flashbacks or nightmares, or the one that gets you the most emotionally upset.

As you write this, include as many sensory details as you can remember. Do not put pressure on yourself to remember more, I will help you process what you do remember. It is important to do this assignment as soon as possible (i.e., DO NOT AVOID) and to find a safe, private, comfortable place for you to work in.

I know you may be feeling terrified of doing this assignment. I want you to know that you are not alone. It may be helpful for you to talk to someone who is supportive of you and let that person know what you are doing. Tell the person that you might need to call for extra support. If you want, I will contract with you to call you at a certain time before or after writing your account to provide support.

Over the next week, you may also experience increases in reexperiencing the abuse, arousal, and avoidance. As part of this, you may have decreased sleep, headaches, increased gastrointestinal upset, increased emotional distress, and decreased concentration. These are all common reactions to working through and processing traumatic events such as abuse. **THEY WILL NOT LAST FOREVER!!!** The sooner you write the account and the more you read it, the sooner you will get better.

(2) Read the account to yourself daily and allow yourself to feel your feelings.

(3) A-B-C Sheets

## **SESSION 4 HOMEWORK ASSIGNMENT**

(1) Please begin this assignment as soon as possible. Write a full story of the most traumatic incident of sexual abuse and include as many sensory details (sights, sounds, smells, etc.) as possible. Also, include as many of your thoughts and feelings as you recall having during the event. Pick a time and place to write so you have privacy and enough time. Do not stop yourself from feeling your emotions. If you need to stop writing at some point, please draw a line on the paper where you stop. Begin writing again when you can and continue to write the account even if it takes you several occasions.

(2) Read the whole account to yourself daily before the next individual session. Allow yourself to feel your feelings.

(3) Also, continue to complete A-B-C sheets on your thoughts and feelings. Bring the A-B-C sheets and the written account to the next individual session.



# Individual Treatment Plan

## Session/Week 5

Review homework:

Go over A-B-C sheets completed in past week. If client did not complete more sheets, query why and do some in session. (Do not spend more than 10-15 minutes on this.)

Have client read written account without interruptions. Encourage client to show emotions and not to rush through the reading. Tell the client not to stop to editorialize or to talk to you when reading the account. You will talk about it when he/she is done.

Ask: How was it for you to write this account?  
How was it to read it to yourself? Read it in here?

Have client read the account at least one more time. If the client shuts down and does not express feelings during the first or second reading, you can have him/her read a third time if necessary.

How did reading it the second time compare to the first? Was it easier? Harder? The same?

If it was easier, say: "Great! You are processing your emotions!"

If it was harder, say: "Great! You are working on processing your emotions and you are going up the curve."

If it was the same, say: "Great! At least it did not get worse for you."

If the client did not read it during the week, probe for why. Address avoidance if necessary.

Help client go through the account and find rules/ beliefs:

What rules were created due to this account (e.g., regarding safety, trust, power/control, self-esteem, and intimacy)? Praise the client for finding rules but do not attempt to deny his/her beliefs about being "bad," "responsible," etc. This will only cause the client to think you do not understand. The goal is not to challenge but to look for additional rules.

\*\* What other areas of your (current) life did you realize have been affected by the abuse?

Help client see areas that may have been left out of the first writing (e.g., details about the incident, feelings, physical sensations) to facilitate the rewriting of the account.

As you go through the session, have client connect feelings to thoughts. For example, when the client gives a feeling, ask what the thought is related to that feeling. If the client gives a thought, ask what feeling that brings up.

Collect account from client.

## HOMEWORK:

(1) Rewrite first account (push for more details). "There is no magic number of memories. You have PTSD based upon what you do remember, so there is no need to pressure yourself to remember more. Remember, **the sooner you do this and the more you read, the sooner you will get better.**"

(2) A-B-C Sheets

## **SESSION 5 HOMEWORK ASSIGNMENT**

- (1) Start over and write the whole incident again. If you were unable to complete the assignment the first time, please write more than the last time. Often, the first version reads like a police report with nothing but the facts. Add more sensory details, as well as your thoughts and feelings during the incident. Also, this time write your current thoughts and feelings in parentheses (e.g., "I'm feeling very angry").
- (2) Remember to read the new account at least once a day before the next individual session.
- (3) Continue to complete A-B-C sheets connecting your thoughts and feelings. Bring these sheets and your written account to the next individual session.

## Individual Treatment Plan

### Session/Week 6

Administer PCL

Review homework:

Go over completed A-B-C sheets. If client did not do any, do some in session. You should be incorporating A-B-C sheets into the session as you go along (i.e., what were you thinking, what were your feelings, etc.). Do not spend more than 10-15 minutes on this.

Begin some mild challenges.

Have client read second writing of first account at least twice. Encourage the client to feel his/her feelings and to read uninterrupted straight through. If details are missing, probe for them (i.e., what did the room look like?, pain?, what was said?).

How is this account different from the previous one?

What thoughts/feelings did you have while writing this account?

How did those thoughts/feelings compare to what you thought/felt at the time of the incident?

What rules do you see in this account (or stemming from this event)?

What was it like to read the account in here this time?

Have client keep this account with the instructions to continue to read it daily. Remind the client that reading will help him/her to get better and to get better faster. Help client decide what to write next.

### HOMEWORK:

- (1) Write about the second most traumatic event. (If the client does not have a second event, he/she should write this one for a third time).
- (2) Continue to read the first account daily.
- (3) A-B-C sheets

## **SESSION 6 HOMEWORK ASSIGNMENT**

- (1) Write a full account of the next most traumatic incident of abuse and include as many sensory details (sights, sounds, smells, etc.) as possible. Also, include as many of your thoughts and feelings as you can recall having during the event. Remember to write your current thoughts and feelings in parenthesis.
- (2) Read the whole account to yourself daily before the next individual session. Allow yourself to feel your feelings. Bring your account to the next individual session.
- (3) Continue to work on connecting your thoughts to your feelings using the A-B-C sheets and continue to read the most recent account you wrote on the first event.

## Individual Treatment Plan

### Session/Week 7

Review homework:

Go over completed A-B-C sheets and continue to incorporate them into the session by probing for thoughts and the resulting feelings.

Continue with some mild challenges.

Have client read writing of second account. Continue encouraging client to feel his/her feelings and to read uninterrupted straight through. As before, if details are missing, probe for them.

What thoughts/feelings did you have while writing this account?  
How does it compare to the first account?

Continue to review account for rules. Add them to the client's list of rules as necessary.

Check in to make sure the client is reading the account every day. Address avoidance as necessary. Help the client identify what needs to be included in writing the next account.

Introduce Challenging Questions Worksheet (CQW). (Allow at least 20-25 minutes for this.) Congratulations! You are almost done with the processing phase of the therapy. In the past seven weeks, I have asked you to pay attention to your thoughts, rules or beliefs, and feelings. You may be saying to yourself, "Now that I know I have all these rules, what do I do about them?" That is what we are starting to do today. For the second half of this therapy, we are going to focus on the beliefs you have and how they affect your life. Think back to your purpose for beginning therapy with me. I would bet that part of it was to reduce the PTSD symptoms (e.g., sleep problems, flashbacks, startle reactions, etc.) but there was also a part that wanted to improve other areas of your life. What are some of those things you wanted to improve? [Have the client discuss some of their personal goals.] The way to reach these goals is to closely examine/challenge old rules, and perhaps even add some new rules. The first step is something called the "Challenging Questions Sheet" (CQS). [Give client CQS and example.] Remember to have them start with assimilated/trauma focused rules first, before moving to over-accommodated rules.

Tell client to make sure the sheets are not used to reinforce the disruptive belief. The goal is to "put on an objective reporter's hat" and look at both sides. The client is very practiced at finding evidence to support a negative belief. You want the client to practice looking at the other side.

You should practice going through the questions in session using one of the client's rules (either one identified previously or one from the account covered in this session). (This will take at least 20 minutes).

**HOMEWORK:**

(1) Rewrite this account and include more details, thoughts, and feelings. If the client has only one traumatic event, he/she can stop writing. However, encourage the client to keep reading the accounts.

(2) Challenging Questions Worksheet (CQW). One per night focused on trauma event related rules.

## SESSION 7 HOMEWORK ASSIGNMENT

- (1) Please choose one rule a day and answer the questions on the Challenging Questions Worksheet with regard to each of these rules. Remember to start with trauma event focused rules first before moving to rules that are more focused on today or the future. .
- (2) Continue to read through the trauma accounts before the next individual session if you feel there is more for you to process or discover. Bring all of your homework to the next individual session.





## Challenging Questions Worksheet - Example

**STEP 1:** Choose a rule or belief that creates strong negative feelings or has created problems in your life. You may want to refer to the list of rules that you began in Session 2.

**Sample belief/rule:**

Since I went with the abuser voluntarily, what happened is my fault.

**STEP 2:** Go down the 10 questions on the handout and challenge this belief. This is meant to be an exercise in challenging thoughts that have created problems for you. The key is that you cannot replace or modify problematic beliefs without knowing yourself *why* they are problematic. That is, the therapist telling you that they are extreme or unhealthy is not reason enough for you to make changes in your belief system and your life.

**Remember:** Not all questions are appropriate for each belief/rule. Here is how it works with the belief/rule listed above.

**1. What is the evidence for and against this belief?**

Evidence for (that supports the belief):

I went, so I deserve whatever happened (you can even challenge this, too!)

Evidence against (that challenges the belief):

Just because I went voluntarily doesn't mean I agreed to have sex.

Just because I agreed to go doesn't mean I deserved to be abused.

When I went, I had no idea what would happen. I thought we were just going to watch television.

Before I was abused, I thought this was a nice person who would not hurt me.

Going voluntarily didn't mean I caused the abuse.

**2. Is your belief a habit or based on facts?** *Here you need to think about whether you have just said this so many times to yourself that it seems like fact or whether it is indeed a fact. A fact is an observable (to others also) provable action or thing.*

This belief is a habit. I have thought I caused the abuse for so long that it seems like a fact, but it is not.

**3. Are you distorting what really happened?** *Here you are being asked whether you are distorting what happened in some way, for some reason.*

Maybe I am distorting what happened by blaming myself because I am afraid of expressing my anger outwardly or toward the abuser.

I tend to turn things around so it's my fault in general, and it's likely that this is another example of doing that.

I think I have more control over preventing future abuse if I blame something I did in particular than if I blame someone else.

The reality is: It is not my fault. I was abused by someone else and that person is the only one to blame. I did not want this to happen, nor did I ask for this to happen. No one deserves to be abused, and no behavior can cause abuse.

**4. Are you thinking in all-or-none terms?** *This also refers to thinking of things as either-or, black-white, right-wrong, or good-bad. This belief is more often associated with extreme ways of viewing something with no in-betweens, no grays, no middle ground.*

With this belief, I am saying that the abuse was *all* my fault and I am not giving any of the responsibility of what happened to the abuser.

**5. Are you using words or phrases that are extreme or exaggerated (i.e., always, forever, never, need, should, must, can't, and every time)?** *Think of extreme words such as always, all, forever, never, should, must, can't, and every time.*

I am stating that the abuse was *all* my fault and it *must be* my fault.

**6. Are you taking the situation out of context and only focusing on one aspect of the event?** *In other words, are you making some judgment without considering the entire context of the situation, including the entire scenario and each person's role? Or are you remembering only those events which confirm your belief and ignoring all of the others?*

I am taking the fact that I went voluntarily out of the context of what I expected that night.

Another part of this whole scenario is that I thought this person was very nice and he/she had never done anything in the past that would have made me suspicious. Therefore, it makes a lot of sense that I went voluntarily.

This does not mean that I caused the abuse or acted in a way that anyone else would not have done.

**7. Is the source of information reliable?** *This question is asking you who the source of the information is and whether the person is reliable. This applies best with beliefs originating from what the abuser may have said to you or from blaming comments from other people around you.*

The abuser and some of my family told me it was my fault and I caused it. They are not reliable sources—they are wrong and have their own issues to address.

**8. Are you confusing a low probability with a high probability?** *This question is meant to challenge rules that imply that you are certain that something will happen to you or certainties about people you know or meet.*

It is not a certainty that going voluntarily had anything to do with what happened to me.

**9. Are your judgments based on feelings rather than facts?** *What you want to think about here is whether your belief is based on actual fact or your feelings.*

I feel guilty because I think I should have known what would happen, but this is a feeling, and there are no facts to support that it was my fault.

For years, I have felt responsible for the abuse but the fact is that it was not my fault.

The law even states that a child cannot consent to any sexual acts and that the child is never at fault for any type of sexual abuse.

**10. Are you focused on irrelevant factors?** *This question is asking if you are focusing on behaviors, words, etc. that are really not related to the abuse and ignoring other factors that are relevant.*

I am focusing on something I did that is in no way connected to the abuse -- that is, going voluntarily. The only person who caused the abuse was the abuser—NOT ME!!!

## Challenging Questions Sheet

Below is a list of questions to be used in helping you challenge your maladaptive or problematic beliefs. Not all questions will be appropriate for the belief you choose to challenge. Answer as many questions as you can for the belief you have chosen to challenge below.

Belief: \_\_\_\_\_

1. What is the evidence for and against this idea?

**FOR:**

**AGAINST:**

2. Is your belief a habit or based on facts?

3. Are you distorting what really happened?

4. Are you thinking in all-or-none terms?

5. Are you using words or phrases that are extreme or exaggerated (i.e., always, forever, never, need, should, must, can't, and every time)?

6. Are you taking the situation out of context and only focusing on one aspect of the event?

7. Is the source of information reliable?

8. Are you confusing a low probability with a high probability?

9. Are your judgments based on feelings rather than facts?

10. Are you focused on irrelevant factors?

## Individual Treatment Plan

### Session/Week 8

Administer PCL

Review homework:

Go over client's completed Challenging Questions Worksheet (CQW). Allow at least 20-25 minutes for this. In addition to reviewing homework ask:

- What was it like to do the CQW?
- Did you have any problems?
- Did you notice any patterns?
- How did you decide which beliefs to challenge?

Have client read written account.

- Continue encouraging client to feel his/her feelings and to read straight through.
- What thoughts/feelings did you have while writing this account?
- How did writing the account compare to previous ones? Easier? Harder? Same?
- Continue to review account for rules.

Use your judgment to determine if client should write account again (i.e., client is still not allowing much affect, etc.). The client may need to move on to a third event. You can also double them up if necessary, by rewriting the second account plus a third or writing a third and a fourth, depending upon the client's history and progress in processing the abuse.

- \*\* What kinds of things do you say to yourself when you leave here?
- What do you wish you had brought up?

Introduce Problematic Thinking Patterns sheet. (Allow at least 15 minutes for this.)

If time allows, you can take rules from account and challenge them using the CQW. (This rarely happens.)

Remind the client to continue reading all accounts.

Homework:

- (1) Problematic Thinking Patterns sheet
- (2) Continue to use the CQW to challenge at least one more rule.
- (3) Continue to read all written accounts daily.
- (4) Write another account (if necessary).

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## Problematic Thinking Patterns

Listed below are seven types of Problematic thinking patterns that people use in different life situations. These patterns often become automatic, habitual thoughts that cause us to engage in self-defeating behavior(s).

Considering your own rules/beliefs, find examples for each of the patterns. On a separate sheet of paper, make a list of your rules and then next to them, write the number of the pattern(s) which seem to apply best for that rule. Some rules may fit with one or more different patterns. If you have listed several different patterns for one rule, circle the number for the pattern that seems to fit *the best*. After you have done this for several rules, think about which patterns are most common for you and how these patterns affect you in different situations.

1. **Drawing conclusions when evidence is lacking or even contradictory.** (Example: All people are untrustworthy.)
2. **Exaggerating or minimizing the meaning of an event.** You blow things way out of proportion or shrink their importance inappropriately. (Example: Since I was not beaten up, my abuse is not as serious or as bad as others I have heard about.)
3. **Disregarding important aspects of a situation.** (Example: Since I did not fight much, it must mean I wanted it.)
4. **Oversimplifying events or beliefs as good/bad or right/wrong.** (Example: It was wrong of me not to report the abuse to someone in authority.)
5. **Overgeneralizing from a single incident.** You view a negative event as a never-ending pattern of defeat, or you apply one attribute of the abuser to a whole group. (Examples: Since I have been abused, I believe that I will be abused again. All men will abuse me.)
6. **Mind-reading.** You assume that people are thinking negatively of you when there is no definite evidence for this. (Example: Since my friends and family have not brought up the abuse, they must think it is my fault or blame me in some way.)
7. **Emotional reasoning.** You reason how you feel. (Example: Because I feel scared when I become close to someone, it must mean that the person intends to abuse me.)

## SESSION 8 HOMEWORK ASSIGNMENT

- (1) Consider the rules you have identified thus far, and find the Problematic Thinking Patterns which fit each rule. Next to each rule, write the number of the pattern(s) that seem to fit. You may have more than one pattern for each rule. If you do have more than one, circle the pattern number which seems to fit that belief the best. As you finish, consider ways in which your current behaviors have been affected by these habitual patterns. Bring this to the next session.
- (2) Use the Challenging Questions sheet to continue challenging at least one more of your rules. Make sure you bring this to the next session.
- (3) Continue to read your written accounts daily and to feel your feelings.
- (4) If you need to, continue to write your account(s) and bring them to the next session.

## Individual Treatment Plan

### Session/Week 9

Review homework:

Go over Problematic Thinking Patterns (PTP) sheet. Make sure the client is able to explain why the rule/belief fits with a particular pattern. No right or wrong answer exists — you just want to make sure the client can explain how a pattern fits for him/her. Also encourage client to use the DTP to challenge Problematic/negative beliefs, not to support them.

Briefly go over the completed CQW. Spend some time reviewing this if the client is having difficulty with it, or is using it to perpetuate negative self beliefs.

Have client read any additional writings he/she may have.

Continue encouraging client to feel his/her feelings and to read straight through without stopping.

“What thoughts/feelings did you have while writing this account?”

Continue to review account(s) for rules.

### Adolescence Discussion:

Sometimes, challenging your beliefs, figuring out where they came from, and deciding whether or not they are helpful for you can be really rough. In fact, some people going through this process say they do not know who they are anymore. This process is very similar to going through adolescence. As we go through adolescence, we are trying to figure out who we are, what we like, what we do not like, what we think about other people, who we can and cannot trust, etc. A lot of abuse survivors, though, don't have the luxury of going through this process as teenagers because they are having to focus all of their strength and energy on *survival*, on just making it to the next day. So, now you are going through this discovery process and it can be scary and anxiety producing. This process is similar for everyone, no matter how old you are. Now, though, you can use all your wisdom of adulthood to help guide you through. Does this make sense to you? Does it fit at all with what you are going through? [Therapist may need to repeat this in later sessions as needed according to the client's process.]

\*\* Discuss anger and its impact.

Anger is a common emotion at work and at home in relation to feeling “out of control.”

How is that similar to your childhood (i.e., having no control over the abuse?)

Introduce Challenging Beliefs Worksheet (CBW) and the Safety module. Go over the “Safety CBW” example with client and do a practice sheet in session. (You can use a current event and/or rules identified on the previous homework assignment.)

### HOMEWORK:

- (1) Read “Safety Issues” handout.
- (2) Challenging Beliefs Worksheets on Safety and other rules
- (3) Continue to read all accounts.

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## SESSION 9 HOMEWORK ASSIGNMENT

- (1) This week, we are beginning to explore five main areas, starting with beliefs related to “Safety.” Please read over the “Safety Issues” handout. As you review this, write down your beliefs related to self-safety and other-safety. Also, look over the list of beliefs or rules you have been working on over the past two months. See which of those rules seem to fit with issues of safety.
- (2) Use the Challenging Beliefs Worksheets to analyze and confront your rules. If you have issues with self- or other- safety, complete at least one worksheet to confront those beliefs. Use the remaining sheets for other rules/beliefs or recent distressing events. **Do at least one sheet per day** and make sure you bring these sheets to the next session.
- (3) Continue to read your written accounts daily.



## Safety Issues Module

**Beliefs Related to SELF:** The belief that you can protect yourself from harm and have some control over events.

### Prior Experience

Negative	Positive
<p>If you are repeatedly exposed to dangerous and uncontrollable life situations, you may develop negative beliefs about your ability to protect yourself from harm. The traumatic event serves to confirm those beliefs.</p>	<p>If you have positive prior experiences, you may develop the belief that you have control over most events and can protect yourself from harm. The traumatic event causes disruption in this belief.</p>

Symptoms Associated With Negative Self-Safety Beliefs
<ul style="list-style-type: none"> <li>➤ Chronic and persistent anxiety</li> <li>➤ Intrusive thoughts about themes of danger</li> <li>➤ Irritability</li> <li>➤ Startled responses or physical arousal</li> <li>➤ Intense fears related to future victimization</li> </ul>

### Resolution

If you previously believed that...	Possible self-statements may be...
<p>“It can’t happen to me,” you will need to resolve the conflict between this belief and the victimization experience.</p>	<p>“It is unlikely to happen again, but the possibility exists.”</p>
<p>“I can control what happens to me and can protect myself from any harm,” you will need to resolve the conflict between prior beliefs and the victimization experience.</p>	<p>“I do not have control over everything that happens to me, but I can take precautions to reduce the possibility of future traumatic events.”</p>
<p>You had no control over events and could not protect yourself, the traumatic event will confirm these beliefs. New beliefs must be developed that mirror reality and serve to increase your beliefs about your control and ability to protect yourself.</p>	<p>“I do have some control over events and I can take steps to protect myself from harm. I cannot control the behavior of other people, but I can take steps to reduce the possibility that I will be in a situation where my control is taken from me.”</p>

**Beliefs Related to OTHERS:** The belief about the dangerousness of other people and expectancies about the intent of others to cause harm, injury, or loss.

### Prior Experience

Negative	Positive
If you experienced people as dangerous in early life or you believed it as a cultural norm, the traumatic event will seem to confirm these beliefs.	If you experienced people as safe in early life, you may expect others to keep you safe and not cause harm, injury, or loss. The traumatic event causes a disruption in this belief.

Symptoms Associated With Negative Others-Safety Beliefs
<ul style="list-style-type: none"> <li>➤ Avoidant or phobic responses</li> <li>➤ Social withdrawal</li> </ul>

### Resolution

If you previously believed that...	Possible self-statements may be...
“Others are out to harm me and can be expected to cause harm, injury, or loss,” you will need to adopt new beliefs in order to be able to continue to feel comfortable with people you know and to be able to enter into new relationships with others.	“There are some people out there who are dangerous, but not everyone is out to harm me in some way.”
“I will not be hurt by others,” you will need to resolve the conflict between this belief and the victimization.	“There may be some people who will harm others, but it is unrealistic to expect that everyone I meet will want to harm me.”

# Challenging Beliefs Worksheet

A. Situation	B. Thought/Rule	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought or belief leading to the unpleasant emotion(s).	Write thought/Rule] related to Column A.  Rate belief in each thought below from 0-100% (How much do you believe this thought?)	Use <b>Challenging Questions</b> to examine your automatic thoughts from Column B.  Is the thought balanced and factual or extreme?	Use the <b>Problematic Thinking Worksheet</b> to decide if this is one of your problematic patterns of thinking.	What else can I say instead of Column B? How else can I interpret the event instead of Column B?  Rate belief in alternative thought(s) from 0-100%
	<div style="background-color: black; color: white; text-align: center; padding: 2px;"><b>C. Emotion(s)</b></div> Specify sad, angry, etc., and rate how strongly you feel each emotion from 0-100%	Evidence For?  Evidence Against?  Habit or fact?  Interpretations not accurate?  All or none?  Extreme or exaggerated?  Out of context?  Source unreliable?  Low versus high probability?  Based on feelings or facts?  Irrelevant factors?	Jumping to conclusions:  Exaggerating or minimizing:  Disregarding important aspects:  Oversimplifying:  Over-generalizing:  Mind reading:  Emotional reasoning:	<div style="background-color: black; color: white; text-align: center; padding: 2px;"><b>G. Re-rate Old Thought(s)</b></div> Re-rate how much you now believe the thought(s) in Column B from 0-100%  <div style="background-color: black; color: white; text-align: center; padding: 2px;"><b>H. Emotion(s)</b></div> Now what do you feel? 0-100%

A. Situation	B. Thought(s)	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought or belief leading to the unpleasant emotion(s).	Write thought(s) related to Column A. Rate belief in each thought below from 0-100% (How much do you believe this thought?)	Use <b>Challenging Questions</b> to examine your automatic thoughts from Column B.  Is the thought balanced and factual or extreme?	Use the <b>Patterns of Problematic Thinking Worksheet</b> to decide if this is one of your problematic patterns of thinking.	What else can I say instead of Column B? How else can I interpret the event instead of Column B?  Rate belief in alternative thought(s) from 0-100%
<i>I have to ride on a plane.</i>	<i>Air travel is dangerous. – 75%</i>  <i>I could be killed. – 50%</i>	Evidence For? <i>People have been killed.</i>  Evidence Against? <i>Airport security has been increased.</i>  Habit or fact?  Interpretations not accurate?  All or none?  Extreme or exaggerated?  Out of context?	Jumping to conclusions:  Exaggerating or minimizing:  Disregarding important aspects:  Oversimplifying:  Over-generalizing:	<i>The chances are very small that I will be killed or hurt while flying. – 95%</i>  <i>Even if the plane blew up, I could not do anything about it. – 80%</i>
	<b>C. Emotion(s)</b>			<b>G. Re-rate Old Thought(s)</b>
	Specify sad, angry, etc., and rate how strongly you feel each emotion from 0-100%	Source unreliable?  Low versus high probability?	Mind reading:	Re-rate how much you now believe the thought(s) in Column B from 0-100%  15%, 10%
	<i>Afraid – 100%</i> <i>Helpless – 75%</i> <i>Anxious – 75%</i>	Based on feelings or facts? <i>I am letting myself believe this because I feel scared and not because it is realistic.</i>  Irrelevant factors?	Emotional reasoning: <i>I feel very small... that I will be hurt or killed flying – 95%</i>	<b>H. Emotion(s)</b>  Now what do you feel? 0-100%  <i>Afraid – 40%</i> <i>Helpless – 5%</i> <i>Anxious – 10%</i>

# Challenging Beliefs Worksheet

A. Situation	B. Thought(s)	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought or belief leading to the unpleasant emotion(s).	Write thought(s) related to Column A. Rate belief in each thought below from 0-100% (How much do you believe this thought?)	Use <b>Challenging Questions</b> to examine your automatic thoughts from Column B.  Is the thought balanced and factual or extreme?	Use the <b>Patterns of Problematic Thinking Worksheet</b> to decide if this is one of your problematic patterns of thinking.	What else can I say instead of Column B? How else can I interpret the event instead of Column B?  Rate belief in alternative thought(s) from 0-100%
<p><i>If I express anger, I'll be out of control.</i></p>	<p><i>Anger is not right, so it is wrong. – 50%</i></p> <p><i>Angry people are scary. I don't want to be that way. – 90%</i></p> <p><i>If I let myself go, I'll be destructive. – 85%</i></p>	<p>Evidence For? <i>Feeling my anger chokes me because I don't let it out.</i></p> <p>Evidence Against? <i>Even Jesus got angry. I have never been really destructive when I was angry.</i></p> <p>Habit or fact?</p> <p>Interpretations not accurate?</p> <p>All or none?</p> <p>Extreme or exaggerated? <i>My phrases and words to describe anger are exaggerated.</i></p> <p>Out of context?</p> <p>Source unreliable?</p> <p>Low versus high probability?</p> <p>Based on feelings or facts?</p> <p>Irrelevant factors?</p>	<p>Jumping to conclusions:</p> <p>Exaggerating or minimizing: <i>Anger is rage instead of what it is—unpleasant.</i></p> <p>Disregarding important aspects:</p> <p>Oversimplifying:</p> <p>Over-generalizing:</p> <p>Mind reading:</p> <p>Emotional reasoning: <i>Because anger feels bad, it is bad/wrong, so I must be, too.</i></p>	<p><i>Anger is appropriate in some situations. – 100%</i></p> <p><i>Anger can be expressed without aggression. – 60%</i></p> <p><i>Anger is an emotion like sadness. I let myself feel that and it is not overwhelming. – 60%</i></p>
	<p style="text-align: center;"><b>C. Emotion(s)</b></p> <p>Specify sad, angry, etc., and rate how strongly you feel each emotion from 0-100%</p> <p><i>Angry – 50%</i> <i>Fear – 95%</i></p>	<p style="text-align: center;"><b>G. Re-rate Old Thought(s)</b></p> <p>Re-rate how much you now believe the thought(s) in Column B from 0-100%</p> <p><i>20%, 75%, 50%</i></p>	<p style="text-align: center;"><b>H. Emotion(s)</b></p> <p>Now what do you feel? 0-100%</p> <p><i>Angry – 50%</i> <i>Fear – 70%</i></p>	

## **Individual Treatment Plan**

Session/Week 10

Administer PCL

Discuss last week's assignment:

What was it like to do the Challenging Beliefs Worksheets?

Did you have any problems?

How was the "Safety" handout for you?

Is safety a topic that gives you problems?

Were you able to do some sheets on it?

### **Go over Challenging Beliefs Worksheets.**

Did the client address both physical and emotional safety? If not, help him/her to identify the rules that may be applicable and do them in session or assign them as homework.

Take some blank Challenging Beliefs Worksheets into session. As the client states beliefs or rules that need to be challenged, write the event and/or the rule down on a CBW sheet for the client. It is best to give these sheets to the client at the end of session (when giving the homework assignment) so the session will not be interrupted. Give only 1-2 of these additional sheets per session.

Ask how often the client was able to read accounts and how he/she is feeling.

\*\* The session is a recreation of what you do in the outside world. It is a safe place to practice. How do you feel about taking the opportunity to risk? What rules does risk-taking bring up for you?

Homework:

(1) Read "Trust Issues" handout.

(2) Challenging Beliefs Worksheets on Trust and other rules

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## SESSION 10 HOMEWORK ASSIGNMENT

- (1) Read over the “Trust Issues” handout to help you identify your rules on this issue.
- (2) Use the Challenging Beliefs Worksheets to continue confronting your rules. Focus attention on issues of self- or other-trust, as well as safety, if these beliefs continue to cause problems for you. **Do at least one sheet per day** and make sure you bring these sheets to the next session.

## Trust Issues Module

**Beliefs Related to SELF:** The belief that one can trust or rely on one’s own perceptions or judgments. This belief is an important part of self-concept and serves an important self-protection function.

### Prior Experience

Negative	Positive
<p>If you had prior experiences where you were blamed for negative events, you may develop negative beliefs about your ability to make decisions or judgments about situations or people. The traumatic event serves to confirm these beliefs.</p>	<p>If you had prior experiences that led you to believe that you had great judgment, the traumatic event may disrupt this belief.</p>

Symptoms Associated With Negative Self-Trust Beliefs
<ul style="list-style-type: none"> <li>➤ Feelings of self-betrayal</li> <li>➤ Anxiety</li> <li>➤ Confusion</li> <li>➤ Overcaution</li> <li>➤ Inability to make decisions</li> <li>➤ Self-doubt and excessive self-criticism</li> </ul>

### Resolution

If you previously believed that...	A possible self-statement may be...
<p>You could not rely on your own perceptions or judgments, the traumatic event may have reinforced your belief that “I cannot trust my judgment” or “I have bad judgment.” In order to come to understand that the traumatic event was not your fault and that your judgments did not cause the traumatic event, you need to adopt more adaptive beliefs.</p>	<p>“I can still trust my good judgment even though it’s not perfect.” “Even if I misjudged this person or situation, I realize that I cannot always realistically predict what others will do or whether a situation may turn out as I expect it to.”</p>
<p>... you had perfect judgment, the traumatic event may shatter this belief. New beliefs need to reflect the possibility that you can make mistakes but still have good judgment.</p>	<p>“No one has perfect judgment. I did the best I could in an unpredictable situation, and I can still trust my ability to make decisions even though it’s not perfect.”</p>



**Beliefs Related to OTHERS:** Trust is the belief that the promises of other people or groups can be relied on with regard to future behavior. One of the earliest tasks of childhood development is trust versus mistrust. A person needs to learn a healthy balance of trust and mistrust and when each is appropriate.

### Prior Experience

Negative	Positive
If you were betrayed in early life, you may have developed the generalized belief that “no one can be trusted.” The traumatic event serves to confirm this belief, especially if you were hurt by an acquaintance.	If you had particularly good experiences growing up, you may have developed the belief that “All people can be trusted.” The traumatic event shatters this belief.

### Posttraumatic Event Experience

If the people you knew and trusted were blaming, distant, or unsupportive after the traumatic event, your belief in their trustworthiness may have been shattered.

Symptoms Associated With Negative Others-Trust Beliefs
<ul style="list-style-type: none"> <li>➤ Pervasive sense of disillusionment and disappointment in others</li> <li>➤ Fear of betrayal or abandonment</li> <li>➤ Anger and rage at betrayers</li> <li>➤ If repeatedly betrayed, negative beliefs may become so rigid that even people who are trustworthy may be viewed with suspicion</li> <li>➤ Fear of close relationships, particularly when trust is beginning to develop, active anxiety and fear of being betrayed</li> <li>➤ Fleeing from relationships</li> </ul>

### Resolution

If you previously believed that...	Possible self-statements may be...
If you grew up believing that “no one can be trusted,” which was confirmed by the traumatic event, you need to adopt new beliefs that will	“Although I may find some people to be untrustworthy, I cannot assume that everyone is that way.” “Trust is not an all-or-none concept.

<p>allow you to enter into new relationships with others instead of withdrawing because you believe others to be untrustworthy.</p>	<p>Some may be more trustworthy than others.”  “Trusting another involves some risk, but I can protect myself by developing trust slowly and including what I learn about that person as I get to know him or her.”</p>
<p>“Everyone can be trusted,” the traumatic event will shatter this belief. In order to avoid becoming suspicious of the trustworthiness of others, including those you used to trust, you will need to understand trust is not either/or.</p>	<p>“I may not be able to trust everyone, but that doesn’t mean I have to stop trusting the people I used to trust.”</p>
<p>If your beliefs about the trustworthiness of your support system were shattered, it will be necessary to address general issues before you assume that you can no longer trust the support system. Of central importance is to consider their reaction and the reasons why they may have reacted in an unsupportive fashion. Many people simply do not know how to respond and may be reacting out of ignorance. Some respond out of fear or denial because what has happened to you makes them feel vulnerable and may shatter their own beliefs. Practicing how to ask for what you need from them may be a step in assessing their trustworthiness.</p>	
<p>If your attempts to discuss the traumatic event with them leaves you feeling unsupported, you may use self-statements such as “There may be some people I cannot trust talking with about the traumatic event, but they can be trusted to support me in other areas.” If that person continues to blame you and make negative judgments about you, you may decide that this person is no longer trustworthy. It’s unfortunate, but sometimes you find out that some people you thought of as friends do not turn out to be true friends after a trauma. However, you may also be pleasantly surprised to find that some people have better reactions than you expected.</p>	

## **Individual Treatment Plan**

### Session/Week 11

#### Review homework:

- What was it like to do the Challenging Beliefs Worksheets? Any Problems?
- How was “Trust” for you?
- Is trust a topic that gives you problems?
- Were you able to do some sheets on it?
- Did the client address both “self” and “other” trust?

#### Discussion on trust:

- How do you know whom to trust?
- What are some good indicators to let you know whether or not someone is trustworthy?

#### **Go over Challenging Beliefs Worksheets.**

#### \*\* Discuss risk-taking.

- How much do you trust yourself to take risks?
- What types of risks have you made so far?
- What risks will you have to take to get what you need from this treatment?
- What is stopping you from taking those risks?

#### \*\* What is it like for you to look at and reexamine your beliefs about yourself and about the world?

Begin introduction of “Core Belief”—a belief that encompasses many of our automatic thoughts. Encourage client to dig deeper into his/her automatic thoughts (by asking “what does it mean to me if . . .” and/or “If   A   then   B   ; If   B   then   ?   . . .”) to uncover the core beliefs. Then, challenge the core belief on the sheets, not just the automatic thoughts.

#### **HOMEWORK:**

- (1) Read “Power and Control Issues” handout.
- (2) Challenging Beliefs Worksheets on Power and Control and other rules
- (3) Do at least one sheet using “I was abused” as the event and pick one belief or rule to challenge at a time.

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## SESSION 11 HOMEWORK ASSIGNMENT

- (1) Read over the “Power and Control Issues” handout to help you identify your rules on this issue.
- (2) Use the Challenging Beliefs Worksheets to address your rules related to power and control. **Do at least one sheet per day** and make sure you bring these sheets to your next session.
- (3) Do at least one sheet using “I was abused” as the event, and pick one belief or rule to challenge at a time.

## Power/Control Issues Module

**Beliefs Related to SELF:** The belief/expectation that you can solve problems and meet challenges. Power is associated with your capacity for self-growth.

### Prior Experience

Negative	Positive
<p>If you grew up experiencing inescapable, negative events, you may develop the belief that you cannot control events or solve problems even if they are controllable/solvable. This is called learned helplessness. Later traumatic events may seem to confirm prior beliefs about helplessness.</p>	<p>If you grew up believing that you had control over events and could solve problems (possibly unrealistically positive beliefs), the traumatic event may disrupt those beliefs.</p>

Symptoms Associated With Negative Self-Power/Control Beliefs
<ul style="list-style-type: none"> <li>➤ Numbing of feelings</li> <li>➤ Avoidance of emotions</li> <li>➤ Chronic passivity</li> <li>➤ Hopelessness and depression</li> <li>➤ Self-destructive patterns</li> <li>➤ Outrage when faced with events that are out of your control or people who do not behave as you would like</li> </ul>

### Resolution

If you previously believed that...	A possible self-statement may be...
<p>Overcontrol—It is important to understand that no one can have complete control over his emotions or behavior at all times. While you may be able to influence external events, it is impossible to control all external events or the behavior of other people. Neither of these facts is a sign of weakness, but only an understanding that you are human and can admit that you are not in control of everything that happens to you or your reactions.</p>	<p>“I do not have total control over my reactions, other people, or events at all times. I am not powerless, however, to have some control over my reactions to events or to influence the behavior of others or the outcome of some events.”</p>

<p>Helplessness or powerlessness—In order to regain a sense of control and decrease the accompanying symptoms of depression and loss of self-esteem that often go along with believing you are helpless, you will need to reconsider the ability to control events.</p>	<p>“I cannot control all events outside of myself, but I do have some control over what happens to me and my reactions to events.”</p>
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**Beliefs Related to OTHERS:** The belief that you can control future outcomes in interpersonal relationships or that you have some power, even in relation to powerful others.

### Prior Experience

Negative	Positive
<p>If you had prior experiences with others that led you to believe that you had no control in your relationships with others, or that you had no power in relation to powerful others, the traumatic event will seem to confirm those beliefs.</p>	<p>If you had prior positive experiences in your relationships with others and in relation to powerful others, you may have come to believe that you could influence others. The traumatic event may shatter this belief because you were unable to exert enough control, despite your best efforts, to prevent the event.</p>

Symptoms Associated With Negative Others-Power/Control Beliefs
<ul style="list-style-type: none"> <li>➤ Passivity</li> <li>➤ Submissiveness</li> <li>➤ Lack of assertiveness that can generalize to all relationships</li> <li>➤ Inability to maintain relationships because you do not allow the person to exert any control in the relationships (including becoming enraged if the other person tries to exert even a minimal amount of control)</li> </ul>

## Resolution

<b>If you previously believed that...</b>	<b>Possible self-statements may be...</b>
<p>Powerlessness—In order for you to avoid being abused in relationships because you do not exert any control, you will need to learn adaptive, balanced beliefs about your influence on other people.</p>	<p>“Even though I cannot always get everything I want in a relationship, I do have the ability to influence others by standing up for my rights to ask for what I want.”</p>
<p>Overcontrol—It is important to realize that healthy relationships involve sharing power and control. Relationships in which one person has all the power tend to be abusive (even if you are the one with all the power).</p>	<p>“Even though I may not get everything I want or need out of a relationship, I can assert myself and ask for it. A good relationship is one in which power is balanced between both people. If I am not allowed any control, I can exert my control in this relationship by ending it, if necessary.”</p>

## Individual Treatment Plan

Session/Week 12

Administer PCL

Review homework:

- How was “Power and Control” for you?
- Is that a topic that gives you problems?
- Were you able to do some sheets on it?

**Go over Challenging Beliefs Worksheets.**

Discussion on Power and Control:

[Pass out “Ways of Giving and Taking Power” handout.] There are lots of different ways people give and take their power. You can do this appropriately or inappropriately and this sheet gives us some examples. For example, if you tell your partner you will not have sex unless he/she does XYZ, you are taking power in a negative way. If you base your actions or behaviors solely on the reactions you expect from others, you are giving your power away. If, on the other hand, you do something (or do not do something) because you want to and it makes you feel good, you are taking your power appropriately. What are some ways you give and take your power? Are those negative or positive ways?

Talk about ways client gives power to and takes power away from others.

**HOMEWORK:**

- (1) Read “Self-Esteem Issues” handout.
- (2) Challenging Beliefs Worksheets on Esteem and other rules
- (3) Identifying Assumptions Sheet
- (4) Practice giving and receiving compliments and do at least one nice thing for yourself each day (without having to earn it). Write it down on the homework assignment sheet.



# Ways of Giving and Taking Power

	GIVING POWER	TAKING POWER
<b>POSITIVE</b>	<ul style="list-style-type: none"> <li>• Being altruistic (helping others without expecting anything in return)</li> <li>• Helping others in need or crisis</li> <li>• Sharing yourself with another person as part of the give and take in relationships</li> </ul> <p><b>Example:</b> You are on your way to the store when a friend asks for a ride to the doctor and you decide to take her.</p>	<ul style="list-style-type: none"> <li>• Being assertive</li> <li>• Setting limits and boundaries with others</li> <li>• Being honest with yourself and others</li> </ul> <p><b>Example:</b> Telling someone you cannot help him/her now, but you schedule a time to meet later when it fits into your schedule.</p>
<b>NEGATIVE</b>	<ul style="list-style-type: none"> <li>• Basing your actions or behaviors solely on the reactions you expect from others</li> <li>• Always placing the needs of others above your own</li> <li>• Allowing others to easily access your “buttons” to get you emotionally upset</li> </ul> <p><b>Example:</b> Having a strong negative reaction to someone who is clearly manipulating you to feel that way.</p>	<ul style="list-style-type: none"> <li>• Giving ultimatums</li> <li>• Testing limits</li> <li>• Intentionally upsetting others for personal gain</li> <li>• Behaving aggressively</li> </ul> <p><b>Example:</b> Telling your partner you will not have sex with him/her until they do what you want.</p>

## SESSION 12 HOMEWORK ASSIGNMENT

- (1) Read over the “Esteem Issues” handout to help you identify your rules on this issue.
- (2) Use the Challenging Beliefs Worksheets to confront rules regarding self-esteem. **Do at least one sheet per day** and make sure you bring these sheets to the next session.
- (3) Review the Identifying Assumptions Sheet and circle those beliefs/rules which are true for you. Complete Challenging Beliefs Worksheets on your most troublesome beliefs.
- (4) Do at least one nice thing for yourself each day (without having to earn it). Write down what you did for yourself on this sheet.
- (5) Practice giving and receiving compliments during the week. Write down who you complimented.

## Esteem Issues Module

**Beliefs Related to SELF:** Self-esteem is the belief in your own worth, which is a basic human need. Being understood, respected, and taken seriously is basic to the development of self-esteem.

### Prior Experience

Negative	Positive
<p>If you had prior experiences that represented a violation of your own sense of self, you are likely to develop negative beliefs about your self-worth. The traumatic event may seem to confirm these beliefs. Prior life experiences that are associated with negative beliefs about the self are likely to be caused by:</p> <ul style="list-style-type: none"> <li>- Believing other people's negative attitude about you</li> <li>- An absence of empathy and responsiveness by others</li> <li>- The experience of being devalued, criticized, or blamed by others</li> <li>- The belief that you had violated your own ideals or values</li> </ul>	<p>If you had prior experiences that served to enhance your beliefs about your self-worth, then the traumatic event may disrupt those beliefs (your self-esteem).</p>

#### Examples of Negative Self-Esteem (Self-Worth) Beliefs

- I am bad, destructive, or evil
- I am responsible for bad, destructive, or evil acts
- I am basically damaged or flawed
- I am worthless and deserving of unhappiness and suffering

#### Symptoms Associated With Negative Self-Esteem (Self-Worth) Beliefs

- Depression
- Guilt
- Shame
- Possible self-destructive behavior

## Resolution

If you previously believed that...	A possible self-statement may be...
<p>You were worthless (or any of the beliefs listed above) because of prior experiences, the traumatic event may seem to confirm this belief. This can also occur if you received poor social support after the event. In order to improve your self-esteem and reduce the symptoms that often go along with it, you will need to reevaluate your beliefs about your self-worth and be able to replace maladaptive beliefs with more realistic, positive ones.</p>	<p>“Sometimes bad things happen to good people. Just because someone says something bad about me, that does not make it true. No one deserves this, and that includes me. Even if I have made mistakes in the past, that does not make me a bad person deserving of unhappiness or suffering (including the traumatic event).”</p>
<p>If you had positive beliefs about your self-worth before the traumatic event, you may have believed that “nothing bad will happen to me because I am a good person.” The event may disrupt such beliefs, and you may think you are a bad person because this event happened, or look for reasons why it happened or what you did to deserve it (i.e., “Maybe I was being punished for something I had done or because I am a bad person.”) In order to regain your prior positive beliefs about your self-worth, you will need to make some adjustments so that your sense of worth is not disrupted every time something unexpected and bad happens to you. When you can accept that bad things might happen to you (as they happen to everybody from time to time), you let go of blaming yourself for events that you did not cause.</p>	<p>“Sometimes bad things happen to good people. If something bad happens to me, it is not necessarily because I did something to cause it or because I deserved it. Sometimes there is not a good explanation for why bad things happen.”</p>

**Beliefs Related to OTHERS:** These are beliefs about how much you value other people. In addition, a realistic view of others is important to psychological health. In less psychologically healthy people, these beliefs are stereotyped, rigid, and relatively unchanged by new information.

## Prior Experience

Negative	Positive
<p>If you had many bad experiences with people in the past or had difficulty taking in</p>	<p>If your prior experiences with people had been positive, and if negative events in the world</p>

<p>new information about people you knew (particularly negative information), you may have found yourself surprised, hurt, and betrayed. You may have concluded that other people are not good or not to be respected. You may have generalized this belief to everyone (even those who are basically good and to be respected). The traumatic event may seem to confirm these beliefs about people.</p>	<p>did not seem to apply to your life, the event was probably a belief-shattering event. Prior beliefs in the basic goodness of other people may be particularly disrupted if people, who were assumed to be supportive, were not there for you after the event.</p>
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<b>Examples of Negative Others-Esteem Beliefs</b>
<ul style="list-style-type: none"> <li>➤ The belief that people are basically uncaring, indifferent, and only out for themselves</li> <li>➤ The belief that people are bad, evil, or malicious</li> <li>➤ The belief that the entire human race is bad, evil, or malicious</li> </ul>

<b>Symptoms Associated With Negative Others-Esteem Beliefs</b>
<ul style="list-style-type: none"> <li>➤ Chronic anger</li> <li>➤ Contempt</li> <li>➤ Bitterness</li> <li>➤ Cynicism</li> <li>➤ Disbelief when treated with genuine caring compassion (“What do they really want?”)</li> <li>➤ Isolation or withdrawal from others</li> <li>➤ Antisocial behavior justified by the belief that people are only out for themselves</li> </ul>

## Resolution

	<b>Possible self-statements may be...</b>
<p>It will be important for you to reconsider the automatic assumption that people are no good, and consider how that belief has affected your behavior and social life in general.</p>	
<p>When you first meet someone, it is important that you do not form snap judgments because</p>	

<p>these tend to be based on stereotypes, which are not generally true for the majority of people you will meet. It is all right to adopt a “wait and see” attitude, which allows you flexibility in developing your perceptions about the other person and does not penalize the person whom you are trying to get to know.</p>	
<p>If, over time, this person makes you uncomfortable, or does things that you do not approve of, you are free to stop trying to develop the relationship and end it. Be aware, however, that all people make mistakes, and consider your ground rules for friendships or intimate relationships. If you confront the person with something that makes you uncomfortable, you can use that person’s reaction to your request in making a decision about what you want from that person in the future (i.e., if the person is apologetic and makes a genuine effort to avoid making the same mistake, then you might want to continue getting to know this person. If the person is insensitive to your request or belittles you in some other way, then you may want to get out of this relationship.) The important point is, like trust, you need time to get to know people and form an opinion of them. It is important that you adopt a view of others that is balanced and allows for changes.</p>	<p>“Although there are people I do not respect and do not wish to know, I cannot assume this about everyone I meet. I may come to this conclusion later, but it will be after I have learned more about this person.”</p>
<p>If those you expected support from let you down, don’t drop these people altogether at first. Talk to them about how you feel and what you want from them. Use their reactions to your request as a way of evaluating where you want these relationships to go.</p>	<p>“People sometimes make mistakes. I will try to find out whether they understand it was a mistake or whether it reflects a negative characteristic of that person, which may end the relationship for me if it is something I cannot accept.”</p>

## Individual Treatment Plan

### Session/Week 13

Review homework:

- What did you think of the Identifying Assumptions sheet?
- Did any of the rules fit for you?
- Did you seem to cluster in one area more than others?
- How was “Self-Esteem” for you?
- Is that a topic that gives you problems?
- Were you able to do some sheets on it?

### **Go over Challenging Beliefs Worksheets.**

What types of things has client done to “be nice” to himself/herself? What rules might be interfering with this? (You can do a sheet on this!)

\*\* If necessary, address the pressure the client may be putting on himself/herself to be doing better with the treatment since you are nearing the end.

- What rules are behind this?
- What expectations did you have at the beginning of treatment?
- What will you need to do to meet your personal goals?

### **HOMEWORK:**

- (1) Read “Assertiveness and Communication Issues” handout.
- (2) Challenging Beliefs Worksheets on Assertiveness and Communication
- (3) Review communication skills handout and practice communicating more assertively.
- (4) Refer back to the Identifying Assumptions sheet and challenge any of those beliefs that are problematic for you.
- (5) Practice giving and receiving compliments and do at least one nice thing for yourself each day (without having to earn it). Write it down on the homework assignment sheet.

(\*\* Indicates potential topics for discussion if time allows and if appropriate for client.)

## SESSION 13 HOMEWORK ASSIGNMENT

- (1) Read over the “Assertiveness and Communication Issues” handout to help you identify your rules on this issue.
- (2) Use the Challenging Beliefs Worksheets to confront rules regarding Assertiveness and Communication. **Do at least one sheet per day** and make sure you bring these sheets to the next session.
- (3) Read the “Communication Skills” handout and practice using these tools over the next week.
- (4) Refer back to the “Identifying Assumptions” sheet and challenge any of those beliefs that are problematic for you.
- (5) Practice giving and receiving compliments during the week and do at least one nice thing for yourself each day (without having to earn it). Write down on this sheet what you did for yourself and who you complimented.



## Assertiveness and Communication Module

**Beliefs Related to SELF:** “Assertiveness” can be thought of as standing up for your rights without stepping on or abusing the rights of others. So, a primary goal of learning to be assertive is believing you have the same rights as others.

### Prior Experience

Negative	Positive
If you grew up believing you do not have some of these basic rights because of the abuse, further bad relationships may cause such beliefs to become even stronger.	If you believe you have the same rights of others, and the abuse beliefs may cause you to doubt and question whether you had rights to begin with in any situation.

#### Examples of Negative Assertiveness/Communication Beliefs

- If I say “no” to someone, he/she will hate me.
- I am bad/evil
- My rights are not as important as the rights of others.
- If I ask for help, others will think I am weak.

#### Symptoms Associated With Negative Assertiveness/ Communication Beliefs

- Taking too much responsibility for other’s actions
- Having relationships where others walk all over you, or you walk over them.
- Feelings of self-doubt
- Feelings of anger toward yourself and others

### Resolution

If you previously believed that...	A possible self-statement may be...
As with other issues, the first step to resolution of disruptive beliefs is becoming aware of the beliefs you do have. After reading the list of basic human rights, think about whether you believe you have these rights or not. If you do, great! If not, you might want to spend some time exploring and challenging the beliefs you do have to see if you want to alter them in some way. The list of rights given is not all-inclusive. Some may fit for you and some may	<ol style="list-style-type: none"> <li>1. I have the right to be the ultimate judge of myself.</li> <li>2. I have the right to offer no reasons or excuses to justify my feelings or behaviors.</li> <li>3. I have the right to change my mind.</li> <li>4. I have the right to make mistakes, accepting responsibility for them.</li> <li>5. I have the right to focus on my own needs and wishes.</li> <li>6. I have the right to be illogical.</li> </ol>

not . . . the choice is yours.	<p>7. I have the right to say “no.”</p> <p>8. I have the right to say “I don’t know.”</p> <p>9. I have the right to say “I don’t care.”</p> <p>10. I have the right to say “please help me.”</p> <p>11. I have the right to say “I don’t understand.”</p> <p>12. I have the right to express my positive and negative thoughts and feelings, as well as the right to refuse to express them.</p> <p>13. I have the right to walk away from a situation that I cannot, or do not, wish to deal with.</p>

**Beliefs Related to OTHERS:** Knowing that we have these basic rights and acting as if we have these rights are two different things. Good communication skills can help you assertively express your thoughts, feelings, wishes, and needs to others.

### Prior Experience

Negative	Positive
<p>If you are taught that you do not have the right to express yourself to others or that your rights will be ignored if you do state them, the abuse will serve to confirm such beliefs. Further experiences may also confirm beliefs that you should not express yourself or that doing so has negative consequences</p>	<p>If you believe that you have healthy and assertive communication beliefs, the abuse may conflict with these beliefs. When you believe in your right to say “no” to someone, and the person violates that right by abusing you, you may begin to question if you have the right to say no at all.</p>

Examples of Negative Others-Assertiveness Beliefs
<ul style="list-style-type: none"> <li>➤ The belief that all conflicts/fights end badly</li> <li>➤ If I tell someone how I feel, I will be hurt</li> <li>➤ If someone disagrees with me, I am being attacked</li> <li>➤ I must stand up for myself, no matter what</li> </ul>

Symptoms Associated With Negative Others-Assertiveness Beliefs
<ul style="list-style-type: none"> <li>➤ Difficulty expressing all your feelings to others</li> <li>➤ Unable to say no to others</li> <li>➤ Forgetting or ignoring the rights of others</li> </ul>

## Resolution

	A Possible alternative may be...
<p>It can be challenging to learn how to communicate assertively with others, but that is a crucial part to building self-esteem and taking back your power positively. Before learning more about behaving assertively you need to know more about what “assertiveness” means, and how it differs from other types of communication behaviors. There are four categories of communication behavior: passivity, aggressiveness, passive-aggressiveness, and assertiveness.</p>	
<p>When someone is <u>passive</u>, he/she tends to believe that his/her rights are not the same or as important as others’ rights. As a result, people are usually allowed to “walk on” him/her. Sometimes, people act in a passive way thinking they will be able to avoid conflict or avoid some of the consequences of being honest with others. People often act passively because on some level it works. Being passive <i>may</i> let you avoid conflict for a while, but usually the problems do not go away, they just get covered up. When you are not able to express your thoughts and feelings to others, the feelings do not simply go away—sometimes they even get stronger. If you are not able to share your feelings with others, you might turn those emotions back on yourself which can lead you to feel chronically depressed, anxious, scared, or angry.</p>	<p><u>Assertiveness</u> is a set of behaviors that allows you to be honest about how you are feeling in a way that does not infringe upon the rights of others. Assertive persons are clear about their rights as humans and try not to have these rights violated, no matter how difficult the situation may be. They try to deal with situations as they come up instead of trying to “avoid” them and hoping they will go away. Assertive persons also do more than just tell others how they are feeling; they try to actively listen to what others say as well. Behaving assertively is not easy and takes a lot of practice. There is no such thing as perfection (i.e., no one is “perfectly assertive” all the time).</p>
<p><u>Aggressiveness</u> can be thought of as someone standing up for his/her rights while ignoring the rights of others. Like passive behavior, some of the time aggressiveness works. That is, you get a response from the other person and it may allow you to get what you want. Unfortunately, aggressive behavior tends to hurt others and harm relationships. If you want to build relationships with others, acting</p>	<p>Learning to be more assertive can help you feel more confident about who you are and your abilities. Often, people will think that if they are honest with others, then people will not like them any more. More often than not, however, the opposite is true—people will probably respect you even more! The main challenge in learning to be assertive is first being aware of your own feelings, and then learning how to</p>

aggressively is probably not a good solution.	communicate them to others.
<p>When someone is <u>passive-aggressive</u>, he/she tends to fluctuate between the two different types of communicating. In other words, when someone is passive-aggressive, he/she will find indirect ways of communicating. For example, the person might say, "I am not upset" while clenching his/her teeth or crying; he/she may stop calling instead of breaking up with someone face to face; or he/she may act humorously sarcastic and complaining.</p>	

## Individual Treatment Plan

Session/Week 14

Administer PCL

Discuss last week's assignment:

Assertiveness and Communication module—Focus discussion on esteem as it relates to relationships with others and the ability to communicate assertively.

How do you think self-esteem is tied to assertiveness and communication?

What was it like to review the communication handout?

What did you learn?

Did you practice anything new over the past week?

**Go over Challenging Beliefs Worksheets.**

What types of things has client done to “be nice” to himself/herself? What rules might be interfering with this? (You can do a sheet on this!)

Begin preparing client for the end of therapy (only two more sessions).

What thoughts/feelings do you have about the end of therapy?

How is that affecting you both in and outside of session?

What can you do in the short-term to help you with the ending of treatment?

What can you do in the long-term?

What are some ways you can get the support you need?

You can do a sheet (or give client one to do as homework) using “Therapy is ending” as the event.

**HOMEWORK:**

(1) Read “Intimacy Issues” handout.

(2) Challenging Beliefs Worksheets on Intimacy

(3) Do at least one nice thing for yourself each day and practice giving and receiving compliments.

(4) Read through completed CBW's.

## SESSION 14 HOMEWORK ASSIGNMENT

- (1) Read over the “1 Intimacy Issues” handout to help you identify your rules related to emotional intimacy or your ability to nurture and care for yourself.
- (2) Use the Challenging Beliefs Worksheets to confront rules regarding 1 intimacy. **Do at least one sheet per day** and make sure you bring these sheets to the next session.
- (3) Continue to do nice things for yourself on a daily basis. Also, continue to practice giving and receiving compliments.

## Intimacy Issues Module

**Beliefs Related to SELF:** An important function for stability is the ability to soothe and calm oneself. This self-intimacy is reflected in the ability to be alone without feeling lonely or empty. When a trauma occurs, people react differently depending on their expectancy of how well they will cope.

### Prior Experience

Negative	Positive
<p>If you had prior experiences (or poor role models) that led you to believe that you are unable to cope with negative life events, you may have reacted to the traumatic event with negative beliefs that you were unable to soothe, comfort, or nurture yourself.</p>	<p>A person with stable and positive self-intimacy may experience the traumatic event as less traumatic because of the expectancy and ability of drawing support from internal resources. However, if the event is in conflict with earlier self-intimacy beliefs, the person may feel overwhelmed or flooded by anxiety.</p>

Symptoms Associated With Negative Self-Intimacy Beliefs
<ul style="list-style-type: none"> <li>➤ Inability to comfort and soothe self</li> <li>➤ Fear of being alone</li> <li>➤ Experience of inner emptiness or deadness</li> <li>➤ Periods of great anxiety or panic if reminded of trauma when alone</li> <li>➤ May look to external sources of comfort—food, drugs, alcohol, medications, spending money, or sex</li> <li>➤ Needy or demanding relationships</li> </ul>

### Resolution

New beliefs	A possible self-statement may be...
<p>Understanding the typical reactions to trauma may help you feel less panicky about what you are experiencing. Most people cannot recover from such a major traumatic event without the support of others. External sources of comfort, such as alcohol or food, are just crutches that, instead of helping you to recover, may in fact</p>	<p>“I will not suffer forever. I can soothe myself and use the skills I have learned to cope with these negative feelings. I may need help in dealing with my reactions, but that is normal. Even though my feelings are quite strong and unpleasant to experience, I know they are temporary and will fade over time. The skills</p>

prolong your reactions. They may comfort you in the short run because you use them to avoid and suppress your feelings. The feelings do not go away, however, and you then have to deal with the consequences of the excess food, spending, alcohol, etc., which compound the problem.	and abilities I am developing now will help me to cope better with other stressful situations in the future.”
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**Beliefs Related to OTHERS:** The longing for intimacy, connection, and closeness is one of the most basic human needs. The capacity to be intimately connected with other people is fragile. It can easily be damaged or destroyed through insensitive, hurtful, or unempathic responses from others.

### Prior Experience

Negative	Positive
Negative beliefs may result from traumatic loss of intimate connections. The event may seem to confirm your belief in your inability to be close to another person.	If you previously had satisfying intimate relationships with others, you may find that the event (especially if committed by an acquaintance) may leave you believing that you could never be intimate with anyone again.

Posttraumatic Experience
You may also experience a disruption in your belief about your ability to be intimate with others if you were blamed or rejected by those who you thought would be supportive.

Symptoms Associated With Negative Others-Esteem Beliefs
<ul style="list-style-type: none"> <li>➤ Pervasive loneliness</li> <li>➤ Emptiness or isolation</li> <li>➤ Failure to experience connectedness with others even in relationships that are genuinely loving and intimate</li> </ul>

### Resolution

New beliefs	Possible self-statements about [ ] may be...
In order for you to again have intimate relationships with others, you will need to	[New relationships] “Even though a former relationship did not work out, it does not mean



<p>adopt new, more adaptive beliefs about intimacy. Intimate relationships take time to develop and involve effort from both people. You are not solely responsible for the failure of prior relationships. The development of relationships involves risk taking, and it is possible that you may be hurt again. Staying away from relationships for this reason alone, however, is likely to leave you feeling empty and alone.</p>	<p>that I cannot have satisfying intimate relationships in the future. I cannot continue to believe and behave as though everyone will betray me. I will need to take risks in developing relationships in the future, but if I take it slow, I will have a better chance of telling whether this person can be trusted.”</p>
<p>Attempt to resolve your issues with the people who let you down and hurt you by asking them for what you need and letting them know how you feel about what they said or did. If they are unable to adjust to your requests and are unable to give you what you need, you may decide that you can no longer be close to those people. You may find, however, that they responded as they did out of ignorance or fear. As a result of your efforts, communication may improve and you may end up feeling closer to them than you did before the traumatic event.</p>	<p>[Existing relationships] “I can still be close to people, but I may not be able (or want) to be intimate with everyone I meet. I may lose prior or future intimate relationships with others who cannot meet me half-way, but this is not my fault or due to the fact that I did not try.”</p>



## Individual Treatment Plan

### Session/Week 15

Discuss last week's assignment:

#### Intimacy Issues

What rules do you have about caring for/nurturing yourself?

What are some things you can do to help nurture yourself?

How do you build emotional intimacy with others?

How is this related to issues of safety, trust, power, and esteem?

#### **Go over Challenging Beliefs Worksheets.**

May need to address Triggers and what to do in situations where you might expect to be triggered (i.e., physical intimacy) and those situations where you might not expect to be triggered (i.e., watching a news magazine show on television).

Is the client doing nice things for himself/herself? If not, what rules are getting in the way?  
Challenge those rules.

Next week will be the last session, how are you doing with that?

What thoughts/feelings are you having about the end of treatment?

#### **HOMEWORK:**

- (1) Read "Social Support" handout.
- (2) Challenging Beliefs Worksheets on Social Support
- (3) Write Impact of Event(s) statement regarding how you believe the abuse has impacted you. Focus on how you see yourself and others *right now*, not how you were four months ago.
- (4) Do at least one nice thing for yourself each day and practice giving and receiving compliments.
- (5) Continue to read through completed CBW's.

## SESSION 15 HOMEWORK ASSIGNMENT

- (1) Read the “Social Support” handout to help you identify your rules on this issue.
- (2) Use the Challenging Beliefs Worksheets to continue to confront rules regarding self- and other-intimacy, specifically on Social Support. **Do at least one sheet per day** and make sure you bring these sheets to the next session.
- (3) Please write at least one page on what it means to you that you were abused *as you see it right now* (not how you were four months ago). Write about how you see yourself, others, and the world. Also, consider the following topics while writing your statement: safety, trust, power/control, esteem, and intimacy. Bring this to the next session.
- (4) Continue to do nice things for yourself on a daily basis and continue to practice giving and receiving compliments.
- (5) Continue to read through your old Challenging Beliefs Worksheets. The more you read through them and practice using your new, alternative beliefs, the more you will be able to replace the “old” beliefs.

## Social Support Module

**Beliefs Related to SELF** Your social support system includes all the people in your life who give you help or support, including yourself. Having good social support brings in all of the topics you have worked on so far (e.g., safety, trust, power, self-esteem, and intimacy). This handout, however, focuses more on your beliefs about your abilities to solve your own problems and to ask for support from others.

### Prior Experience

Negative	Positive
<p>If you sometimes believe that you cannot help yourself or solve your own problems, the abuse may confirm these beliefs. Now, when you have difficult times, you may see that as further proof that you cannot handle things on your own.</p>	<p>A person with stable and positive social support may believe they can rely upon yourself to solve problems or to cope with difficult situations, the abuse could conflict with these beliefs. Now, you may doubt your ability to solve problems on your own and may think that you must always have someone else help you solve your problems.</p>

Symptoms Associated With Negative Support Beliefs
<ul style="list-style-type: none"> <li>➤ Inability to comfort and soothe self</li> <li>Fear of being alone</li> <li>Extreme emotional reaction every time you face a problem</li> <li>Feelings of self-doubt</li> <li>Hiding your true abilities from others</li> <li>Dependency upon others</li> </ul>

### Resolution

New beliefs	A possible self-statement may be...
<p>The ability to support yourself is rooted, initially, in knowing that you have the strength and resources to cope with life's difficulties on your own. Often, it is too easy to pay attention to "weaknesses" and to ignore the "strengths." The</p>	<p>"I can solve my own problems."            "Even though others can be helpful, I also have the ability to take care of myself."            "I have the right to recognize my strengths and resources."</p>

<p>first goal is to identify and challenge your disruptive beliefs regarding your ability to support yourself. Once you have done this, the goal switches to practice. That is, practicing acting as if you have the strength and tools to solve problems and to care for yourself.</p>	
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**Beliefs Related to OTHERS:** While it is important to learn how to provide support to yourself and to have confidence in your ability to do so, it is also important to ask for and receive support from others.

### Prior Experience

Negative	Positive
<p>If you sometimes believe that others are only out for themselves and are not willing or interested in helping you, the abuse may confirm such beliefs. Now, you may be afraid to reach out to others when you need support or guidance.</p>	<p>If you sometimes believe that you can receive support from others, the abuse may conflict with such beliefs. This may be especially true if you received poor or harmful support following the abuse. Now, it may be difficult to figure out who will and will not be supportive of you.</p>

Posttraumatic Experience
<p>You may also experience a disruption in your belief about your ability to be supported by others if you were blamed or rejected by those who you thought would be supportive.</p>

Symptoms Associated With Negative Others-Support Beliefs
<ul style="list-style-type: none"> <li>➤ Being alone</li> <li>➤ Depression</li> <li>➤ Difficulty connecting with others</li> </ul>

### Resolution

New beliefs	Possible self-statements about support may be...
<p>Like all of the other issues we have covered, social support is not an all-or-nothing thing.</p>	<p>“Everyone has the right to ask for and receive emotional support, including me.”  “Not everyone will be a good source of support,</p>

<p>There are many different types of social support. These different types include emotional, practical, financial, and advice or guidance. In most cases, you will find that one person will not (and cannot) satisfy your needs for each type of support. It is more likely that you will have some people who are your main sources of emotional support, others for financial support, and perhaps others for advice or guidance.</p>	<p>but many people will be.” “It is up to me to find out who will and will not be supportive.” “Asking for help and support is a sign of strength, not weakness.” “It is appropriate and healthy to share my power with those whom I care about and who care about me.”</p>

## Individual Treatment Plan

Session/Week 16

Discuss last week's assignment:

### Social Support

What are some of the rules you have about asking for and receiving support from others?

What can you do to get the support you need following the end of treatment?

Review client's Challenging Beliefs Worksheets.

Have client read *new* Impact of Events Statement. If the client did not write a new one, have him/her do it verbally in session.

Therapists reads *old* Impact of Events Statement.

Discuss differences between the two statements. Client may keep the *new* statement but not the old because it is preferred he/she walks out with the new set of beliefs in hand and not the old ones.

Assess for other areas of concern and address them as needed.

Prepare client for future setbacks:

Some people have referred to this therapy as being similar to learning how to ride a bicycle. It is scary in the beginning. You may want to quit and curse your instructor. You wonder if you really want to ride the bike at all. But, after crossing some pretty big hills, you feel really good and proud of yourself. Just because you know how to ride and are good at it, though, does not mean there will not be any more hills or roadblocks that will be difficult for you.

In the future, it will be important to know that you will run into some rough times. That does not mean you are backsliding or that you will go back to where you started. There will be times when your abuse or other stressors may bring up a lot of negative emotions for you and that is okay. What will be different is that you have a lot of coping skills you can rely on. What are some coping skills you can use when you have bad times?

Share "Appreciations and Regrets" with each other regarding your personal relationship.



## PCL-S: WEEKLY

Instructions:

1. Consider the most stressful experience you have experienced \_\_\_\_\_ (event)
2. Here is a list of problems and complaints that people sometimes have in response to stressful life experiences. Please read each one carefully, and then indicate, using the numbers to the right, how much you have been bothered by that problem in the past **WEEK**.

	Not at all	A little bit	Moderately	Quite a bit	Extremely
1. Repeated, disturbing memories, thoughts, or images, of the stressful experience?	1	2	3	4	5
2. Repeated, disturbing dreams of the stressful experience?	1	2	3	4	5
3. Suddenly acting or feeling as if the stressful experience was happening again (as if you were reliving it)?	1	2	3	4	5
4. Feeling very upset when something reminded you of the stressful experience?	1	2	3	4	5
5. Having physical reactions (e.g., heart pounding, trouble breathing, sweating) when something reminded you of the stressful experience?	1	2	3	4	5
6. Avoiding thinking about or talking about the stressful experience or avoiding having feelings related to it?	1	2	3	4	5
7. Avoiding activities or situations because they reminded you of the stressful experience?	1	2	3	4	5
8. Trouble remembering important parts of the stressful experience?	1	2	3	4	5
9. Loss of interest in activities that you used to enjoy?	1	2	3	4	5
10. Feeling distant or cut off from other people?	1	2	3	4	5
11. Feeling emotionally numb or being unable to have loving feelings for those close to you?	1	2	3	4	5
12. Feeling as if your future will somehow be cut short?	1	2	3	4	5
13. Trouble falling or staying asleep?	1	2	3	4	5
14. Feeling irritable or having angry outbursts?	1	2	3	4	5
15. Having difficulty concentrating?	1	2	3	4	5
16. Being "super-alert" or watchful or on guard?	1	2	3	4	5
17. Feeling jumpy or easily startled?	1	2	3	4	5

*PCL-S for DSM-IV (11/1/94) Weathers, Litz, Huska, & Keane National Center for PTSD – Behavioral Science Division.*

