

Complex PTSD Emotion and Memory Group

Number of Sessions: 12

Number of Clients: 6-8

Overview

Each week consists of a 2 hour group session, with a 20 minute break. There is a different topic considered each week, along with different skills. In keeping with theories of learning, the main focus should be on developing self-efficacy in using the skills, as well as providing group members with information and explanations about problems and symptoms. Experience of running the groups has shown that key skills and concepts need to be demonstrated and practiced in the group on a weekly basis for them to be used effectively by clients. There also has to be strong emphasis on the importance of practice, encouragement to use the key techniques and frequent discussions identifying the ways in which participants have found the techniques useful as well as difficulties that prevent the use of particular techniques.

Assessment Measures: *At assessment and at the end of the group*

Screening & PTSD Measures

- a) Clinician- Administered PTSD Scale (CAPS)
- b) SCID-I for Mood Disorders; Anxiety and Other Disorders (excl. PTSD)
- c) Posttraumatic Cognitions Inventory (PCTI; Foa et al., 1999)
- d) Beck Depression Inventory (BDI-I; Beck, Ward, Mendelson, Mock, & Erbaugh, 1961)
- e) The Global Assessment of Functioning (GAF)

Complex Trauma & Emotion Regulation Measures

- f) Complex Trauma Symptoms Questionnaire (CTSQ; Cloitre et al.)
- g) Difficulties in Emotion Regulation Scale (Gratz & Roemer, 2004)

Memory Measures

- h) Autobiographical Memory Questionnaire (Rubin et al., 2003)
- i) Trauma Memory Modality Questionnaire (TMMQ; Meiser-Stedman, Smith, Yule & Dalgleish, 2003)

Symptom Monitoring: *Throughout the group sessions*

- Flashback/intrusion diary (frequency,nowness & distress ratings)
- Adherence Monitoring (Session adherence & Homework adherence)

Weekly Session Plan

Session 1: Introduction to the Group

Session 2: Emotional Awareness

Session 3: Psychoeducation - PTSD and Memory

Session 4: ‘Rape’ – Meaning, Myths & Other People’s Reactions

Session 5: Emotion Regulation

Session 6: Emotionally Engaged Living

Session 7: Interpersonal Emotion Regulation

Session 8: Flashbacks – Identifying Triggers and Re-Conditioning

Session 9: Imagery & Nightmare Rescripting

Session 10: Narrative Restructuring & Nightmare Rescripting

Session 11: Method of Loci

Session 12: Summary & Review

Session 1. Introduction to the Group

- Introductions
 - Ask each group member to say their name and one thing about themselves
 - Icebreaker exercise
- Group Outline
 - Housekeeping
 - An outline of what the group will involve: Phase 1 – Psychoeducation, Emotion Regulation & Interpersonal Difficulties; Phase 2 – Memory Control
 - Expectations of group members (attendance, participation in activities where possible, notes taken in sessions to read at home, homework to complete, symptoms to monitor throughout)
 - Action/contingency planning in case of difficulties (e.g. making contact outside the group, speaking to facilitators at the end)
- Group Rules
 - Group members asked to come up with rules for the group, which will be written up (contact when not attending, confidentiality, anonymity, respect for each other's views and opinions, listening when others are speaking, emotional expression, leaving the room etc.)
- Overview of the Weekly Session Plan and the Core Focus of the Group
 - Hand out a weekly session plan and provide an overview of what each of the sessions will involve. Ensure that group members understand what is to be included in the group programme and answer any questions that arise
 - Go over/check dates (accounting for bank holidays, annual leave etc.)
- Identify Goals for the End of the Group Sessions
 - Ask each of the group members to identify hopes/expectations/goals for the end of the group and write these up
 - Discuss what is reasonable to expect given the length of the programme and limitations of the group format
 - Emphasise the importance of adhering to therapeutic techniques/suggestions and the collaborative approach for symptomatic improvement

Session 1 Handout: Weekly Session Plan

Session Number	Session Topic	Date
Session 1	Introduction to the Group	
Session 2	Emotional Awareness	
Session 3	Psychoeducation - PTSD and Memory	
Session 4	‘Rape’ – Meaning, Myths & Other People’s Reactions	
Session 5	Emotion Regulation	
Session 6	Emotionally Engaged Living	
Session 7	Interpersonal Emotion Regulation	
Session 8	Flashbacks – Identifying Triggers and Re-Conditioning	
Session 9	Imagery & Nightmare Rescripting	
Session 10	Narrative Restructuring & Nightmare Rescripting	
Session 11	Method of Loci	
Session 12	Summary & Review	

My hopes/expectations/goals for the end of the group sessions are:

Session 2: Emotional Awareness

- Introduce Concept of Emotion Regulation
 - Ability to identify, label, modulate and effectively express feelings
 - Learned/developed through monitoring of feelings & practicing the specific skills of identifying and labelling feelings
 - Discuss difficulties in emotion regulation: how were feelings managed in group members' families? Family script of emotional inhibition?
 - If possible, put together a collective formulation for the group
 - Why it's important to understand and manage emotions following traumatic experiences
- Awareness and Monitoring of Feelings
 - How has the rape influenced feelings?
 - Brainstorming session (flipchart) exploring more specifically the emotions that group members have experienced
 - Grouping these emotions according to emotions felt *at the time* of the rape/sexual assault and the emotions that have been felt/experienced since then
 - How have past experiences of how emotions were/are managed in group members' families impacted on how they feel about the rape?
 - Provide rationale for self-monitoring and understanding feelings: adaptive living (Psychoeducation re the 'function' of emotions)
- Using Elements of Emotion to Name Feelings
 - Generate a list of physiological changes & link them to thoughts and feelings
 - Causal relationship between thoughts, feelings (sensations & physical reactions) and behaviours
 - Discrimination among different kinds of feelings
 - Use example: The Body's Response to Fear
 - Explore group members' understanding of what happens in their bodies when they are afraid/fearful. Discuss non-traumatic examples (e.g. fear of heights/spiders)
 - Why do our bodies respond in this way when we are faced with something that we find fearful?
 - Explore group members' understanding of the *Fight, Flight, Freeze* response. Why have we evolved to respond in this way? How is it adaptive for survival (example of animals in the wild, rabbit in headlights)?
 - What might have happened if they hadn't responded in the way they did (usually by freezing)? Could it have resulted in a worse outcome? Why might the way they *did* respond be considered to be more adaptive?
 - Were they *physically able* to respond in a different way?
- Self-monitoring of Feelings Form
 - Practice in session together
 - Emphasise the importance of regular practice
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Provide group members with the Self-Monitoring of Feelings Form (Handout 11.2) and a copy of the other forms (Handouts 11.1, 11.3 and 11.4) for the group members' review
 - If they feel able to, ask group members to put together a more personal formulation for homework

Session 2 Handout: 11.1

HANDOUT 11.1

The Impact of Childhood Abuse on Emotion Regulation

For many people, abuse experiences have a powerful impact on emotional functioning in adulthood. Good parenting provides children with emotion regulation skills, which include the ability to identify feelings, understand their sources, and manage them for optimal functioning. Sexual or physical abuse elicits a range of powerful and confusing feelings. Often childhood abuse survivors have been raised in a family context where caregivers—whether or not they are the abusers—offer poor soothing during times of distress and poor guidance in modulating feelings. Many abuse survivors feel overwhelmed by their emotions or, in contrast, feel numb and unable to experience many or all emotions.

TYPES OF EMOTION REGULATION DIFFICULTIES

Difficulties in emotion regulation vary by person and sometimes by situation. Some people have trouble labeling and identifying their feelings. They may feel either “bad” or “okay,” and have little sense of differences between their emotions (e.g., anxiety vs. sadness). Other people lack an understanding of what triggers their feelings. It may seem that their emotions randomly come “out of the blue” and make no sense. Many people can learn to recognize a “triggering situation,” but will have more difficulty knowing what to do with the intense feelings that emerge. Such feelings may be experienced as overwhelming or even dangerous, and people often feel ill equipped to handle them.

THE ROLES OF FEELINGS

Learning how to modulate and attend to feelings is a critical skill, because feelings once managed, serve important roles in effective living. One role of emotions is to serve as guides for action. For example, a feeling of fear should guide us to leave an unsafe situation and take steps to ensure safety. Anxiety can be adaptive, but when chronic and excessive, it floods the ability to differentiate feeling states. It causes people to overreact to situations, or to underreact because they are trying so hard not to overreact.

Feelings also contribute to effectively communicating how one feels and what one needs from others. Some people who have PTSD or have experienced sustained childhood trauma are chronically anxious, angry, or sad, or are so numbed that they cannot use this kind of information. By working on attending to your feelings and modulating them, you will be able to make better use of information from your feelings and to express them more effectively.

Lastly, feelings can be used to inform you about your preferences (likes and dislikes) and to help guide you in the selection of valued life goals. Awareness of feelings includes awareness of positive feelings and, in combination with emotion modulation skills, can enhance your experience of life, your creativity, and your appreciation of yourself.

HANDOUT 11.1 *(page 2 of 2)*

SELF-MONITORING OF FEELINGS

One way to begin learning how to identify feeling states and their triggers is to monitor your feelings in different situations. Using the Self-Monitoring of Feelings Form, you will practice labeling your feelings and identifying the situations and thoughts that trigger those feelings. With your therapist, you will review your completed copies of this form to increase your skills in identifying feelings and their triggers and to build your awareness of the patterns in your feelings. The completed copies of the form will also serve as important data for developing new coping strategies.

Session 2 Handout: 11.2

HANDOUT 11.2

Self-Monitoring of Feelings Form

Feeling	Intensity (0–10)	Trigger	Thoughts	Response/coping strategy

Session 2 Handout: 11.3

HANDOUT 11.3

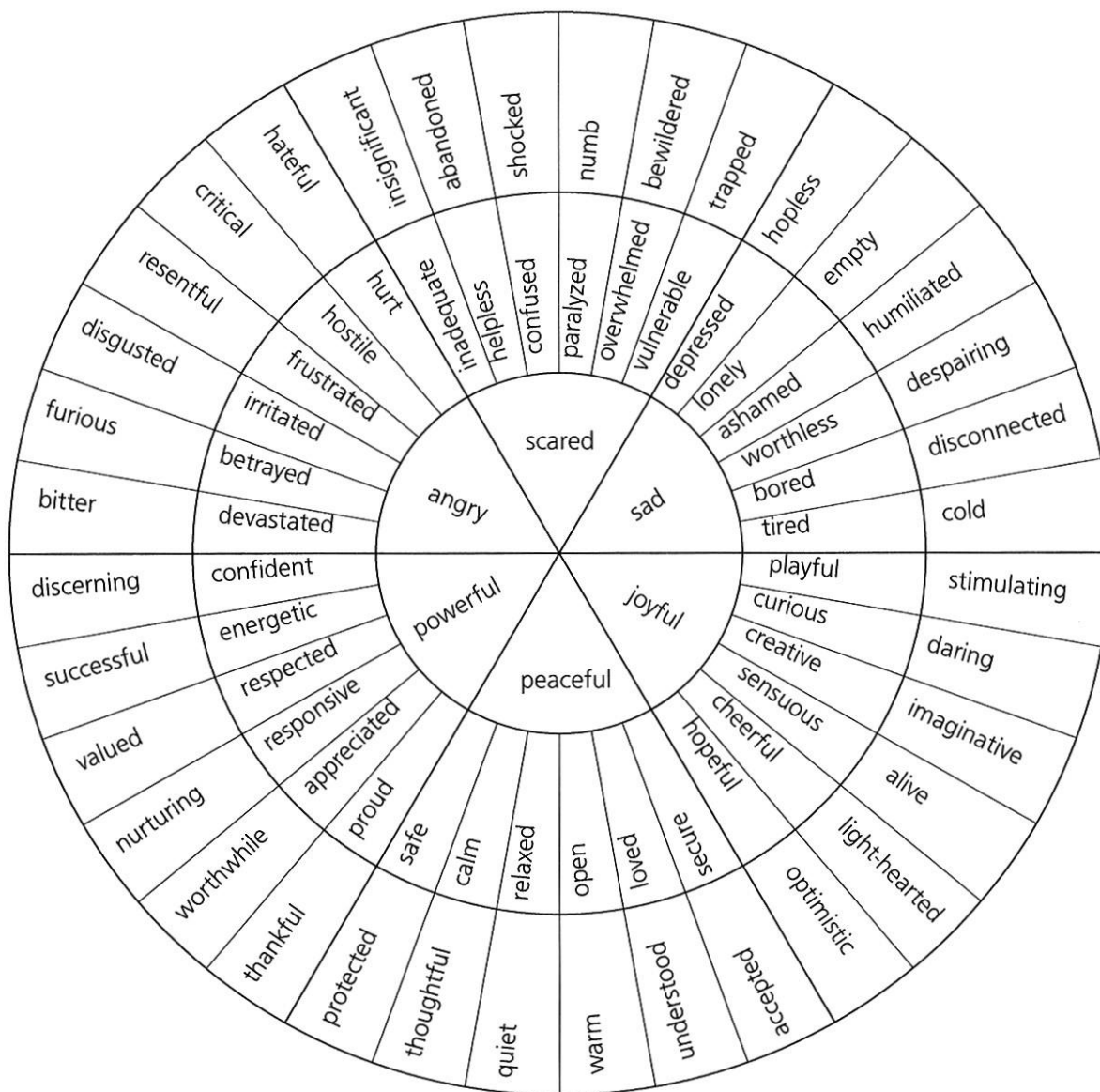
List of Words You Can Use to Describe a Feeling

Affectionate	Glad	Relaxed
Afraid	Gloomy	Relieved
Amused	Grateful	Resentful
Angry	Great	Resigned
Annoyed	Guilty	Sad
Anxious	Happy	Safe
Apathetic	Hateful	Satisfied
Apprehensive	Helpless	Secure
Ashamed	Hopeless	Sexy
Bitter	Horrified	Shy
Bored	Hostile	Silly
Calm	Impatient	Strong
Capable	Inadequate	Stubborn
Cheerful	Inhibited	Stuck
Comfortable	Irritated	Supportive
Competent	Isolated	Sympathetic
Concerned	Jealous	Tearful
Confident	Joyful	Tender
Confused	Lonely	Terrified
Contemptuous	Loved	Threatened
Controlled	Loving	Thrilled
Curious	Loyal	Touchy
Defeated	Manipulated	Trapped
Dejected	Manipulative	Troubled
Delighted	Melancholy	Unappreciated
Depressed	Miserable	Uncertain
Desirable	Misunderstood	Understood
Despairing	Muddled	Uneasy
Desperate	Needy	Unfulfilled
Determine	Nervous	Unimportant
Devastated	Numb	Unloved
Disappointed	Out of control	Upset
Discouraged	Outraged	Uptight
Disgusted	Overwhelmed	Used
Disillusioned	Panicky	Useless
Distrustful	Passionate	Victimized
Embarrassed	Peaceful	Violated
Enraged	Pessimistic	Vulnerable
Excited	Pleased	Withdrawn
Frantic	Powerful	Wonderful
Frightened	Prejudiced	Worn out
Frustrated	Pressured	Worried
Fulfilled	Proud	Worthwhile
Furious	Provoked	Wronged
Generous	Put down	Yearning

Session 2 Handout: 11.4

HANDOUT 11.4

Feelings Wheel



Session 2 Handout: Why do we get anxious?

Why do we get anxious?

Anxiety is our natural reaction to events that make us feel in danger or unhappy about something we have done. We can feel in danger because of:

- Something happening in the outside world that puts us in danger
- Thinking about something where we think we have done wrong
- Remembering something frightening from the past.

Our mind responds to frightening things happening outside of us, or frightening memories in the same way.

What happens when we get anxious?

When we get anxious many things happen in our bodies (see other handout). These things happening (pain, being unable to breathe) can make us feel even more anxious and scared, as we think there is something wrong with us. This can then make us feel more anxious.

ONCE WE FEEL SCARED OR ANXIOUS IT CAN TAKE OUR BODIES A LONG TIME BEFORE THE FEEL OF ANXIETY GOES.

What to do to feel less anxious?

Breathing – sitting and breathing for a few minutes can help

Listening to the relaxation CD – Practising listening to the relaxation CD can help to understand when we feel anxious and how to recognise the signs.

Talking to someone you trust – this can help make us feel better as we can feel safer and maybe forget for a little bit the thing we are worrying about.

Coping statements – writing some statements on cards and keeping them with you can help:

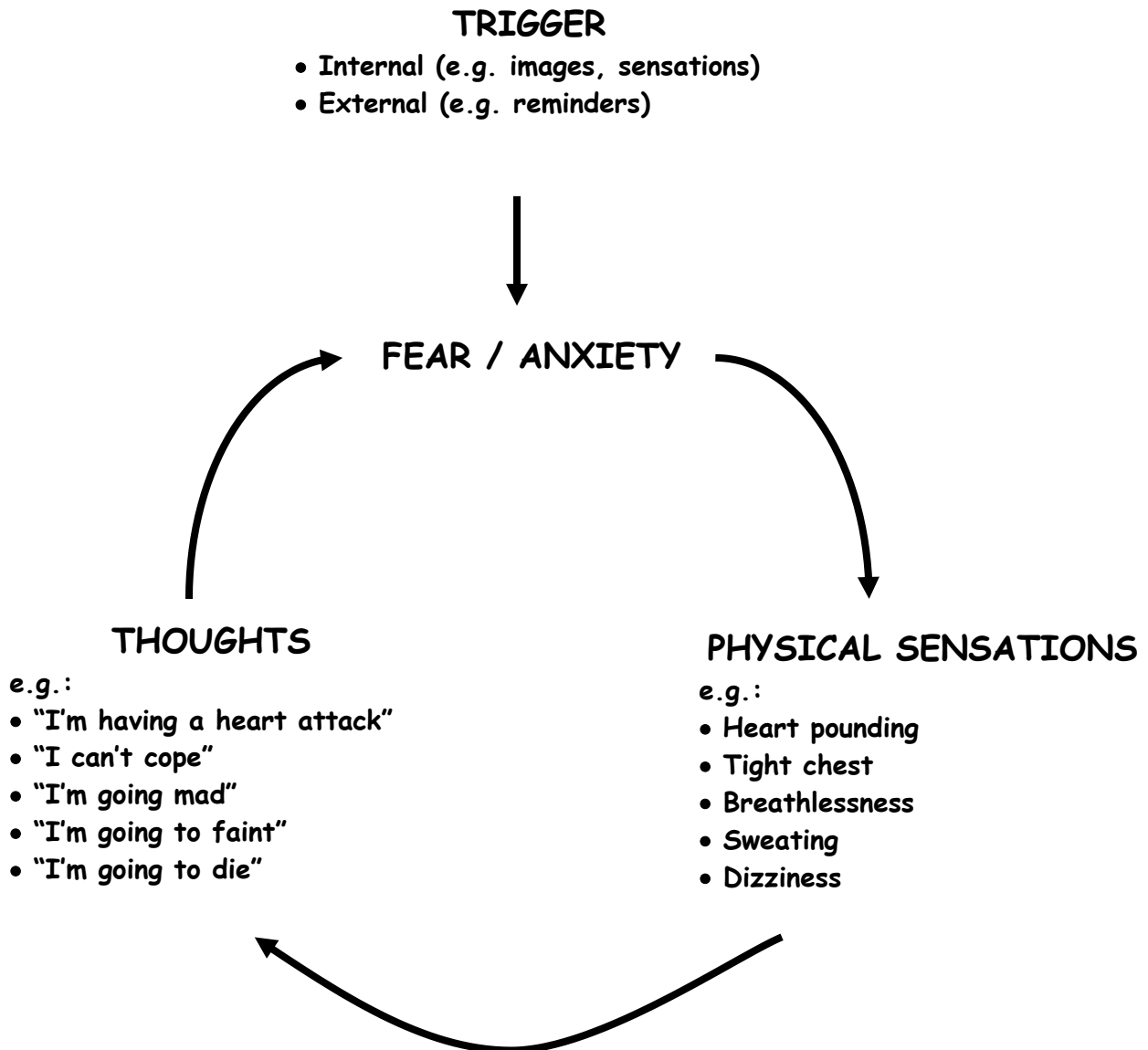
- I am feeling scared, but I know this will pass
- Worrying will not help the situation, it will only make me feel worse.
- I am feeling scared and anxious and need to take some time to do something nice for me.

Making a worry plan - Worrying does not always help situations, making an action plan can help a bit more.

- Write down what you are worrying about: -
- Write down a plan of what you can do to help with the situation. (E.g. get advice, talk to someone about it)
- If there is nothing else you can do to help the situation, ask yourself if worrying will really change the situation and write down something else you can do instead.

Session 2 Handout: Cycle of Anxiety

ANXIETY CYCLE



Session 2 Handout: The Body's Reaction to Stress

THE BODY'S REACTION TO STRESS

BIOLOGICAL REACTION

The brain sends a biochemical message to the pituitary gland, which releases a hormone which triggers the adrenal gland to release adrenalin. Pupils dilate.

Mouth becomes dry.

Back and shoulder muscles tense – large skeletal Muscles contract ready for action.

Breathing becomes faster and shallower supplying more oxygen to the muscles.

Heart pumps faster and blood pressure rises

Liver releases stored sugar to provide fuel for quick energy.
Adrenalin and noradrenalin are released.

Digestion slows down or ceases as blood is diverted away from the stomach.

The body cools itself by perspiring: blood vessels and capillaries move closer to the skin surface.
Muscles at opening of anus and bladder are relaxed.

SYMPTOMS YOU FEEL

Headache, dizziness, light-headed.

Blurred vision.

Difficulty swallowing, dry throat

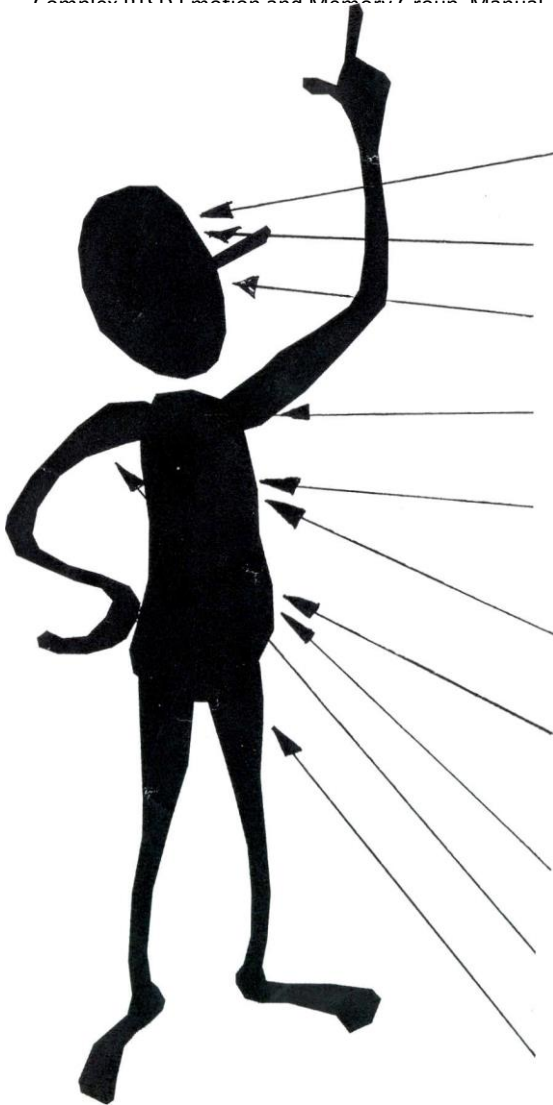
Aching neck and backache.

Chest pains, tingling,
Palpitations, asthma, trouble catching breath
Pounding heart

Indigestion.

Nausea, indigestion, butterflies in stomach

Excess sweating, blushing, feel hot.
Frequent urination, diarrhoea



Session 3. Psychoeducation - PTSD and Memory

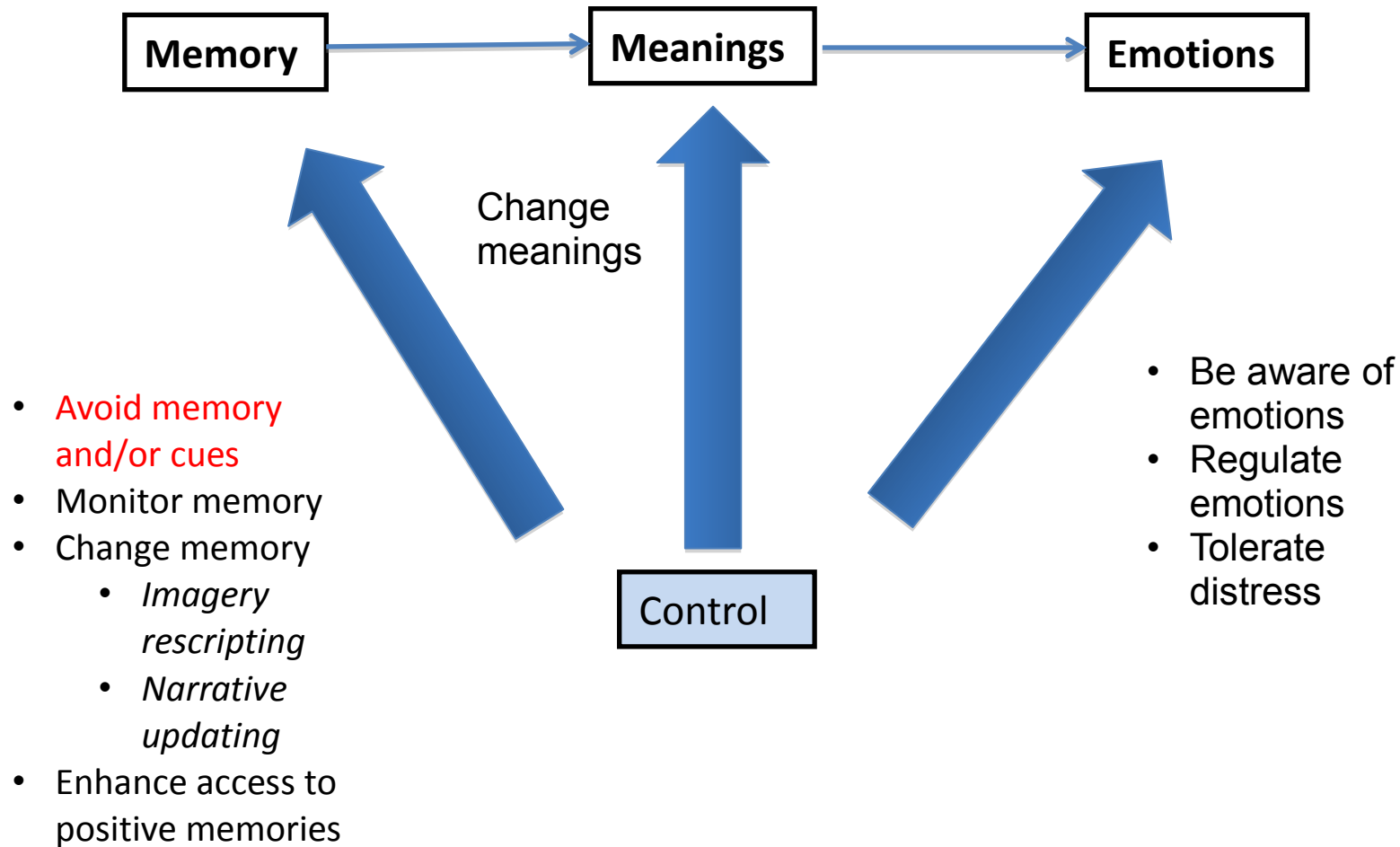
- Review Homework

- Check progress with the Self-Monitoring of Feelings Form (Handout 11.2) and personal formulation exercise. Did anything new come up? Any surprises?
- Check understanding of Handouts 11.1, 11.3 and 11.4. Any questions?

Reiterate the phased approach for the group: Phase one to explore and better manage post-traumatic emotions and Phase two to focus more specifically on traumatic memories

- Summary of skills and techniques learnt in first phase of group and how these can be used in the second phase (awareness; regulation; tolerance; meaning → emotion)
 - Re-introduce rationale for memory control phase of the group sessions
 - Link to model for 'Memories and their regulation' (memory → meaning → emotion) – on Flipchart & Handout
- Psychoeducation: PTSD and Memory
 - What kinds of symptoms do people experience following traumatic events? – Brainstorm on flip-chart and group into three categories (reliving, avoidance & physiological)
 - Introduce the 'Brain' (dual processing) model of the development of PTSD and use to illustrate:
 - *Verbal vs. Non-verbal memories*
 - *Voluntary vs. Involuntary memories: why trauma memories intrude and dominate (Memory)*
 - *The centrality of trauma memories*
 - *How memory and emotion are intimately linked, through meaning*
 - *Maladaptive Appraisals knotted in the trauma narratives (Meaning)*
 - *Avoidance and Suppression; Suppression Exercise (Regulation)*
 - Introduce Memory Control Techniques for better management of memories:
 - Recap session plan for second phase
 - Monitoring and increasing awareness of memories – e.g. notebooks, diaries (Awareness)
 - Processing memories – e.g. writing a narrative, sharing accounts (Regulation; Tolerance)
 - Updating memories and appraisals – e.g. challenging & rescripting, changing perspective, imagery (Meaning)
 - Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to complete the 'Motivation for confronting memories of the trauma' handout
 - Ask group members to complete the 'Monitoring Intrusive Memories Diary' & go through example

Memories and their regulation



Session 3 Handout: Post-Traumatic Stress Disorder (PTSD)

POST-TRAUMATIC STRESS DISORDER

What is PTSD?

PTSD is the name we use to describe the problems people experience after a traumatic event. The problems people may report are grouped under three types of symptoms.

1. Re-experiencing symptoms – this is where people remember what happened during the trauma

- Intrusive thoughts/reminders of the traumatic event
- Nightmares about the event
- Flashbacks – images, sounds, smells, sensations
- Very upset/emotional when reminded of event
- Body alert and anxious at reminders of the event

2. Avoidance symptoms – this is where people try to avoid remembering what happened

- Avoiding talking/thinking about the incident
- Avoiding activities/places/people who remind you of the incident
- Being unable to remember important parts of the event
- Loss of interest/pleasure in previously enjoyed activities
- Feeling numb
- Feeling distant or cut off from people around you
- Having a marked sense that your future will somehow be cut short

3. Symptoms of increased physiological arousal – This is the increased level of anxiety or feeling scared that people might feel.

- Difficulty sleeping
- Feeling angry and/or irritable
- Difficulty concentrating
- Feeling in danger/unsafe
- Being jumpy/easily startled in response to loud noises

Why do people get PTSD?

These experiences are all NORMAL REACTIONS TO ABNORMAL EVENTS. Sometimes people feel like they might be going mad, but they're not. Instead it's just what our minds do in trying to help us to deal with the terrible things we might have experienced. We understand that these things happen because of how our mind works during traumatic events:

- During trauma, our mind doesn't work the same as it does normally. It does this because we are very scared. Because of this, traumatic memories are stored in a different way in the mind. This means that they:

- Can come as nightmares, intrusive memories or flashbacks
 - Have no sense of time (feels like they are happening now, not in the past)
 - Can include images, sounds, smells, emotions and pain of traumatic event
 - Can be triggered by things that remind us of the traumatic event (e.g. feeling scared, seeing the colour red, seeing people in uniform).
- We remember them so often because our minds are trying to help us to process and make sense of them.
- Because the reminders are so scary and unpleasant, we try to push them away. But this just means they keep coming back...
- Our mind is a bit like a cupboard. Traumatic memories are like stuffing a duvet into a cupboard in a rush and shutting the door. Because of the way the duvet has been stored, like the memories, it keeps pushing the door open and falling out of the cupboard (like nightmares and flashbacks). Treatment is like taking the duvet out of the cupboard, taking time to fold it back neatly and then putting it back in the cupboard. Then it is possible to take the duvet out of the cupboard when you want to rather than it falling out when you do not expect it (therefore having more control over the memories).
- Treatment involves talking about the past in a slow controlled way.
- Talking about the traumatic memory is like treating a wound that has become infected. The wound is painful to touch (like talking about a traumatic memory), so we don't want to touch it. But if we do not treat it, it will remain infected. By treating the wound, it can begin to heal.

Everything is linked

Sometimes it feels like what is happening is unpredictable and there is nothing that can be done to make it better. But there are some basic things for you to understand that can help:

- Everything is linked – Our thoughts, feelings, memories and what goes on in our world are all linked. For example, if you are worried about being responsible in some way for what happened, you will probably think more about what happened and then feel more frightened and upset.
- You can have some control over your thoughts and feelings – You cannot stop memories coming back completely, but once they come back, it can help to do something relaxing or something that helps you to feel safe.
- Thinking about things over and over doesn't always help – Sometimes we can't help but worry about things, but worrying too much can make us feel upset and bad. Also thinking over and over doesn't help change a situation. Doing something relaxing can help.

Session 3 Handout: Motivation for confronting memories of the trauma

It is common and very understandable to have mixed feelings about confronting your memories of the trauma. It can be a hard and daunting process to start. For this reason, it is important to clarify the specific reasons why you want to do this, to help you assess how motivated you are to engage in this phase of treatment.

Many people also find it helpful to clarify what fears they have about confronting memories, and what may hold them back. Often, what holds people back are fears of what they think might happen if they bring on memories of the traumatic event.

We recommend that you use this sheet to clarify the advantages and disadvantages (pros and cons) of changing the way you confront and process the memory of the trauma, versus leaving things as they are (staying the same).

Whilst you are completing these questions, it's important to consider your values and goals during this exercise. If you manage to confront this memory and tolerate the distress that comes along with it, what goals will it help you achieve? How will it bring you closer to what's important to you?

What are the possible advantages of changing the way you deal with the memory?	What are some possible disadvantages of changing the way you deal with the memory?
What are some disadvantages of staying the same?	What are some advantages of staying the same?

Motivation levels can also fluctuate during treatment. If you notice your level of motivation to change the way you process your memories reduces over the coming weeks, come back to this sheet, and consider the things that may be holding you back.

Session 3 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

Session 4. 'Rape' – Meaning, Myths & Other People's Reactions

- Review Homework
 - Review the 'Motivation for confronting memories of the trauma' handout: pros and cons identified? Any difficulties?
 - Review the 'Monitoring Intrusive Memories Diary': anyone willing to share an example?
- Meaning of the word 'Rape'
 - Link to model (Session 3: event → meaning → emotion)
 - Brainstorm session on what thoughts/images/meanings the word brings to mind
- Beliefs (personal vs. myths & stereotypes) re rape victims
 - Have these beliefs about 'rape victims' changed since the rape/sexual assault? If so, how did the group members' beliefs differ before and after?
 - Where did/do these beliefs come from? (other people, the media)
- Maladaptive Appraisals - Blame & responsibility
 - Since the rape/sexual assault, do group members' have particular negative beliefs about themselves? (ie. beliefs related to blame and responsibility)
 - If so, where do these beliefs come from?
 - Are these beliefs related to pre-existing interpersonal schemas/family scripts re responsibility for example? (Box 14.2 Psychoeducation: What are Interpersonal Schemas?) Other maladaptive meanings?
 - Have these beliefs been influenced by the reactions/responses of others?
- Projection of knowledge/beliefs in long-term memory onto new experience
 - Identifying and discussing the link between past experiences/memories and new experiences and emotions
- Introduction to Narrative Restructuring – idea of building a new memory
 - How do we begin to challenge/update these beliefs?
 - Beliefs challenged through psychoeducation about and challenging/updating of trauma memories (focus of the second half of the group programme)
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to continue with the 'Monitoring Intrusive Memories Diary' and the 'Self-Monitoring of Feelings Form'.

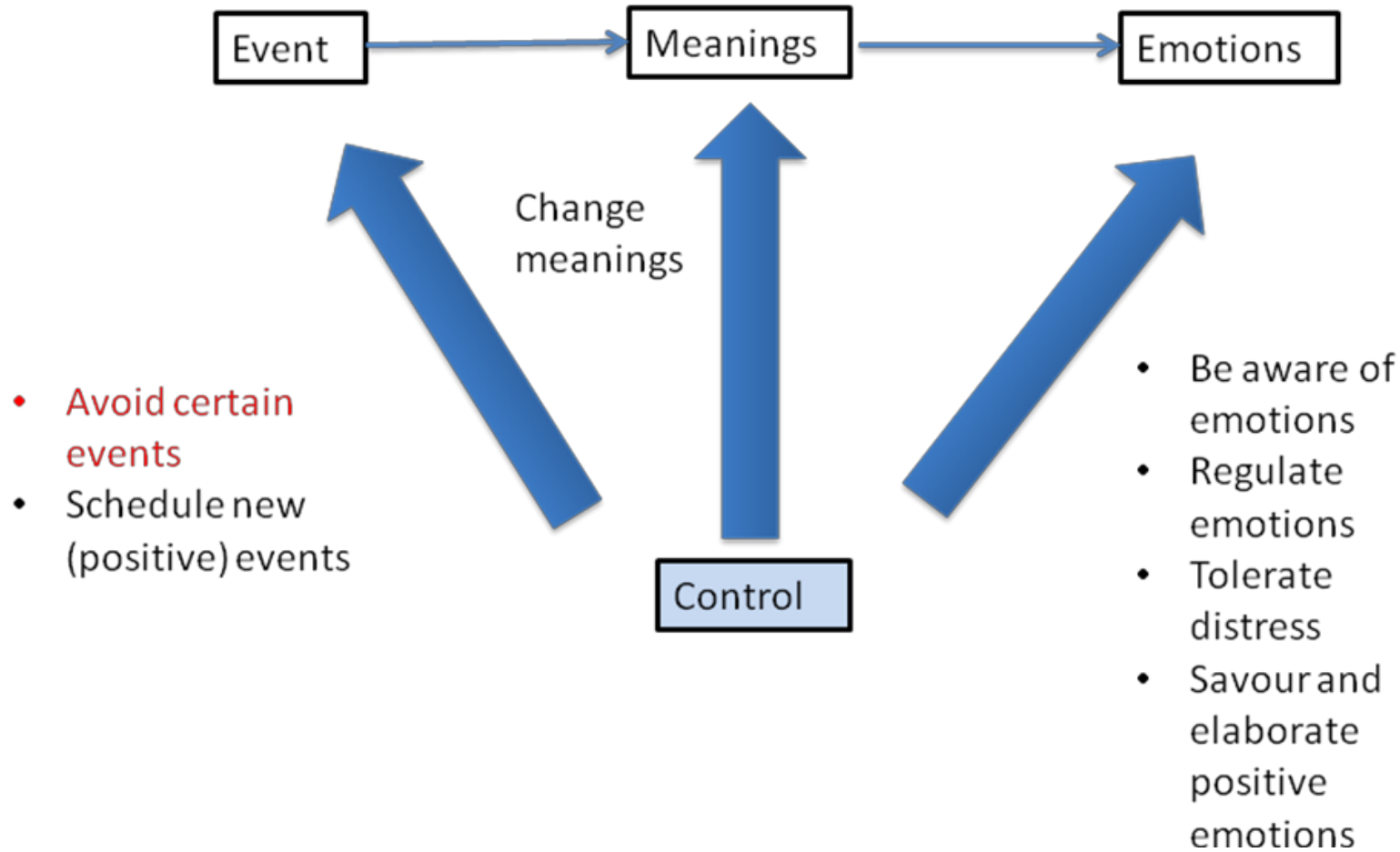
Session 4 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

Session 5: Emotion Regulation and Distress Tolerance

- Review Homework
 - Review the ‘Monitoring Intrusive Memories Diary’ and the Self-Monitoring of Feelings Form: anyone willing to share an example?
- Psychoeducation on Emotion Regulation
 - Elaborate on concept of emotion regulation & link to session 2
 - Introduce ‘Emotions and their Regulation’ as simple framework for group sessions (Illustrate on flipchart & Handout)
- Identify and Discuss Problematic Emotions
 - Identify and discuss problematic emotions that have arisen from the homework
 - Psychoeducation on specific emotional responses: Anxiety (state of arousal that signals danger); anger (adaptive when it prepares us for active coping); depression (sustained state of absence of pleasure or excitement); dissociation (escape from the pain or intensity of an emotion that is unbearable, continuum)
 - Disgust (physical & psychological exclusion of something abhorrent), shame (dishonour, disgrace, or condemnation; as seen by others), guilt (responsibility for a particular act viewed as a violation of values)
- Introduce Idea of Distress Tolerance
 - *‘Distress tolerance is the ability to endure pain or hardship without resorting to actions or behaviours that are damaging to yourself or others’* (related to emotion regulation & accepting/sitting with feelings)
 - Why should we learn to recognise and tolerate distress?: distress is a catalyst; avoiding distress saps energy, restricts positive feelings, interferes with achieving desired goals, contributes to PTSD symptoms.
- Identify Distress Tolerance Skills
 - Identify successes (e.g. exam performance, sharing feelings)
 - Identify maladaptive strategies: externalising behaviours (alcohol, drugs, self-injurious behaviour, binge eating and purging, unsafe, violent or aggressive behaviours); avoidance (link to Emotion Regulation model)
- Maladaptive Strategies and avoidance
 - What is the function of these maladaptive strategies?
 - What is the function of avoidance?
 - Address ambivalence re avoiding distressing emotions rather than recognising and working through them (use specific examples from the group sessions so far)
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to complete the ‘Motivation for confronting difficult emotions’ handout
 - Continue with the ‘Self-Monitoring of Feelings’ Form
 - Continue with the ‘Monitoring Intrusive Memories’ Diary

Emotions and their regulation



Session 5 Handout: Motivation for confronting the difficult emotions associated with your traumatic experience

It is common and very understandable to have mixed feelings about confronting the emotions associated with your traumatic experience. It can be a hard and daunting process to start. For this reason, it is important to clarify the specific reasons why you want to do this, to help you assess how motivated you are to engage in this phase of treatment.

Many people also find it helpful to clarify what fears they have about confronting their emotions, and what may hold them back. Often, what holds people back are fears of what they think might happen if they start processing the emotions associated with their traumatic experience.

We recommend that you use this sheet to clarify the advantages and disadvantages (pros and cons) of changing the way you confront and process your emotions, versus leaving things as they are (staying the same).

Whilst you are completing these questions, it's important to consider your values and goals during this exercise. If you manage to confront your emotions and tolerate the distress that comes along with it, what goals will it help you achieve? How will it bring you closer to what's important to you?

What are the possible advantages of confronting your difficult emotions?	What are some possible disadvantages of confronting your difficult emotions?
What are some disadvantages of staying the same?	What are some advantages of staying the same?

Motivation levels can also fluctuate during treatment. If you notice your level of motivation to change the way you process your emotions reduces over the coming weeks, come back to this sheet, and consider the things that may be holding you back

Self-Monitoring of Feelings Form

Feeling	Intensity (0-10)	Trigger	Thoughts	Response/coping strategy

Session 5 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

Session 6: Emotionally Engaged Living

- Review Homework
 - Check progress with the ‘Motivation for confronting difficult emotions’ & Self-Monitoring of Feelings Form. Any difficulties? Any surprises with homework?
 - Review the ‘Monitoring Intrusive Memories Diary’: anyone willing to share an example?
- Emotion Regulation Skills
 - Identify and evaluate group members’ current emotion regulation skills: elicit examples of modulation strategies (“*what do you do to make yourself feel better when you feel bad?*”)
 - Connect coping strategies to the three channels of emotional responding (physiological, cognitive & behavioural)
 - Identify timing of strategies (At the time vs. Later once overwhelmed)
- Identify and Practice Adaptive Emotion Regulation Strategies
 - Physiological Strategies: focused breathing, progressive muscular relaxation, meditation (Emotions) ~ group exercise
 - Cognitive Strategies: attention shifting, positive self-statements, positive imagery, reappraisal, perspective broadening (Meanings)
 - Behavioural Strategies: Grounding, Time-out, Replacement behaviours (Event)
- Introduce Positive Emotions and Plan Pleasurable Activities
 - Review reasons to engage in pleasurable activities: as a reward for distress reduction efforts; a form of distress management; to direct action; to enhance motivation and a sense of future possibilities; to produce greater self-awareness and connection to others
 - Identify pleasurable or positive activities
- Connect Distress Tolerance to Individual Goals
 - Identify/revisit specific treatment goals (may have developed/changed since the first session)
- Present and Practice Method of Assessing Pros and Cons
 - Is it worth tolerating distress to reach a goal?: Identify goal, evaluate the necessity for distress, identify pros and cons
- Distress Reduction Strategies
 - General strategies: self-care, getting adequate rest, eating a well-balanced diet, moderating alcohol intake, exercising regularly, addressing medical issues, managing money responsibly etc.
 - Applying negative mood regulation strategies in specific situations in order to meet desired goals
 - Acceptance of negative feelings in everyday life; acceptance of intense feelings and moods
- The Role of Positive Feelings in Pursuing Goals
 - Experiences of positive emotions can *enhance* functioning (link to work on pleasurable activities in session 3)
- Summarise the Goals of the Session and Plan Between-session Exercises
 - To continue with the Self-Monitoring of Feelings Form (Handout 11.2) and this time include the ‘Response/coping strategy’
 - Three coping strategies for emotion regulation to be identified & practised
 - Pleasant Event Scheduling (Handout 12.2)
 - Continue with the ‘Monitoring Intrusive Memories Diary’

Session 6 Handout: 11.2

HANDOUT 11.2

Self-Monitoring of Feelings Form

Feeling	Intensity (0–10)	Trigger	Thoughts	Response/coping strategy

Session 6 Handout: Adaptive Emotion Regulation Strategies

For homework, I am going to practice the following emotion regulation strategies:

Emotion Regulation Strategy	How I will practice	When I will practice
1.		
2.		
3.		

Session 6 Handout: Controlled Breathing

How to do ‘controlled breathing’

- Let your shoulders drop and relax your body as much as you can.
- Inhale slowly and deeply through your nose into the bottom of your lungs, filling them.
- You should try to keep your mouth shut.
- Your belly should move out as you breathe in. Your chest should move only very slightly.
- When you have taken in the full breath pause for a brief moment and then exhale slowly through your mouth.
- Keep your breathing slow and smooth and calm and even, without gulping or grasping.
- The aim is to take about 8 to 12 breaths in a minute. In and out counts as one breath.
- Keep this going for a couple of minutes, concentrating fully on the breathing
- If you feel breathless or need to gasp for air this is a sign that you need to breathe even more slowly and gently.

Helpful tips for controlled breathing

- Sometimes it can help to imagine a balloon in your belly. As you breathe in through your nose the balloon should inflate and your belly rise up. As you breathe out the balloon deflates and your belly falls down. You can check this by putting a hand on your belly.
- Whilst practising this kind of breathing people first feel that they aren't getting enough air and want to take gulps. However with practice you will find that this slower rate of breathing is more comfortable and will reduce anxiety and other physical feelings.
- As you use controlled breathing thoughts are likely to come into your mind. That is just the way the mind works. Try not to push them away particularly but to keep going back to your breathing. Concentrate on the air going in and out regardless of the thought.

- It is very important to practise this skill. It will only become a good habit if it is rehearsed time and time again. It is easier to practise when you are feeling less stressed, in the same way that you would learn to swim in a small pool rather than the ocean.
- It is important to practise for, say, two or three minutes at a time, two or three times a day. It can help to remind yourself by leaving a little note or some sign for yourself that maybe only you know about. Some people put a small marker on their watch so that every time they look at it they are reminded to practise the breathing for a few moments.
- When you first practise sit in a comfortable chair, relax your body as much as you can, and let your shoulders drop. Sit upright; if you are slouched forward your chest muscles are constricted and you will not be able to fill your lungs properly.
- Once you feel confident about doing this kind of breathing when sitting comfortably you can also try it just walking around, when sitting on the tube or waiting at the bus-stop. Gradually it will become easier to do when you are feeling more anxious.
- As an emergency if you are feeling panicky and not confident enough to take control of your breathing you can use a paper bag to breathe into. Cover your nose and mouth and breathe as naturally as possible into the bag for a few moments until the feelings pass.

Session 6 Handout: Progressive Muscular Relaxation

How to do progressive muscular relaxation?

The following exercise recommends a particular sequence of relaxing your body. This sequence starts with your head and ends at your feet. You will be asked to tense separate muscle groups, to hold the tension for about five seconds and then to let it go. The idea of this exercise is to learn the difference between how your muscles feel when they are tense and how they feel when they are relaxed. So you can identify tension when it occurs in your body and take the relevant action. Some people find certain muscles more difficult to relax than others, for example the muscles in the neck. Don't worry about this for the moment - extra practice is all that's needed.

First of all spend a little time getting comfortable. Loosen any tight clothing, take your shoes off, find a comfortable position with your legs and arms slightly apart. Now close your eyes. Now tense every muscle in your body. Tense the muscles in your jaw, your eyes, your arms, your hands, your chest, your stomach, your back, your legs, your feet, feel the tension all over your body. Hold it - and then let it go. Now take a deep breath. As you breathe out say silently' to yourself: relax. Try and appreciate the difference between how your body felt when it was tense and how it feels now.

As we continue you will be asked to tense different parts of your body. You will become aware of the feeling of tension in each part, and then of the different feeling of relaxation. Keeping the rest of your body relaxed, wrinkle up your forehead. Really feel the tension, hold it, and then let it go. Feel the tension slipping away. Now take a deep breath and as you breathe out say to yourself: relax, relax. Now screw up your eyes as if it was very windy. Feel the tension, hold it, and then let it go. Now take a deep breath and as you breathe out say to yourself: relax. Feel the relief.

Now open your mouth as wide as you can. Feel the tension, hold it, and then let it go. Now take a deep breath and as you breathe out say to yourself: relax. Now hold your tongue against the roof of your mouth. Feel the tension in your tongue, hold it, and then let it go. Feel the tension slip away. Now take a deep breath and as you breathe out say to yourself relax, relax.

Now clench your jaw. Feel the tension, and then let it go. Then take a deep breath and as you breathe out say to yourself: relax. Think about the top of your head, your forehead, your eyes, your cheeks, and your jaw. Make sure they're all relaxed, just let go of the tension. The tongue is relaxed, the forehead is soft and smooth, and your neck and head are getting more and more relaxed. Your head feels as if it could roll from side to side.

Shrug up your shoulders, try to touch your ears with them, feel the tension, hold it, and then let it go. Feel them join the relaxed part of your body. Take a deep breath and as you breathe out say to yourself: relax. Now stretch out your arms, make a fist with your hands, feel the Tension, hold it, and then let it go. Let it slip away. Take a deep breath. As you breathe out say to yourself: relax, relax.

Now bend your arms up to your shoulder as if you were showing off your muscles. Feel the tension under your arms, hold it, and then let it go. Relax. Now take a deep breath and as you breathe out say to yourself: relax, relax.

Now we're going to move on to relaxing your chest. Begin by taking in a breath than totally fills your lungs. Notice the tension around your ribs and let it go. Take a deep breath and as you breathe out say to yourself: relax, relax. Now arch your back, hold it, and let it go. Feel the relief. Take a deep breath and as you breathe out say to yourself: relax, relax.

Feel the relaxation in your face, your shoulders, down your back, arms, your chest, all relaxing more and more. Breathing in and out and getting more and more relaxed. Now tighten your stomach muscles, feel the tension, hold it, and then let it go. Feel the relief. Take a deep breath and as you breathe out say to yourself: relax, relax. Now push out your stomach as far as you can, feel the tension, hold it and then let it go. Now take a deep breath and as you breathe out say to yourself: relax. Now check your face again. If any areas are tense, relax them. Your chest, your back, relaxes them. Now we move on to your hips and legs.

Press down on the heels of your feet, really feel the tension, hold it and then let it go. Take a deep breath and as you breathe out say to yourself: relax. Now tighten your calf muscles, feel the tension, and let it go. Take a deep breath and as you breathe out say to yourself: relax. Now curl your toes downwards, try to touch the bottom of your feet with them; hold it and let it go. Now take a deep breath and as you breathe out say to yourself: relax, relax. Now bend your toes the other way right up to your knees. Hold it, and let it go. Feel the relief. Take a deep breath and as you breathe out say to yourself: relax.

Feel your whole body becoming more and more relaxed. Each time you breathe out you become more and more relaxed. Now clear your mind and imagine you are lying in a poppy field. It's a sunny day. You can see the clouds moving across in the sky. You can hear a stream in the distance, rustling grass, the birds singing, a child laughing, you can smell the grass and flowers and fresh air. The sun feels warm against your skin; you can feel a gentle breeze. It feels very nice. As you look around you can see the poppies gently swaying in the breeze.

Now I am going to count to four and you will open your eyes and sit quietly. One, two, three, four

Session 6 Handout: 12.2

HANDOUT 12.2

Suggestions for Pleasurable Activities: Regulation of Positive Feelings

Emotion regulation includes not only the capacity to reduce overwhelming distress, but also the capacity to enhance positive feelings. Below are some activities that may help you experience and enjoy positive feelings.

Aromatherapy	Journal writing
Bike riding	Lifting weights
Browsing in a bookstore	Lighting candles
Camping	Listening to music
Cooking	Making a collage
Creating a scrapbook	Meditating
Dancing	Painting
Decorating your living space	"People watching"
Drawing	Photography
Exercising	Playing music
Exploring on the Internet	Playing with pets or children
Gardening	Reading
Getting a massage	Relaxing in the park
Getting hair or nails done	Riding a bus
Going for a drive	Singing
Going hiking	Sitting in a coffee shop
Going on a picnic	Taking a long hot bath
Going to a library	Taking a walk
Going to a museum	Taking an interesting class
Going to a play or concert	Talking on the phone with a friend
Having lunch/dinner with a friend	Viewing beautiful scenery
Jogging	Visiting friends

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6-7 a.m.							
7-8 a.m.							
8-9 a.m.							
9-10 a.m.							
10-11 a.m.							
11-12 a.m.							
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4-5 p.m.							
5-6 p.m.							

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4-5 a.m.							
5-6 a.m.							

Session 6 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

Session 7: Interpersonal Emotion Regulation

- Review Homework
 - Check progress with the ‘Monitoring Intrusive Memories Diary’ and ‘Self-Monitoring of Feelings Form’, including the ‘Response/coping strategy’. Anyone willing to share an example? Did people identified & practise three coping strategies? Pleasant Event Scheduling
 - Any difficulties? Any surprises with homework?
- Relationship Patterns: Interpersonal Schemas/Family Scripts
 - Link to model (Session 3: event → meaning → emotion in interpersonal domain)
 - Can group members identify a particular pattern of emotional inhibition/emotional intolerance within their families? (link to Sessions 2: formulation exercise)
 - Do these identified patterns repeat themselves in situations/relationships with other people?
- Difficulties in Relationships with other People
 - Brainstorm: What difficulties have group members experienced in their relationships with other people since the rape/sexual assault? How have relationships with other people changed? (emotional, physical, sexual)
 - How can we make sense of the changes in relationships with other people?
 - Is there anything that we can do to improve these relationships? What are the barriers to this?
- Agency in Relationships: Communication, Assertiveness and Control
 - Psychoeducation: what is assertiveness?
 - Identify specific problems with assertiveness and control (discuss *function* of rape as being exerting power and control and therefore disempowering the victim)
 - Clarify the historical basis for the group members’ assumptions about assertiveness & emotional expression
 - Review basic assertiveness techniques: ‘I’ messages, making requests, saying no
 - Are there any benefits to increasing communication with other people?
- Prepare for Transition to the Next Phase of Treatment
 - Acknowledge the end of Phase 1 and review progress in building emotion regulation and interpersonal skills
 - How will these skills be utilised in the next phase of treatment?
 - Address questions/anxieties about beginning the work on memory control
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Continue with the ‘Monitoring Intrusive Memories Diary’
 - Pleasant Event Scheduling (Handout 12.2)

Session 7 Handout: 12.2

HANDOUT 12.2

Suggestions for Pleasurable Activities: Regulation of Positive Feelings

Emotion regulation includes not only the capacity to reduce overwhelming distress, but also the capacity to enhance positive feelings. Below are some activities that may help you experience and enjoy positive feelings.

Aromatherapy	Journal writing
Bike riding	Lifting weights
Browsing in a bookstore	Lighting candles
Camping	Listening to music
Cooking	Making a collage
Creating a scrapbook	Meditating
Dancing	Painting
Decorating your living space	"People watching"
Drawing	Photography
Exercising	Playing music
Exploring on the Internet	Playing with pets or children
Gardening	Reading
Getting a massage	Relaxing in the park
Getting hair or nails done	Riding a bus
Going for a drive	Singing
Going hiking	Sitting in a coffee shop
Going on a picnic	Taking a long hot bath
Going to a library	Taking a walk
Going to a museum	Taking an interesting class
Going to a play or concert	Talking on the phone with a friend
Having lunch/dinner with a friend	Viewing beautiful scenery
Jogging	Visiting friends

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4-5 a.m.							
5-6 a.m.							

Session 7 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

Session 8. Flashbacks – Identifying Triggers and Re-Conditioning

- Review Homework
 - Review the ‘Monitoring Intrusive Memories Diary’: anyone willing to share an example?
 - Check progress with pleasant events scheduling. Any difficulties? Any surprises with homework?
- Identify triggers to Intrusive memories
 - Refer to ‘Memories and their regulation’ model (Triggers → Memory → Meanings → Emotion)
 - Use of ‘Monitoring Intrusive Memories Diary’ to identify particular triggers to flashbacks/intrusive memories
 - Share and group triggers on flip-chart (people, places, activities, words etc.)
- Coping with Intrusive memories
 - Re-iterate idea of monitoring as a form of control; overturning avoidance (backfiring attempts to suppress)
 - What coping strategies have people used/identified in the diary? What makes things better/worse (short & longer-term)
 - Link back to Distress Reduction Strategies
- Re-Conditioning – Linking Cues with non-threatening words/images
 - Associating the triggers with different memories (Triggers → Memories → Different meanings → Different emotions)
 - Discuss ideas
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to continue with the ‘Monitoring Intrusive Memories Diary’
 - Ask group members to write out a narrative / a small part of the narrative of what happened and identify the most frequently occurring / vivid / distressing images and associated meaning(s) - to be updated in the following two sessions (Visual → Verbal memory)
 - Any other ideas re processing memories? Opportunities to talk through what happened with other people?
 - Pleasant Event Scheduling (Handout 12.2)

Session 8 Handout: Monitoring Intrusive Memories Diary

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Coping <i>What did you do?</i>

-

Session 8 Handout: 12.2

HANDOUT 12.2

Suggestions for Pleasurable Activities: Regulation of Positive Feelings

Emotion regulation includes not only the capacity to reduce overwhelming distress, but also the capacity to enhance positive feelings. Below are some activities that may help you experience and enjoy positive feelings.

Aromatherapy	Journal writing
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Camping	Listening to music
Cooking	Making a collage
Creating a scrapbook	Meditating
Dancing	Painting
Decorating your living space	"People watching"
Drawing	Photography
Exercising	Playing music
Exploring on the Internet	Playing with pets or children
Gardening	Reading
Getting a massage	Relaxing in the park
Getting hair or nails done	Riding a bus
Going for a drive	Singing
Going hiking	Sitting in a coffee shop
Going on a picnic	Taking a long hot bath
Going to a library	Taking a walk
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4-5 a.m.							
5-6 a.m.							

Session 9: Imagery & Nightmare Rescripting

- Review Homework
 - Review the ‘Monitoring Intrusive Memories Diary’: anyone willing to share an example?
 - Check progress with pleasant events scheduling. Any difficulties? Any surprises with homework?
 - Review progress with writing out a narrative and identifying particular images and associated meanings
- Psychoeducation: Imagery
 - Define what an image is and how images are different to verbal thoughts, with stronger emotional intensity (link to ‘Brain model’).
 - Ask group members to practice imagining a memory (neutral): Imagine walking into Paddington Station – what do they see, hear, feel, think and believe? (use to check understanding of what an image is)
- Psychoeducation: Imagery & Nightmare Rescripting
 - Different kinds of perspective – across time, within a mental space
 - The need to use perspective to do something different (Image → New Image; Image → Verbal; Verbal → New Verbal)
 - How to create perspective – introduce some ideas
- Imagery or Nightmare Rescripting Exercise
 - Ask group members to identify / share a particular traumatic image or nightmare (or unrelated to traumatic experience if too distressing)
 - Group exercise to explore options for modifying this image to increase sense of mastery & control – do this for each group member
 - Ask group members to write down the rescript
- Positive Imagery / ‘Safe place’ exercise
 - Ask one group member to share a memory of a place where they felt safe and relaxed and practice positive imagery / ‘safe place’ exercise as a technique to use when overwhelmed by negative intrusive memories
 - Ask all group members to write down their own positive/safe image in notebooks
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to practice modifying/updating the images they identified
 - Ask group members to complete the ‘Monitoring Intrusive Memories Diary II’ (go through additional columns)
 - Ask group members to practice using their positive/safe image
 - Pleasant Event Scheduling (Handout 12.2)

Session 9 Handout: Monitoring Intrusive Memories Diary II

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Rescript <i>How did you change the memory/image to change the meaning?</i>	Distress <i>How distressed did you feel after the rescripting? (0-100)</i>

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6-7 a.m.							
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Session 10: Narrative Restructuring

- Review Homework
 - Review the ‘Monitoring Intrusive Memories Diary II’: anyone willing to share an example?
 - Review progress with rescripting images/nightmares – any change in distress levels? Positive/safe image helpful?
 - Check progress with pleasant events scheduling. Any difficulties? Any surprises with homework?
- Psychoeducation re Narrative Restructuring
 - Recap psychoeducation on memory: brain model (meaning), appraisals knotted into narrative, memory reactivating threat system, leading you to *believe* the memory’s real
 - Link to session on *meaning* of ‘rape’: e.g. beliefs around blame and responsibility
 - Outline example of ‘*It’s my fault because I didn’t fight back*’ & challenge with fight, flight, freeze response
- Updating memories/’hotspots’
 - Time perspective – ‘time-tagging’ memories
 - Integration of what is known now into memory
 - Integration of grounding statements
 - Inserting new memory/image/understanding into old intrusive memory
- Narrative Restructuring Exercise
 - Ask group members to identify / share a particular traumatic nightmare or image (or unrelated to traumatic experience if too distressing)
 - Group exercise to explore integration of what is known now into the memory
 - Ask group members to help each other and write down the updates
- Narrative Restructuring Techniques
 - Flashcards with grounding statements
 - Diary of memories & ‘here and now’ update
 - Nightmare Protocol
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to continue with the ‘Monitoring Intrusive Memories Diary II’
 - Ask group members to practice the narrative restructuring by writing out a narrative of what happened and then a new narrative with ‘updates’ re what they know now
 - Ask group members to use the ‘Nightmare Protocol’
 - Ask group members to continue practicing using their positive/safe image
 - Pleasant Event Scheduling (Handout 12.2)

Session 10 Handout: Monitoring Intrusive Memories Diary II

Situation <i>What happened /triggered the intrusive memory?</i>	Intrusive Memory <i>Image / Emotion / Sensation?</i>	‘Nowness’ <i>To what extent did it feel like it was happening again now? (0-100)</i>	Distress <i>How distressed did you feel? (0-100)</i>	Meaning <i>What does the intrusive memory mean / say about you?</i>	Rescript <i>How did you change the memory/image to change the meaning?</i>	Distress <i>How distressed did you feel after the rescripting? (0-100)</i>

Session 10 Handout: Nightmare Protocol

Nightmare Protocol

Complete this and keep it by your bed for when you wake up after a nightmare:

If I wake up in the night feeling _____
(write in the emotion e.g. frightened, fearful, anxious)

I will be sensing in my body _____
(write in at least three feelings in your body, e.g. tension, heart racing)

Because I will be remembering _____
(name the trauma by title only - no details - e.g. the assault)

At the same time, I will look around where I am now in _____
(the current year e.g. 2014)

Here in _____
(name the place where you are e.g. in my bedroom in London)

And I will see _____
(describe some of the things that you can see when you wake up)

And I will refocus my attention/'ground' myself by _____

(e.g. smelling perfume, playing a game on my phone, stroking my cat..)

And say to myself _____
(e.g. 'I am strong', 'I have survived', 'I can get through this'..)

And so I will know that it was just a nightmare and _____
(name trauma)

Is not happening anymore.

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6-7 a.m.							
7-8 a.m.							
8-9 a.m.							
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4-5 a.m.							
5-6 a.m.							

Session 11: Method of Loci

- Review Homework
 - Review the ‘Monitoring Intrusive Memories Diary II’: anyone willing to share an example?
 - Review progress with narrative restructuring – any change in the quality of the trauma memories/distress levels?
 - What helps: flashcards, positive self-talk, nightmare protocol, writing things down?
 - Check progress with pleasant events scheduling. Any difficulties? Any surprises with homework?
- Psychoeducation on Method of Loci
 - Introduce use of Method of Loci as a mnemonic aid
 - Ask group members to go through example of walk from Paddington Station to the group room in order to remember 5 items on a shopping list
 - Practice going through & problem-solve
- Use of Method of Loci to summarise useful techniques learnt in group sessions
 - Ask group members to derive a list of 10 helpful/positive things they have learnt in the group: 10 coping strategies, techniques, positive statements, useful pieces of information or memories
 - Draw out a map/plan of a familiar route/building & problem-solve (safer inside? Good to incorporate their ‘safe place’?)
 - Write a word/phrase or draw a picture to represent each of the 10 things identified
 - Ask each group member to imagine and talk through their route
- Summarise the Goals of the Session and Plan Between-session Exercises
 - Ask group members to practice using the Method of Loci
 - Ask group members to complete a ‘Blueprint’ for the final Review/Summary session
 - Pleasant Event Scheduling (Handout 12.2)

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6-7 a.m.							
7-8 a.m.							
8-9 a.m.							
9-10 a.m.							
10-11 a.m.							
11-12 a.m.							
12-1 p.m.							
1-2 p.m.							
2-3 p.m.							
3-4 p.m.							
4-5 p.m.							
5-6 p.m.							

Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6-7 p.m.							
7-8 p.m.							
8-9 p.m.							
9-10 p.m.							
10-11 p.m.							
11-12 a.m.							
12-1 a.m.							
1-2 a.m.							
2-3 a.m.							
3-4 a.m.							
4-5 a.m.							
5-6 a.m.							

Session 12. Summary & Review

- Review Homework
 - Review the ‘Method of Loci’
 - Check progress with pleasant events scheduling. Any difficulties? Any surprises with homework?
- Blueprint
 - Go through a summary of what each of the sessions has covered
 - Ask group members to talk about what has been helpful and what has been less helpful
 - Action plan for the future – set longer-term goals
- Feedback
 - Feedback forms (Haven)
 - Any feedback re improvements for future groups? Anything they think should be included that wasn’t?
 - Questionnaire Measures (to take home and complete before end of group assessment)
- Ending
 - Talk about thoughts and feelings re the group ending
 - Acknowledge/normalise anxieties
 - Provide information re additional help/support if needed
 - Arrange end of group assessments