

HANDOUT 1.1

Cognitive-Behavioral Conjoint Therapy for PTSD

Session Overview

R.E.S.U.M.E. LIVING

Phase 1. Rationale for Treatment and Education about PTSD and Relationships

Session 1. Introduction to Treatment

Session 2. Safety Building

Phase 2. Satisfaction Enhancement and Undermining Avoidance

Session 3. Listening and Approaching

Session 4. Sharing Thoughts and Feelings: Emphasis on *Feelings*

Session 5. Sharing Thoughts and Feelings: Emphasis on *Thoughts*

Session 6. Getting U.N.S.T.U.C.K.

Session 7. Problem Solving to Shrink PTSD

Phase 3. Making Meaning of the Trauma(s) and End of Therapy

Session 8. Acceptance

Session 9. Blame

Session 10. Trust

Session 11. Control

Session 12. Emotional Closeness

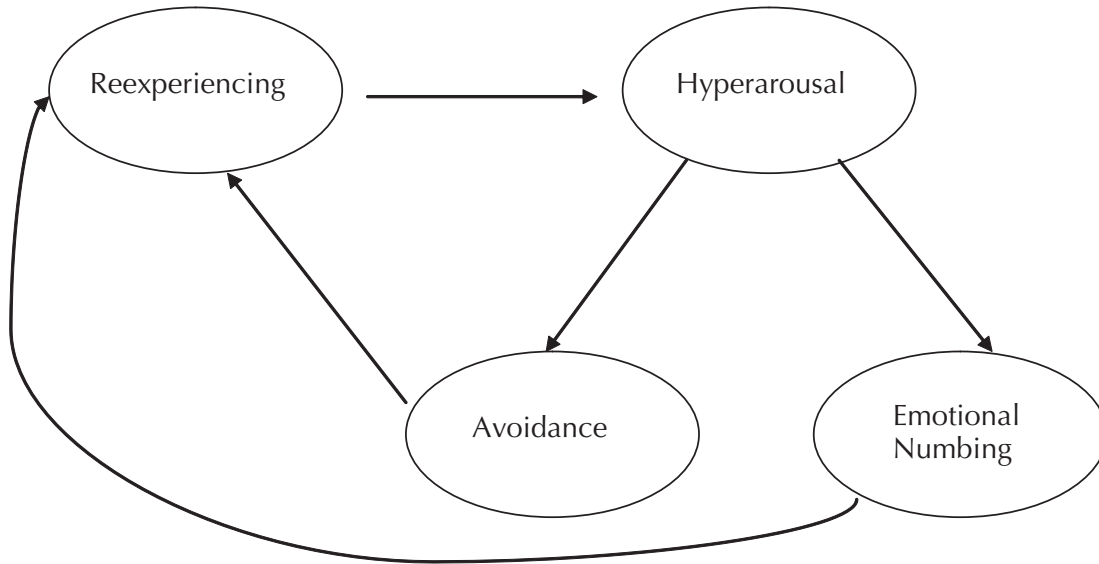
Session 13. Physical Closeness

Session 14. Posttraumatic Growth

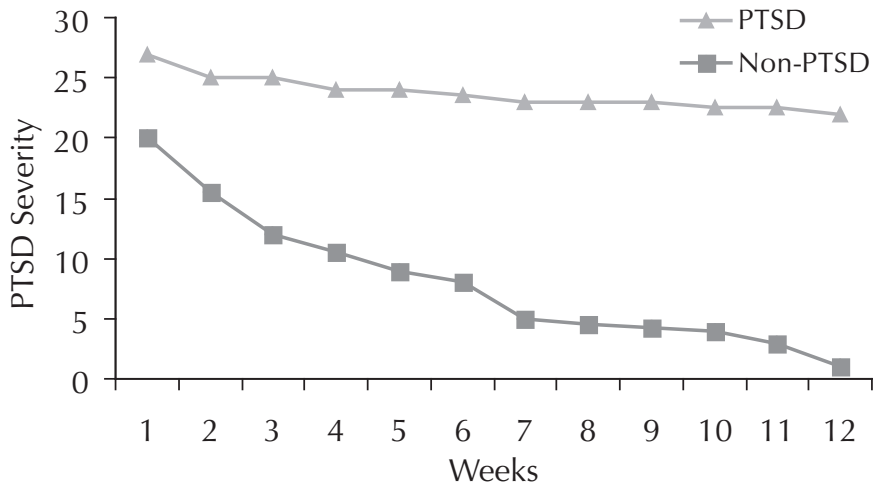
Session 15. Review and Reinforcement of Treatment Gains

Cycle of PTSD Symptoms and Recovery from Trauma

Cycle of PTSD Symptoms



Natural Recovery versus PTSD



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Treatment Contract

TREATMENT COMPONENTS—THREE PHASES

R = <i>Rationale</i> for Treatment	}	Phase 1
E = <i>Education</i> about PTSD and Relationships		
S = <i>Satisfaction</i> Enhancement	}	Phase 2
U = <i>Undermining</i> Avoidance		
M = <i>Making Meaning</i> of the Trauma(s)	}	Phase 3
E = <i>End of Therapy</i>—commitment to ongoing betterment		
Living		

TREATMENT EXPECTATIONS

1. Come to sessions as a couple
2. Keep information within conjoint sessions
3. Time limited
4. Out-of-session assignments to apply skills
5. Best foot forward
6. Focus on improving *both* your relationship *and* PTSD
7. Treatment targets: behavior and cognition

(cont.)

Treatment Contract *(page 2 of 2)*

Our goals:

What we will observe (behavioral):

1. Improve our relationship

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2. Improve PTSD symptoms

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I have read and received information regarding the therapy we are undertaking together and commit optimistically to myself and my partner to this and our goals listed above.

Partner

Date

Partner

Date

Trauma and Relationships

Exposure to a traumatic experience can cause both individual and relationship problems. Not all trauma reactions are the same, and you or your loved ones' reactions may be different from those of other people. This handout discusses some of the widespread reactions survivors and their loved ones can have after a traumatic event. You've been asked to read it together as a couple. As you review it, assess your feelings, thoughts, and actions and how they may be different since the traumatic experience.

PTSD AS IMPEDED RECOVERY

A traumatic event exposes a person to a situation that is life-threatening or involves risk of bodily injury to him- or herself or someone else. Intense feelings are natural reactions to being faced with this kind of threat. For many people, these feelings and reactions related to the trauma decrease over the weeks and months after the trauma is over. Feeling those natural feelings, getting support from others, facing the memories and reminders of the trauma, and developing healthy thoughts about why the trauma occurred help people recover naturally from their trauma. However, in the case of posttraumatic stress disorder (PTSD), these feelings may persist because the person continues to think he or she is in danger, despite actually being physically safe.

There are two major reasons people experience PTSD, and we specifically target these two reasons in the therapy.

1. *Thinking about the trauma.* One reason people continue to have intense feelings and other difficulties in the wake of trauma is that they find it hard to make sense of the event and how or why it happened. This causes the trauma survivor to relive or reexperience the event in an attempt to understand and make sense of it. It is as if the person's mind is trying to fit the pieces of a puzzle together but hasn't quite figured out how to do this. As a result of constantly reliving the event, it makes the person feel as if the trauma is still happening. When reminded of the event, the person feels the same feelings he or she felt at the time of the event, and this causes him or her to feel unsafe in the present. Many things can trigger or prompt these memories and reactions to them—certain places, times of day, smells, sounds, people, emotions, and bodily sensations. Partners or other family members can also serve as triggers, particularly if the traumatic event was at the hands of another person (e.g., rape, robbery, combat).
2. *Avoiding and numbing.* The second reason people have PTSD is that they avoid those reminders and their feelings, which makes them feel better in the short run but has the negative consequences in the long run of maintaining the cycle of symptoms. In the long run, they do not get the opportunity to learn that these reminders and feelings do not necessarily signal danger.

SYMPTOMS OF PTSD AND RELATIONSHIPS

PTSD consists of four different clusters of symptoms that feed off of one another to keep you stuck with the symptoms and relationship difficulties.

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Trauma and Relationships (page 2 of 3)

Reexperiencing Symptoms

The reexperiencing symptoms of PTSD can take the form of unwanted or intrusive thoughts about the trauma, some of which can interfere with attention and concentration. In addition to fear, these memories can be associated with other negative emotions, such as anger, sadness, shame, and intense physiological reactions, such as racing heart, sweating, nausea, or stomach upset. Partners sometimes think the traumatized individual is not interested in or paying attention to what he or she is saying when, in fact, the person may be distracted by trauma memories and the distress associated with them. Trauma survivors can also have flashbacks or vivid images, leaving them feeling as if they are back in the event. Partners may try to cover up or explain away this reaction if the flashback occurs when other people are around. Bad dreams about the trauma are also common, and couples may find it hard to sleep in the same bed due to the traumatized individual's disturbed sleep and restlessness.

Hyperarousal Symptoms

As a result of feeling like he or she is constantly reliving the event, the trauma survivor's fight-or-flight response is chronically activated. We are evolutionally wired to fight or flee our way out of a situation that is truly dangerous in the moment, and then when we are no longer in danger, for the fight-or-flight response to turn off, like a light switch. However, in the case of PTSD, it is as though the light switch is on all the time with the trauma survivor feeling as if the trauma is still happening or that something bad is going to happen again. Being chronically in the fight-or-flight mode results in the hyperarousal (i.e., overaroused) symptoms of PTSD. These symptoms include anger and irritability, which can erode happiness in intimate relationships. Partners may sometimes feel they are "walking on eggshells" to avoid the traumatized individual becoming angry or agitated. As a result, couples and family members may find it hard to communicate, particularly when there are differences of opinions or preferences. Verbal and physical aggression have also been associated with these symptoms.

Other symptoms of hyperarousal include trouble sleeping, concentration problems, being easily startled, and being super-alert or hypervigilant. Traumatized individuals are hypervigilant to protect themselves and their loved ones from perceived danger, and this can take many forms. For instance, to be able to scan the environment for threat and keep himself and others safe, the trauma survivor may try to sit with his back to the wall rather than the door, frequently check door locks, sleep with the lights on, patrol the perimeter of the house for intruders, or call loved ones multiple times in a row to make sure that nothing bad has happened to them. This hypervigilance for threat can also extend to loved ones to the extent that the trauma survivor perceives the partner as critical or negative even though the partner does not feel this way. For example, leaving socks on the floor can be interpreted as a sign of disrespect or asking a question about why the trauma survivor was late for dinner could be interpreted as an accusation of infidelity.

Behavioral Avoidance

Because it is unpleasant to reexperience a traumatic event and the hyperarousal that goes with the distressing memories, it is understandable that traumatized individuals might use a variety of strategies to feel better in the moment. One strategy is avoidance. Individuals with PTSD seek to avoid reminders of the traumatic event in their environment (such as people, places or things) and to avoid the unpleasant feelings associated with the event (e.g., anxiety, sadness, anger, guilt, shame). There also tends to be avoidance of thoughts and feelings associated with the reminders as well. Individuals with PTSD can avoid in many ways, including alcohol and drugs, sex, overworking, gambling, self-harm behaviors, and suicidal thinking. In an effort to be supportive, loved ones may try to protect or buffer traumatized

(cont.)

Trauma and Relationships (page 3 of 3)

individuals from situations that make them feel anxious or otherwise uncomfortable, and couples may adapt their relationship to minimize the traumatized individual's discomfort. For example, as a couple, they may not do activities that involve being around groups of people or in open spaces because the traumatized individual feels exposed and vulnerable.

Emotional Numbing

Emotional numbing is another way people who have been traumatized decrease the distress associated with trauma reminders. When people have been exposed to a traumatic event and feel extremely afraid, helpless, or horrified, they can feel overwhelmed and, to cope, disconnect from their feelings to temporarily decrease their intensity. Numbing is related to the freeze response, which occurs when the individual is in a life-threatening or otherwise intensely frightening situation and cannot fight or flee his or her way out of it. As a way of surviving, the body protectively becomes still and "hunkers down" for anticipated injury. In the case of PTSD, disconnecting from one's feelings becomes a general strategy to cope with a variety of stressful or uncomfortable situations so the individual can feel less anxious or distressed in the moment. In many cases, the emotional numbing happens almost automatically, and the traumatized individual may not even be aware that he or she is doing it.

Emotional numbing symptoms include difficulty feeling a range of emotions, both negative (e.g., anxiety, sadness, anger) and positive (e.g., joy, love). It is also seen through loss of interest in activities and people and feeling distant or cut off from others. Emotional numbing is particularly hard on intimate relationships because emotions serve as the "glue" that bonds people together. Emotions help couples feel close and connected to one another, and when they are not shared, partners can feel distant and disconnected.

Avoidance and numbing can contribute to problems with sexual relationships after a trauma. Sex, physical intimacy, and feeling vulnerable with another person more generally may be a trauma reminder and increase the urge to avoid or feel numb. Emotional numbing can contribute to difficulties feeling sexually interested due to lack of desire and difficulty feeling positive feelings, regardless of whether the trauma was sexual in nature. Physical closeness (sexual intimacy and physical affection more generally) is one way partners feel close to one another. When physical contact is uncomfortable or distressing for at least one person, couples may feel distant or cut off from one another.

OTHER TRAUMA-RELATED PROBLEMS AND RELATIONSHIPS

Other problems that can occur after a trauma include guilt, shame, and depression. Trauma survivors sometimes feel guilty about or ashamed of things that they did or did not do at the time of the event and think negative thoughts about themselves, including thoughts that they can't trust themselves. They may also have trouble trusting other people, which can get in the way of feeling close to others. Negative thoughts about oneself and others can contribute to depression. When people are depressed, they feel sad and may lose interest in things that they used to enjoy or think were important, including work, hobbies, or spending time with loved ones. Sometimes, the depression can contribute to people thinking life isn't worth living and that they would be better off dead. These kinds of thoughts may function like avoidance in that they provide a way for the person to minimize his or her distress in the moment by thinking of death as an escape from the current pain and suffering. At times, a couple's relationship may be affected as well because the traumatized individual has withdrawn and the couple is not engaged in doing things as a couple.

Trauma Impact Questions–I (page 2 of 2)

3. What do I believe in each of the following areas, as it relates to *me, my partner, and others*?

Trust:

Control:

Emotional Closeness:

Physical Closeness:

Out-of-Session Assignments

Session 1. Introduction to Treatment

1. Review the *Cycle of PTSD Symptoms and Recovery from Trauma (Handout 1.2)* together prior to the next session.
2. Read the *Trauma and Relationships (Handout 1.4)* together at least once prior to the next session.
3. Each of you should complete the *Trauma Impact Questions-I (Handout 1.5)*.
4. Each day, catch your partner doing something nice, and let him or her know that you have noticed this positive attitude and/or behavior. Place this form in an obvious place for the two of you and record on the form what you have noticed **each day**. Bring this form with you to the next session.

Next appointment: _____ @ _____.

YOU'VE BEEN CAUGHT DOING SOMETHING NICE

Week of: _____

	<i>Person Caught:</i> _____	<i>Person Caught:</i> _____
<i>Sunday</i>		
<i>Monday</i>		
<i>Tuesday</i>		
<i>Wednesday</i>		
<i>Thursday</i>		
<i>Friday</i>		
<i>Saturday</i>		

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Learning about Anger

Name: _____

Situation about which I was angry:

What were the earliest signs that I was angry?

What did I do to increase or decrease my anger (e.g., breathing)?

MY PARTNER'S ANGER

What are the earliest signs that my partner is angry?

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Steps to an Effective Time-Out

S = Self

1. What is the level of your own distress?
(0 = none → 10 = as intense as you can imagine)
5–6 = yellow light
7–8 = red light
2. Time-outs are for your sake.

T = Time-Out

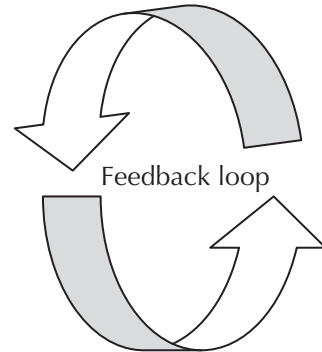
1. Nonverbal and verbal indication.
2. Immediate stop in communication.
3. Agree on an amount of time and circumstance for returning.

O = Outlet

1. BREATHE.
2. Avoid activities that fuel your negative emotions.
3. Clarify what one or two things are most upsetting.
4. Consider one thing you can do to improve communication.

P = Process

1. Return at the agreed-upon time and circumstance.
2. Resume communication, with focus on your goal for improvement. **REMEMBER: TIME-OUT IS ONLY AS GOOD AS TIME-IN.**
3. Self-monitor.

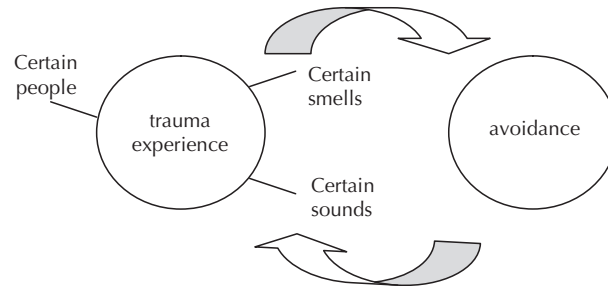


Time-Out Caller	Circumstances	What Worked	Areas to Improve
Sherry	<i>We were fighting over how we spend our money. I did not want Tom to buy more clothes.</i>	<ul style="list-style-type: none"> • Stopped fighting when time-out was called. • We came back at the time we agreed upon. • We called a second time-out. 	<ul style="list-style-type: none"> • We developed “ammunition” while we were apart. • We didn’t focus on improving our own communication.

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PTSD and Avoidance

As we discussed in the session, many people who have experienced trauma try to avoid thoughts and feelings associated with that event. Similarly, many people also avoid situations, places, and activities that remind them of the trauma or because they feel scary. People with PTSD can also become frightened of the thoughts, feelings, and physical sensations associated with emotions. This tendency has been described as a “fear of feeling.” Although avoiding can make you feel more comfortable in the short run, it actually can make the problem worse in the long run because it prevents you from overcoming your fears.



Like avoiding situations, places, and activities that remind them of traumas, people with PTSD come to avoid their own internal experiences, such as their thoughts, feelings, and physical sensations. We sometimes describe this as a fear of feeling. Techniques to avoid your inner experience might include being over-busy, thinking obsessively, numbing your emotions, overcontrolling your emotions for fear of being out of control, or injuring yourself to distract from painful emotions.

When you confront feared conversations, memories, situations, or feelings, several things begin to happen.

- Facing these situations **helps you make sense of them** (e.g., Why am I afraid to talk to my spouse about our children? → She might figure out that I don't feel like I'm an adequate parent).
- You learn that thinking about these experiences is **not dangerous and that being upset or anxious is not dangerous** (e.g., I won't go crazy if I'm sad after talking about these situations. In fact, my partner and I feel closer).
- You **become less fearful** of other situations that remind you of these situations (e.g., Now that I've faced this and had a positive experience, why wouldn't that be the case in the future?).
- You learn that you can **handle your fear and anxiety** and, therefore, you feel better about yourself (e.g., I'm strong enough to handle being sad or angry without acting on these feelings. I don't have to feel *good* all of the time, but rather be *good* at feeling).
- You learn that when you repeatedly confront memories or situations you have avoided, the fear and distress gradually decrease. In other words, you again become relatively comfortable in these situations (e.g., I don't get nearly as upset as I used to discussing these things with my partner).

Choosing to address more directly difficult issues for yourself and your relationship is hard work in the short term but will lead to long-term payoff.

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Avoidance List

List below as many things as possible that you, as a couple or individually, avoid but would approach if PTSD took up less space in your relationship.

Places

Situations

People

Feelings

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Out-of-Session Assignments

Session 3. Listening and Approaching

1. Continue to watch for, and point out, **positive** behaviors in each other.
2. Read over the *PTSD and Avoidance (Handout 3.1)* together prior to your next session.
3. Together, continue to write down things on the *Avoidance List (Handout 3.2)* that we started in today's session that you seem to **avoid** in your day-to-day life. This list will be used in the rest of the therapy.
4. Each day prior to the next session, spend 5 minutes communicating with one another using your best paraphrasing skills. Each of you should notice if the other **paraphrased** in your communication. If so, place a checkmark in that person's column or write down the content of his or her paraphrasing. Put this form somewhere obvious for the two of you as a reminder to practice the skill in your day-to-day life.

Next appointment: _____ @ _____.

CATCH EACH OTHER PARAPHRASING

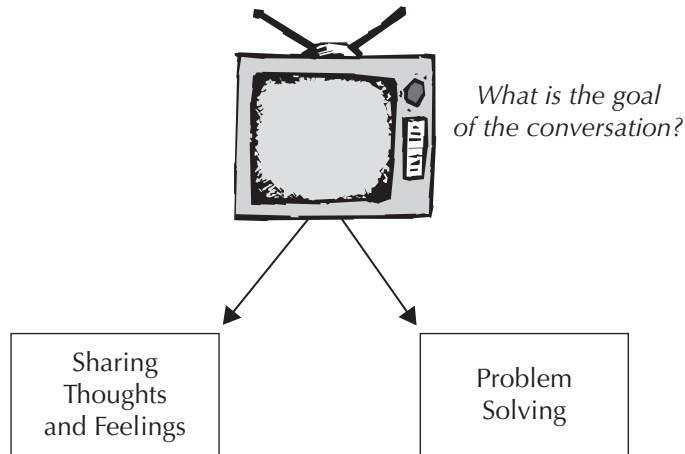
Week of: _____

	<i>Person Caught:</i>	<i>Person Caught:</i>
	_____	_____
Example:	<i>concerns at work</i>	✓
<i>Sunday</i>		
<i>Monday</i>		
<i>Tuesday</i>		
<i>Wednesday</i>		
<i>Thursday</i>		
<i>Friday</i>		
<i>Saturday</i>		

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Communication Channels

CHANNEL CHECK



The first step in effective communication is to check your channels. Knowing about the different channels of communication can help you determine the *goal* of the conversation. What channel are you on? Do you want to solve a problem, or do you want to share about it? What channel is your partner on? Are you on the same channel? As partners, you will have greater understanding of one another and more satisfaction in your communication if you become aware of what the difference is between the channels and notice the channels each of you are on. For instance, one partner may be on the sharing channel and wants to be understood rather than to work out the details of problem solving. Or one partner is on the problem-solving channel and is eager to resolve a particular issue. When couples are on different channels—that is, when one person is on the solving channel and the other is on the sharing channel—conflict, confusion, and miscommunication can result. Checking in to see which channels you are on can open the door to understanding, intimacy, empathy, and improved conflict resolution.

PROUD to Shrink PTSD

Getting the Most Out of Your Approach Tasks

P = PLANNED

*Approach tasks should be **planned**.* Decide in advance what you will approach. Plan together in advance when you will complete your practice assignment and put it in your schedule. Have a backup plan in case the original plan doesn't work out.

R = REPEAT, REPEAT, REPEAT

*Successful approach tasks are **repeated** frequently.* The more you approach what you have avoided, the more you will learn. It is a good idea to practice being in the same situation *repeatedly* until it becomes easier.

O = OBSTACLES

*Remove **obstacles** to your new learning.* Sometimes people will put themselves in approach situations, but find ways to avoid during them and, therefore, not learn. You may distract yourself, drink alcohol or use drugs, rely on your partner or children to help you through the situation, or “white knuckle” through the experience (i.e., just getting through the situation without really being there). Try to avoid doing anything that might prevent your new learning!

U = UNCOMFORTABLE

*Expect to feel **uncomfortable**.* It is perfectly normal to feel distressed while you are doing approach assignments. This is why they are on the approach list! Success should not be judged by how you felt in the situation. Rather, success should be judged by whether you were able to feel your feelings and stay in the situation.

D = DECREASE DISTRESS

Stay in the situation until your distress decreases. In order for you to learn new information from your experiences, it is very important for you to stay in the situation long enough to learn from it. Your distress is not likely to completely subside, but stay in the situation as long as you can to notice it decrease.

Out-of-Session Assignments

Session 4. Sharing Thoughts and Feelings: Emphasis on Feelings

1. Continue to watch for, and point out, positive behaviors in each other.
2. **Each of you** practices a channel check at least once prior to the next session.
3. At least one time per day, catch your partner sharing a feeling. Record the feeling "caught" below. You may need to ask how he or she is feeling in order to catch a feeling.
4. Shrinking PTSD through Approach:

_____ (people, place, situation, feeling)

Write about how it went:

Place this form somewhere that is convenient and visible to the two of you.

Next appointment: _____ @ _____.

CATCH YOUR PARTNER'S FEELINGS

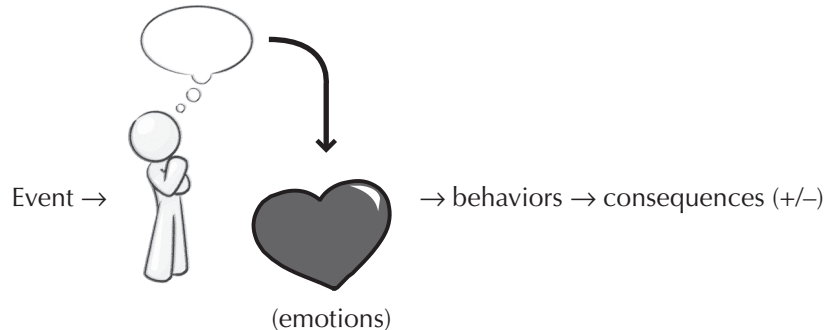
Week of: _____

	<i>Partner</i>	<i>Partner</i>
Example: <i>Tuesday</i>	<i>annoyed</i>	<i>happy</i>
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

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Sharing Thoughts and Feelings to Shrink PTSD

As we discussed in today's session, what we feel and how we act are highly dependent on what we think. **Our perceptions** are very important. This is true for everyone, whether traumatized or not. You have probably had the experience of being in the same situation with other people only to find that they have a completely different story about the situation than you do. This happens because each person *perceives* differently. People organize what they see and hear into their own understanding of the situation.



When an event occurs, there are thoughts or interpretations about that event. The way that you perceive or think about a situation influences feelings and behaviors. In this way, thoughts *lead* to feelings and actions. Sometimes, though, our thoughts are so **automatic** that we don't even realize that a thought came before our feeling or our action. Even though you may not be aware of what you are thinking or saying to yourself, your thoughts and self-talk affect your mood and your behavior. The goal of this therapy is to begin to recognize those automatic thoughts, to share them with your partner, and to notice how they make you feel and act.

Let's take an example. If someone with PTSD does not want to go somewhere (e.g., the movies) because he has the thought, "It's an open, dangerous place," he would likely have the feeling of fear and the urge to avoid. If he does not share this thought with his partner, the partner might have the thought, "We don't go places together because he doesn't care about me or want to spend time together," and feel hurt and angry. The partner may initiate an argument or withdraw. If the couple is able to talk about the thoughts and feelings that they are each having, there is greater understanding (and decreased miscommunication) and greater opportunity to consider shrinking PTSD by approaching the event rather than avoiding. An added benefit is that they will also feel closer as a couple.

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Catch Your Partner's Thoughts and Feelings

Week of: _____

		Partner:			Partner:		
	Event	Thought	Feeling	Event	Thought	Feeling	
Example:	Hear a noise outside	"Someone is trying to break in."	Afraid	Partner brings breakfast in bed.	"My partner cares about me."	Content	
Sunday							
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

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Out-of-Session Assignments

Session 5. Sharing Thoughts and Feelings: Emphasis on Thoughts

1. Continue to watch for, and point out, positive behaviors in each other.
2. Read together *Sharing Thoughts and Feelings to Shrink PTSD (Handout 5.1)*.
3. At least one time per day, catch a thought and feeling that your partner has in reaction to a situation. Record these on the *Catch Your Partner's Thoughts and Feelings (Handout 5.2)*. At least one of the thoughts should be PTSD related. Notice the effects of sharing your thoughts and feelings with each other.
4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Place this form somewhere that is convenient and visible to the two of you.

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K.

We have been working toward identifying the differences between thoughts and feelings and understanding how thoughts influence feelings. We are taking it to the next step to learn a process that you can use together to consider how helpful or unhelpful your ways of thinking are.

U = United and Curious

This process is not designed to point out how the other is “wrong” or to be critical and judgmental of each other. The idea is for each of you to be *curious* with one another and to be a team to determine whether the thoughts have a good basis to them and whether they are helpful.

N = Notice the Way You Are Thinking

Before you can evaluate thoughts and their related feelings, they first have to be noticed. Use your paraphrasing skills to pinpoint thoughts and feelings, making sure that each of you is on the same page about them. This is very important prior to proceeding to the next step. It is often helpful to “boil down” your thoughts to a primary thought or two.

S = (Brain)Storm Alternative Thoughts

In this step you want to be as open-minded as possible about all of the types of thoughts that might be had in reaction to an event by brainstorming. Both of you should contribute as many different perspectives as possible. Feel free to come up with what might seem like the wildest possible thoughts at this step. Now is *not* the time to be critical!

T = Test Them

With a range of thoughts on your joint “table,” put them to the test. What is the evidence for each of them? Which are the most balanced?

U = Use the Most Balanced

Which are the most balanced of the thoughts? Which is the most realistic? Which is the most effective? It will feel awkward at first—like wearing a new pair of shoes. Break it in for at least a trial period. Circle the most balanced one(s) on *The Big Picture (Handout 6.2)*.

C = Changes in Emotion and Behaviors

With that new thought in mind, how would you feel? How do you feel? What would you do differently? What are you doing differently?

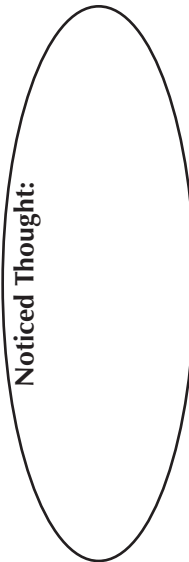
K = Keep Practicing

Changing your mind can sometimes be hard work, especially when you’ve thought strongly one way for a long time. It won’t necessarily be automatic at first, but with practice it will become that way. So keep up that effortful practice! *How can you keep new ways of thinking as “alive” as possible? What can you **do** to test them out?*

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The Big Picture

U =	U nited and curious
N =	N otice your thought
S =	(Brain) S torm alternatives
T =	T est them out
U =	U se the most balanced
C =	C hanged feelings and behaviors
K =	K eep practicing



C: Feelings?

Behaviors?

K:

Catch Your Partner's Thoughts and Feelings

Week of: _____

	Partner: _____			Partner: _____		
	Event	Thought	Feeling	Event	Thought	Feeling
Example:	Hear a noise outside	"Someone is trying to break in."	Afraid	Partner brings breakfast in bed.	"My partner cares about me."	Content
Sunday						
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						

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Out-of-Session Assignments

Session 6. Getting U.N.S.T.U.C.K.

1. Continue to watch for, and point out, positive behaviors in each other.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. Practice the process on thoughts that each of you identified on *Catch Your Partner's Thoughts and Feelings (Handout 6.3)*. You should each work on two thoughts, one individually oriented and one relationship related. At least one of the individually oriented thoughts should be trauma related.
3. Continue to catch each other's thoughts and feelings on a daily basis using *Catch Your Partner's Thoughts and Feelings (Handout 6.3)*. At least one of the thoughts should be trauma related.
4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

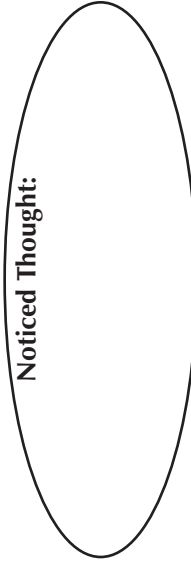
Write about how it went:

Place this form somewhere that is convenient and visible to the two of you.

Next appointment: _____ @ _____

The Big Picture

- U** = United and curious
- N** = Notice your thought
- S** = (Brain)Storm alternatives
- T** = Test them out
- U** = Use the most balanced
- C** = Changed feelings and behaviors
- K** = Keep practicing



C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 7. Problem Solving to Shrink PTSD

1. Continue to watch for, and point out, positive behaviors in each other.
2. Read over *Problem-Solving/Decision-Making Guidelines (Handout 7.1)* together.
3. Practice problem solving/decision making at least **twice** prior to the next session.

What were the two topics?

4. Use the U.N.S.T.U.C.K process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related. At least one of the individually oriented thoughts should be trauma related.
5. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Place this form somewhere that is convenient and visible to the two of you.

Next appointment: _____ @ _____

Stuck Point List

Stuck Point	Balanced Thought
<input type="checkbox"/> Example: <i>I'm never safe when I go outside of my home.</i>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	
<input type="checkbox"/>	

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Barriers to Acceptance

Most people with PTSD have some part of the traumatic event(s) that is hard for them to accept to have happened. One of the ingredients to getting unstuck and recovering from the event is to **accept that the event happened just as it did**. History cannot be rewritten, but your reactions and understanding of that history can change. An important note: Acceptance of the event *does not* mean that what happened is “right,” just, or fair. Rather, the goal is to accept that you cannot change the past and appreciate the full picture outside of your tunnel vision of the event.

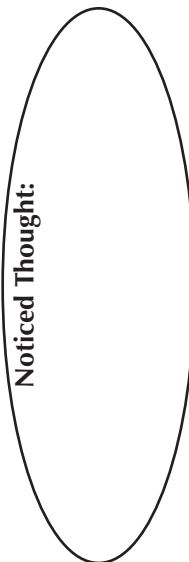
Several types of tunnel vision get in the way of acceptance, including:

- *Just-world thinking*. “Good things happen to good people. Bad things happen to bad people. A bad thing happened. Thus, I or someone else must have done something wrong.”
- *Hindsight bias*. Looking back on a situation, you assume that you have the knowledge *then* that you have *now*. This is also called “Monday morning quarterbacking.” Sometimes people also say, “Hindsight is 20/20,” meaning that you can see with accuracy after the fact things that you could not see at the time.
- *Undoing*. This involves playing out the event with alternative courses of actions that you believe could have prevented it. Example statements are “If I only would have . . . ” or “I should have . . . ” or “I could have . . . ” or “They should have . . . ”
- *Happily-ever-after thinking*. This reflection assumes that a different course of action would have led to a positive outcome.
- *Situational neglect*. A human tendency is to overestimate our own influence on situations, neglecting the powerful situational forces that impact on our and others’ choices and behavior.

Many people with PTSD have trouble accepting events because they want to maintain their belief that they or others have complete control over themselves and situations in the past and into the future. The key to getting unstuck is to stop avoiding the memory of the event and to fully appreciate the **entire** picture or context of the situation.

The Big Picture

U =	U nited and curious
N =	N otice your thought
S =	(Brain) S torm alternatives
T =	T est them out
U =	U se the most balanced
C =	C hanged feelings and behaviors
K =	K eep practicing



C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 8. Getting U.N.S.T.U.C.K. to Promote Acceptance

1. Write any stuck points noticed on the *Stuck Point List (Handout 8.1)*.
2. Together read *Barriers to Acceptance (Handout 8.2)*.
3. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related.
4. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>

5. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Blame

One of the barriers to successful recovery from PTSD can be misplaced or extreme blame. The key to getting unstuck is to stop avoiding the memory of the event and to appreciate fully the **entire** picture or context of the situation. There may or may not be someone to *blame* for a bad outcome. There is a tendency to want to blame oneself or others for bad things happening in an effort to regain a sense of control over the situation.

HOW DO WE ASSESS BLAME FOR AN EVENT?

There are two factors to consider when determining whether there is blame for an event and if so, how much.

- *Intentions/state of mind.* What were your or others' intentions at the time of the event? In other words, did you *mean* for the bad outcome to occur? Did others intend for the bad outcome to occur?
- *Situation at the time.* What was going on at the time that might have impacted your or others' behavior?

There are several types of tunnel vision that can get one stuck regarding blame, including:

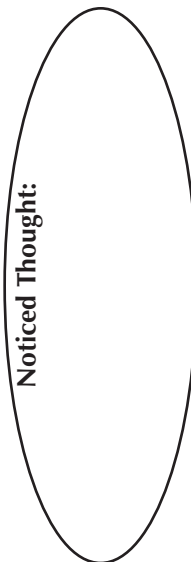
- *Just-world thinking.* "Good things happen to good people. Bad things happen to bad people." If a bad thing happened to you, you might assume that you did something bad or are to blame for the traumatic event happening to you. Also, if a bad thing happened and you were involved, you might assume that you or someone else did a bad thing or are bad people.
- *Hindsight bias.* "I or someone else should have known." You might also think that you or someone else should have done something different and presume that this alternative action would have led to a positive versus negative outcome (i.e., *fairytale thinking*). Sometimes the best laid plans at the time don't lead to the best outcomes.
- *Situational neglect.* If you did something that you consider against your moral code or contrary to how you want to see yourself or others do see you, remember that we have a tendency to overlook the powerful situational factors that influence our choices and our behaviors. Good people do bad things, too, in certain circumstances.

It is incredibly important to put things back in perspective, given a view of the big picture when assessing blame of yourself and others. Once the entire picture regarding blame is developed, then you can work on forgiving yourself or others **if that is appropriate**. Your first job as a couple is to figure out if there is blame to be placed and if so, whom and how much that person is to be blamed.

Forgiving yourself or others is appropriate to bring closure to traumatic events. However, if you attempt to forgive before you have done a good job of figuring out if there is blame deserving forgiveness, then forgiveness is unlikely to work.

The Big Picture

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N =	N otice your thought
S =	(Brain) S torm alternatives
T =	T est them out
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K =	K eep practicing



C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 9. Getting U.N.S.T.U.C.K. Regarding Blame

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Blame (Handout 9.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, that can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related. Try on the new thoughts and notice what emotions and behaviors follow from these thoughts. Use your problem-solving/decision-making skills to figure out how you as a couple will use these new behaviors.
3. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Trust

Beliefs Related to Self. The belief that one can rely upon one's own perceptions or judgments. This belief is an important part of our self-esteem and serves to protect us from harm.

The traumatic event(s) may have made you question your ability to trust your perceptions of situations or judgments about people and circumstances. You may have concluded from the event that you can't trust yourself to make decisions or act positively in situations.

- Do I believe that I generally have good judgment about people and situations?
- Can I trust how I will behave in different situations?
- Do I "read" situations well?

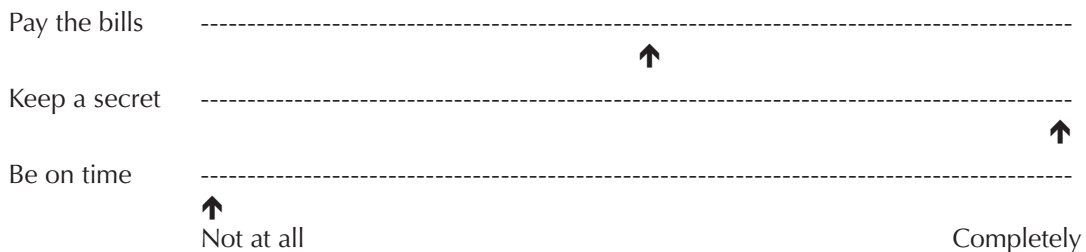
Beliefs Related to Partner and Others. The belief that the promises and actions of your partner and others can be relied upon.

Traumatic events often include other people who you believe caused you harm. Thus, you may have come to believe that others cannot be trusted to have your best interests at heart. If people around you after the event were blaming, distant, or unsupportive, your belief in their trustworthiness may also have been challenged.

- Do I think that anyone can be truly trusted?
- Do I assume that others will inevitably hurt or betray me?
- Can I trust my partner to be there for me?

There are many different types of trust—for example, trusting your partner to be on time, trusting yourself to choose good friends, trusting someone to pay you back, trusting someone to keep a secret, trusting you or your partner's money management skills.

Trust is on a continuum. When people have been traumatized, they often think of trust as an "on/off" switch: "I trust myself or I don't. I trust my partner completely or not at all." Healthy trust is on a continuum (or has shades of gray) and is dependent on the category of trust above—for example, trust in my partner to:



RESOLUTION: BALANCE

When evaluating trust in yourself, your partner, or others, it is helpful to make no judgments until you have good information—not innocent or guilty until proven so. On the basis of this information, you can change your levels of trust.

(cont.)

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Getting U.N.S.T.U.C.K. Regarding Trust *(page 2 of 2)*

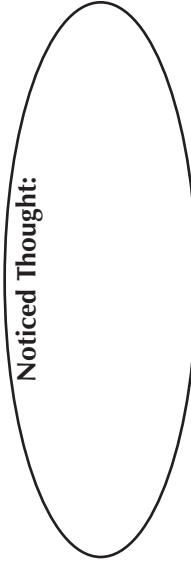
Also, you, your partner, and others will make mistakes that can affect your trust. It is important to first test out whether a mistake has been made by seeking information. If a mistake has been made, it is **much** more important what you and others do with those mistakes. You will be tempted to go to extremes: "I can't trust myself" or "I can't trust him/her."

Examples of more balanced, "big-picture" thinking are:

- "I can trust my judgments in many, but not all, areas."
- "I can trust myself to make good decisions when it comes to _____, but might seek counsel when it comes to _____."
- "I trust that my partner will be dependable when it comes to all things except time management."
- "I can trust Tom to lend me money, but not to keep a secret from our friends."

The Big Picture

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T =	T est them out
U =	U se the most balanced
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C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 10. Getting U.N.S.T.U.C.K. Regarding Trust

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Trust (Handout 10.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related. Try on the new thoughts and notice what emotions and behaviors follow from these thoughts. Use your problem-solving/decision-making skills to figure out how you as a couple will use these new behaviors.
3. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Control

Beliefs Related to Self. The belief that you have influence over your own decisions and behaviors.

Individuals who have been traumatized experienced a lack of control in the situation, which can result in beliefs that they must retain control of themselves at all times in order to protect against future bad outcomes. Alternatively, they may believe that they have no control over the future.

- Do you believe that you need to have control at all times?
- What would it mean if you were not in complete control in a situation?
- Do you believe that you have no control over events that happen to you?

Beliefs Related to Partner and Others. The belief that you can control future outcomes in interpersonal relationships.

Individuals who have been traumatized often had others exert negative control over them during or after the event. As a result, they can believe that sharing control with another person will result in being a victim again, that other people are seeking to control them in negative ways, or that they will continue to give over their control to other people because they expect that they can't share control.

- Do you believe that you must have control over others?
- Is it difficult to share control with others?
- Do you give up control to other people because you don't think it's possible to share control with others?

There are many different types of things that can be controlled—for example, what one wears, what and how much one eats and drinks, child outcomes, partner behavior.

Control is on a continuum. When people have been traumatized, they can get stuck by going to extremes in their thinking about control. Those extremes are to be overcontrolling or undercontrolling of themselves or others. Just like trust, control exists on a continuum and is dependent on the type of control.

RESOLUTION: BALANCE

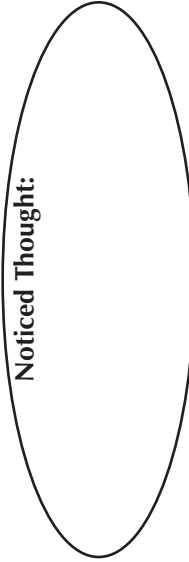
Examples of more balanced, “big-picture” thinking are:

- “I have control over many aspects of my life, but not all aspects.”
- “Having control does not mean that a bad thing won't happen.”
- “I have *influence* with my partner, but I don't want to control her choices.”
- “Sharing control is part of a healthy relationship.”

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The Big Picture

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T =	T est them out
U =	U se the most balanced
C =	C hanged feelings and behaviors
K =	K eep practicing



C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 11. Getting U.N.S.T.U.C.K. Regarding Control

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Control (Handout 11.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related.
3. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>

4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Emotional Closeness

Beliefs Related to Self. These are beliefs about the value of your own emotions and, more specifically, your beliefs about how comfortable you are with being independent and reliant on yourself to experience, manage, and accept your emotions.

Traumatic events are naturally associated with strong emotions that may have made you feel out of control of yourself and your emotions. This may have left you feeling that it is unsafe or out of control to feel your feelings. You may have also concluded that your feelings are bad and unsafe and that you are not able to accept or cope with them.

- Do I believe that emotions are bad things to be stamped out, controlled, or at least not shown?
- Do I believe that I can soothe and calm myself when I am upset?
- How confident am I that I can handle difficult situations and the emotions that go with those situations?
- How confident am I that I can be emotionally hurt and recover from that again?

Beliefs Related to Partner and Others. The desire to connect and be close to others is one of our most basic human needs. Emotional closeness with others involves the feeling of being close to another person through sharing of your thoughts and, very importantly, your feelings.

Traumatic experiences can confuse the desire to be close with others, including your closest loved ones, because most traumas involve other humans. The hurt and betrayal involved in trauma and/or the responses of other people after trauma can spread to your partner and other people in the world. You may have concluded that being close to someone will inevitably involve pain, betrayal, and more trauma.

- Is sharing my feelings with my partner a good thing?
- Will sharing my thoughts and feelings inevitably lead to hurt?

RESOLUTION: BALANCED THINKING

Examples of more balanced, “big-picture” thinking are:

- “Experiencing and showing my feelings is a sign of strength, not weakness.”
- “Feelings cannot go on forever, unless I keep feeding them with my thoughts.”
- “Feelings give me important information about myself and others.”
- “When I shared my feelings before, I felt closer to my partner.”
- “Not every single person in my life **has, or will**, betray me. If I am betrayed in some way, I can evaluate if and how I will be connected with that person into the future.”

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The Big Picture

- U** = United and curious
- N** = Notice your thought
- S** = (Brain)Storm alternatives
- T** = Test them out
- U** = Use the most balanced
- C** = Changed feelings and behaviors
- K** = Keep practicing



C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 12. Getting U.N.S.T.U.C.K. Regarding Emotional Closeness

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Emotional Closeness (Handout 12.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related.
3. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>

4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Physical Closeness

Beliefs Related to Self. Beliefs about yourself as a sensual/sexual person reflect the extent to which you feel comfortable in your own skin and feel sexually attractive and experienced. They also relate to how acceptable you find it to derive pleasure through physical touch.

Traumatic events are naturally associated with strong emotions that may have made you feel out of control of yourself and your emotions. They may have also left you feeling unsafe in your body. As a result, you may have concluded that being physically vulnerable puts you at risk of being hurt again.

- Do I believe that it is acceptable for me to relate to others through physical touch?
- Do I believe that I'm damaged and that no one would want to be physically close to me?
- How confident am I that I can be in a situation that involves physical closeness and feel safe and respected?
- Will having physical closeness *inevitably* lead to hurt?

Beliefs Related to Partner and Others. The desire to connect and be close to others is one of our most basic human needs. Physical closeness involves the feeling of being close to another person through touch (e.g., physical affection and/or sexual touching).

Traumatic experiences can confuse the desire to be physically intimate with others, including your closest loved ones. You may have concluded that others' intentions are negative (e.g., the only reason your partner wants physical contact with you is to gratify him- or herself sexually). You may feel uncomfortable being physically vulnerable and may have concluded that the way to stay safe and keep yourself from being hurt again is to avoid physical contact. Alternatively, you may believe that sex is the only way you can relate to another person.

- Is having physical closeness with my partner a good thing?
- Is sex the only way I am able to relate to others?

RESOLUTION: BALANCED THINKING

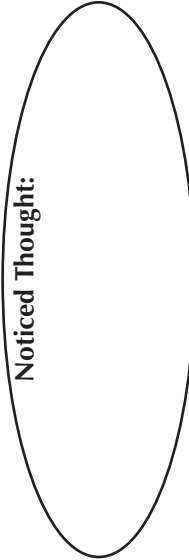
Examples of more balanced, "big-picture" thinking are:

- "Learning about what feels safe and pleasurable to me helps me feel more comfortable in my own body."
- "Sensuality and sexuality are a natural part of how we, as human beings, express ourselves."
- "Physical closeness with a safe, romantic partner is a sign of our closeness."
- "When I had physical contact before, I felt closer to my partner."
- "Sex is one of many ways to relate to another person through touch."

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The Big Picture

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C: Feelings?

Behaviors?

K:

Out-of-Session Assignments

Session 13. Getting U.N.S.T.U.C.K. Regarding Physical Closeness

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Physical Closeness (Handout 13.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related.
3. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

4. Shrinking PTSD through Approach:

(people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

Getting U.N.S.T.U.C.K. Regarding Posttraumatic Growth

Beliefs Related to Self. Although you did not wish for the traumatic event(s) to happen, some positives can come out of having experienced the event(s) or having PTSD in your life and your relationship. In essence, life has given you lemons, but you have made lemonade.

Thus far, we have spent a great deal of time looking at how your thoughts have kept the PTSD going and talking about how changing your thoughts can change your emotions and behaviors. However, you may also have some concerns about what it means about you if you see positives associated with your traumatic experience(s).

- If I see positives from the event, does it mean that what I went through was not traumatic?
- If I am better, does it mean that what I went through wasn't that bad?
- If it's possible to recover from PTSD, why did I suffer for so long?

Beliefs Related to Partner and Others.

Although traumatic experiences and PTSD symptoms can negatively impact relationships, addressing them as a couple can actually strengthen relationships. An intimate relationship can be an important part of the healing process.

During therapy, we've spent time looking at how changing your thoughts about other people, including your partner, has changed the way you feel about them and how you behave toward them. However, you may still have concerns about what it means about your relationships with other people if you think that you have grown or benefited in some way as a result of the trauma(s).

- If I see any good in the event, does it take the perpetrator off the hook?
- If my partner sees that I have, in some way, benefited from the trauma, will he or she think that what I went through wasn't that bad?

RESOLUTION: BALANCED THINKING

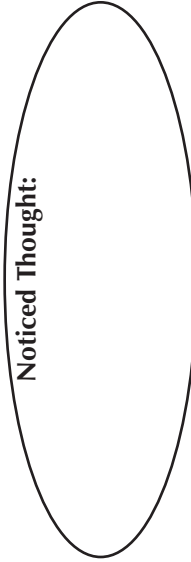
Examples of more balanced, "big-picture" thinking are:

- "I realize how strong I am to have survived [the event]."
- "Talking about my trauma and PTSD has made me more open to exploring other things."
- "I now know that I can handle really bad things happening to me."
- "As a result of having PTSD and then treatment, my partner and I understand each other better."
- "Although something bad happened, my partner and I can still have the richest life possible going forward."
- "Given what was known at the time, doctors and therapists did the best they could."

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The Big Picture

U =	U nited and curious
N =	N otice your thought
S =	(Brain) S torm alternatives
T =	T est them out
U =	U se the most balanced
C =	C hanged feelings and behaviors
K =	K eep practicing



C: Feelings?

Behaviors?

K:

Trauma Impact Questions-II (*page 2 of 2*)

3. What do I believe *now* in the following areas, as each relates to *me, my partner, and others*?

Trust:

Control:

Emotional Closeness:

Physical Closeness:

What Have We Learned?

What specific ideas or skills have we learned through therapy that we want to remember and keep doing?

When we recognize that we are getting away from practicing these skills, we will:

Out-of-Session Assignments

Session 14. Getting U.N.S.T.U.C.K. Regarding Posttraumatic Growth

1. Together, read *Getting U.N.S.T.U.C.K. Regarding Posttraumatic Growth (Handout 14.1)*.
2. Use the U.N.S.T.U.C.K. process together at least four times prior to the next session. You should each work on two thoughts, one individually oriented and one relationship related, which can be drawn from the *Stuck Point List (Handout 8.1)*. At least one of the individually oriented thoughts should be trauma related.
3. Each of you will complete the *TIQ-II (Handout 14.3)*.
4. Together, complete *What Have We Learned? (Handout 14.4)*.
5. Spend 5 minutes each day using your best communication skills with one another. Place a checkmark below for each day you practiced.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

6. Shrinking PTSD through Approach:

_____ (people, place, situation, feeling)

Write about how it went:

Next appointment: _____ @ _____

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72 Spring Street
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