

HANDOUT 3.1
PTSD Checklist-5 (PCL-5): Scale and Scoring

Date: _____ Client: _____

The PTSD Checklist (PCL) was recently revised for the DSM-5 (this version is known as the PCL-5).

While this instrument alone is not sufficient to diagnose PTSD, it gives you a sense of whether an individual is experiencing PTSD symptoms and how severe his or her symptoms are.

For your purposes, add up your client's scores on the 20 items. If the total score is 38 or above, refer him or her for a PTSD assessment/evaluation, if needed, for confirmation of the diagnosis. You can track your client's scores by plotting them on the PCL graph at the end of this handout.

There are two versions of the PCL-5:

1. The PCL-5 Monthly is administered before the start of Session 1 of CPT. It uses the past *month* as the time frame reference. There is an alternative format of the PCL-5 Monthly, which may be used before the start of Session 1 in order to assess the Criterion A trauma in more depth (PCL-5 with a brief Criterion A assessment).
2. The PCL-5 Weekly is used during CPT for Session 2 and for all other sessions. Remind the client to use only the preceding *week* as the time frame for each item. Score it immediately upon receipt, and ask the client for any clarifications needed.

If the client's scores have not dropped significantly by Session 6, the therapist should explore whether the client is still avoiding affect, has been engaging in self-harm or other therapy-interfering behavior, or has not changed his or her assimilated beliefs about the traumatic event. Processing the lack of improvement with the client will be important at that point.

Please note: Several important revisions were made to the PCL in updating it for DSM-5. Changes involve the rating scale (now a 0–4 range for each symptom) and an increase from 17 to 20 items. This means that PCL-5 scores are *not* compatible with scores on versions of the PCL for DSM-IV (e.g., the PCL-S, which is in previous editions of the CPT manual), and that the PCL-5 cannot be used interchangeably with these earlier versions.

(continued)

Both versions of the PCL-5 are from Weathers, Litz, Keane, Palmieri, Marx, and Schnurr (2013). The scale is available from the National Center for PTSD at www.ptsd.va.gov and is in the public domain. Reprinted in *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

PCL-5 WITH BRIEF CRITERION A ASSESSMENT: MONTHLY

Instructions: This questionnaire asks about problems you may have had after a very stressful experience involving *actual or threatened death, serious injury, or sexual violence*. It could be something that happened to you directly, something you witnessed, or something you learned happened to a close family member or close friend. Some examples are a *serious accident; fire; disaster such as a hurricane, tornado, or earthquake; physical or sexual attack or abuse; war; homicide; or suicide*.

First, please answer a few questions about your *worst event*, which for this questionnaire means the event that currently bothers you the most. This could be one of the examples above or some other very stressful experience. Also, it could be a single event (for example, a car crash) or multiple similar events (for example, multiple stressful events in a war zone or repeated sexual abuse).

Briefly identify the worst event (if you feel comfortable doing so):

How long ago did it happen?

Did it involve actual or threatened death, serious injury, or sexual violence?

- Yes
- No

How did you experience it?

- It happened to me directly
- I witnessed it
- I learned about it happening to a close family member or close friend
- I was repeatedly exposed to details about it as part of my job (for example, paramedic, police, military, or other first responder)
- Other (please describe) _____

If the event involved the death of a close family member or close friend, was it due to some kind of accident or violence, or was it due to natural causes?

- Accident or violence
- Natural causes
- Not applicable (the event did not involve the death of a close family member or close friend)

Second, keeping this worst event in mind, read each of the problems on the next page and then circle one of the numbers to the right to indicate how much you have been bothered by that problem *in the past month*.

(continued)

PCL-5: MONTHLY

Instructions: Below is a list of problems that people sometimes have in response to a very stressful experience. Please read each problem carefully, and then circle one of the numbers to the right to indicate how much you have been bothered by that problem *in the past month*.

<i>In the past month, how much were you bothered by:</i>	<i>Not at all</i>	<i>A little bit</i>	<i>Moderately</i>	<i>Quite a bit</i>	<i>Extremely</i>
1. Repeated, disturbing, and unwanted memories of the stressful experience?	0	1	2	3	4
2. Repeated, disturbing dreams of the stressful experience?	0	1	2	3	4
3. Suddenly feeling or acting as if the stressful experience were actually happening again (<i>as if you were actually back there reliving it</i>)?	0	1	2	3	4
4. Feeling very upset when something reminded you of the stressful experience?	0	1	2	3	4
5. Having strong physical reactions when something reminded you of the stressful experience (<i>for example, heart pounding, trouble breathing, sweating</i>)?	0	1	2	3	4
6. Avoiding memories, thoughts, or feelings related to the stressful experience?	0	1	2	3	4
7. Avoiding external reminders of the stressful experience (<i>for example, people, places, conversations, activities, objects, or situations</i>)?	0	1	2	3	4
8. Trouble remembering important parts of the stressful experience?	0	1	2	3	4

(continued)

HANDOUT 3.1 (p. 4 of 7)

<i>In the past month, how much were you bothered by:</i>	<i>Not at all</i>	<i>A little bit</i>	<i>Moderately</i>	<i>Quite a bit</i>	<i>Extremely</i>
9. Having strong negative beliefs about yourself, other people, or the world (<i>for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous</i>)?	0	1	2	3	4
10. Blaming yourself or someone else for the stressful experience or what happened after it?	0	1	2	3	4
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	0	1	2	3	4
12. Loss of interest in activities that you used to enjoy?	0	1	2	3	4
13. Feeling distant or cut off from other people?	0	1	2	3	4
14. Trouble experiencing positive feelings (<i>for example, being unable to feel happiness or have loving feelings for people close to you</i>)?	0	1	2	3	4
15. Irritable behavior, angry outbursts, or acting aggressively?	0	1	2	3	4
16. Taking too many risks or doing things that could cause you harm?	0	1	2	3	4
17. Being “superalert” or watchful or on guard?	0	1	2	3	4
18. Feeling jumpy or easily startled?	0	1	2	3	4
19. Having difficulty concentrating?	0	1	2	3	4
20. Trouble falling or staying asleep?	0	1	2	3	4

(continued)

PCL-5: WEEKLY

Instructions: Below is a list of problems that people sometimes have in response to a very stressful experience. Please read each problem carefully, and then circle one of the numbers to the right to indicate how much you have been bothered by that problem *in the past week*.

<i>In the past week, how much were you bothered by:</i>	<i>Not at all</i>	<i>A little bit</i>	<i>Moderately</i>	<i>Quite a bit</i>	<i>Extremely</i>
1. Repeated, disturbing, and unwanted memories of the stressful experience?	0	1	2	3	4
2. Repeated, disturbing dreams of the stressful experience?	0	1	2	3	4
3. Suddenly feeling or acting as if the stressful experience were actually happening again (<i>as if you were actually back there reliving it</i>)?	0	1	2	3	4
4. Feeling very upset when something reminded you of the stressful experience?	0	1	2	3	4
5. Having strong physical reactions when something reminded you of the stressful experience (<i>for example, heart pounding, trouble breathing, sweating</i>)?	0	1	2	3	4
6. Avoiding memories, thoughts, or feelings related to the stressful experience?	0	1	2	3	4
7. Avoiding external reminders of the stressful experience (<i>for example, people, places, conversations, activities, objects, or situations</i>)?	0	1	2	3	4
8. Trouble remembering important parts of the stressful experience?	0	1	2	3	4

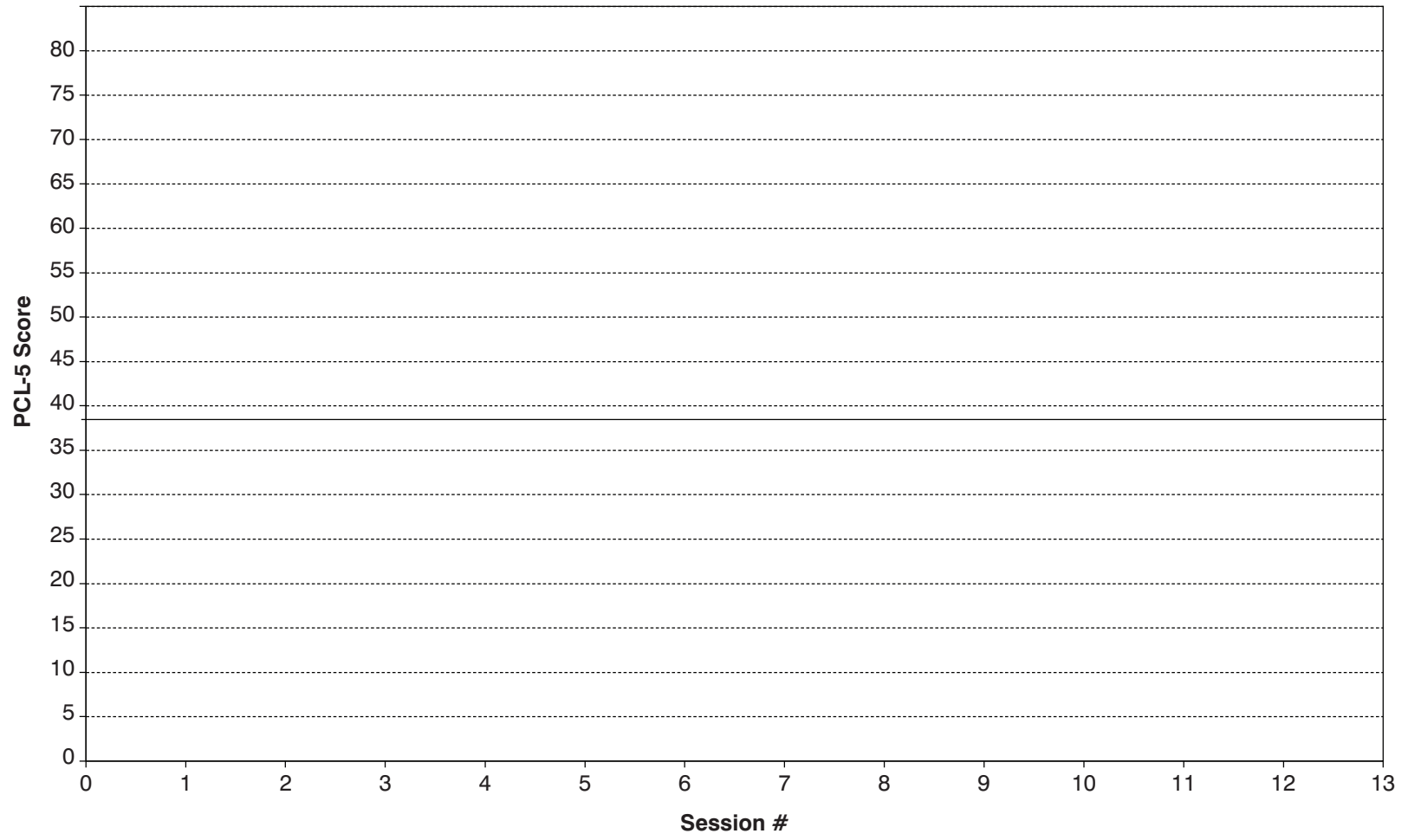
(continued)

HANDOUT 3.1 (p. 6 of 7)

<i>In the past week, how much were you bothered by:</i>	<i>Not at all</i>	<i>A little bit</i>	<i>Moderately</i>	<i>Quite a bit</i>	<i>Extremely</i>
9. Having strong negative beliefs about yourself, other people, or the world (<i>for example, having thoughts such as: I am bad, there is something seriously wrong with me, no one can be trusted, the world is completely dangerous</i>)?	0	1	2	3	4
10. Blaming yourself or someone else for the stressful experience or what happened after it?	0	1	2	3	4
11. Having strong negative feelings such as fear, horror, anger, guilt, or shame?	0	1	2	3	4
12. Loss of interest in activities that you used to enjoy?	0	1	2	3	4
13. Feeling distant or cut off from other people?	0	1	2	3	4
14. Trouble experiencing positive feelings (<i>for example, being unable to feel happiness or have loving feelings for people close to you</i>)?	0	1	2	3	4
15. Irritable behavior, angry outbursts, or acting aggressively?	0	1	2	3	4
16. Taking too many risks or doing things that could cause you harm?	0	1	2	3	4
17. Being “superalert” or watchful or on guard?	0	1	2	3	4
18. Feeling jumpy or easily startled?	0	1	2	3	4
19. Having difficulty concentrating?	0	1	2	3	4
20. Trouble falling or staying asleep?	0	1	2	3	4

(continued)

PCL-5 SCORE SHEET



HANDOUT 3.2
Patient Health Questionnaire–9 (PHQ-9):
Scale and Scoring

Date: _____ Client: _____

Depressive symptom monitoring is optional in the CPT protocol, but it is encouraged when clients endorse depressive symptomatology. In that case, the PHQ-9 may be given every 2 weeks during the course of CPT to monitor depressive symptoms.

While this instrument alone is not sufficient to diagnose depressive disorders, it gives you a sense of whether an individual is experiencing depressive symptoms and how severe his or her symptoms are.

For your purposes, add up your client's scores on the 9 items provided below. The total score guidelines are as follows:

TOTAL SCORE DEPRESSION SEVERITY

<i>Score</i>	<i>Depression severity</i>
1–4	Minimal depression
5–9	Mild depression
10–14	Moderate depression
15–19	Moderately severe depression
20–27	Severe depression

There is one additional item at the end of the measure that assesses the impact of these symptoms on functioning.

Initial of Client's Last Name: _____

Therapist's Initials: _____ Date: _____ Session: _____

Format of CPT: Individual Group CPT CPT+A

(continued)

The PHQ-9 was developed by Drs. Robert L. Spitzer, Janet B. W. Williams, Kurt Kroenke, and colleagues, with an educational grant from Pfizer, Inc. No permission is required for its use. Reprinted in *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press.

PHQ-9

Over the last 2 weeks, how often have you been bothered by any of the following problems? Read each item carefully, and circle your response.

	<i>Not at all</i>	<i>Several days</i>	<i>More than half the days</i>	<i>Nearly every day</i>
1. Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
3. Trouble falling asleep, staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
6. Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
8. Moving or speaking so slowly that other people could have noticed—or the opposite: being so fidgety or restless that you have been moving around a lot more than usual	0	1	2	3
9. Thoughts that you would be better off dead or thoughts of hurting yourself in some way	0	1	2	3

If you checked off *any* problems, how *difficult* have these problems made it for you to do your work, take care of things at home, or get along with other people?

Not difficult at all

Somewhat difficult

Very difficult

Extremely difficult

HANDOUT 4.1

**Cognitive Processing Therapy
for Posttraumatic Stress Disorder: Contract**

Date: _____ Client: _____

What is cognitive processing therapy?

Cognitive processing therapy (CPT) is a cognitive-behavioral treatment for posttraumatic stress disorder (PTSD) and related problems.

What are the goals of CPT?

The overall goals of CPT are to improve your PTSD symptoms, and any associated symptoms you may have (such as depression, anxiety, guilt, or shame). It also aims to improve your day-to-day living.

What will CPT in this clinic consist of?

CPT in this clinic consists of 6–24 individual (one-on-one) therapy sessions; the average is 12. Each session lasts 50–60 minutes. In these sessions, you will learn about the symptoms of PTSD and the reasons why some people develop it.

You and your therapist will also identify and explore how your trauma or traumas have changed your thoughts and beliefs, and how some of these ways of thinking may keep you “stuck” in your symptoms. CPT does not involve repeatedly reviewing the details of your trauma(s). However, you will be asked to examine your experiences in order to understand how they have affected your thoughts, feelings, and behaviors.

What is expected of me in CPT?

Perhaps the most important expectation of CPT is for you to make a commitment to come to sessions.

In addition, after each session you will be given practice assignments to complete outside the sessions. These assignments are designed to improve your PTSD symptoms more rapidly outside the treatment sessions. You are also encouraged to ask any questions that you might have at any point in doing CPT.

(continued)

What can I expect from my CPT therapist?

At each session, your therapist will help you figure out how your trauma has affected your thoughts and emotions, and help you make changes to feel better and function better.

In order to do this, your therapist will review your practice assignments and share what he or she notices about your trauma-related thoughts, feelings, and behaviors. Your therapist will ask questions to examine what you have been thinking about your trauma(s) and their effects on your life, and will help you to challenge thoughts that might be inaccurate. Your therapist will also teach you skills to change the way you think about events and about yourself and others. Another part of your therapist's job is to notice and point out when you are avoiding working on the trauma, even when you may not notice that you are doing it. Avoidance is a key PTSD symptom that keeps you stuck in nonrecovery.

Can I choose to stop this therapy?

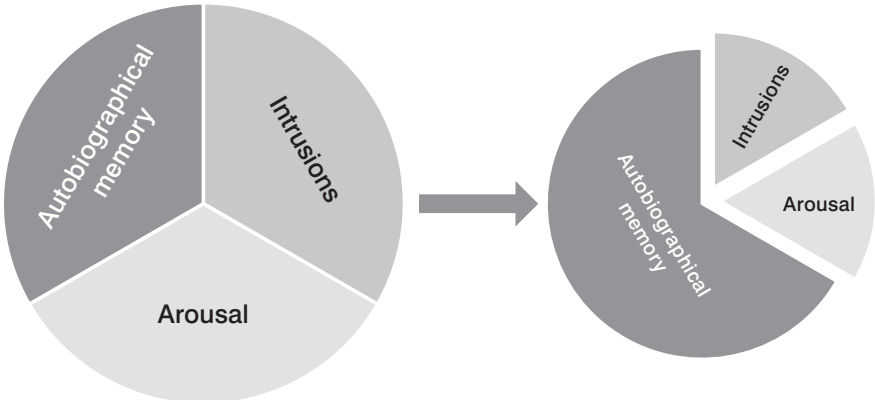
Your decision to do CPT is voluntary. Therefore, you may choose to stop the treatment at any time. If this should happen, you will be asked to come in for one final session to discuss your concerns before terminating.

With my signature, I am indicating that I have reviewed these materials and received information about CPT for PTSD. I commit optimistically to myself, to this treatment, and to the goals listed above. I will receive a copy of this agreement.

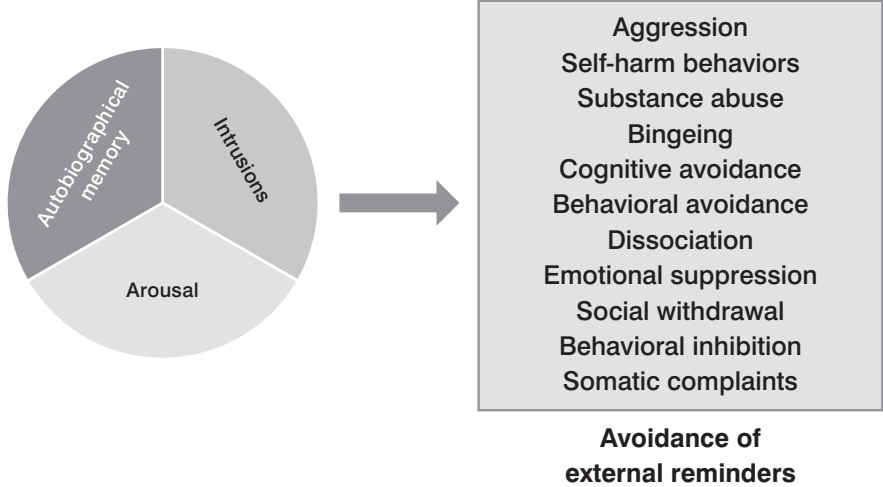
_____	_____
Client signature	Date
_____	_____
Clinician signature	Date

HANDOUT 5.1
Recovery or Nonrecovery from PTSD Symptoms
Following Traumatic Events

In normal recovery, intrusions and emotions decrease over time and no longer trigger each other.



When intrusions occur, natural emotions and arousal run their course and thoughts have a chance to be examined and corrected. It is an active “approach” process of dealing with the event.



However, in those who don't recover, strong negative emotions lead to escape and avoidance. The avoidance prevents the processing of the trauma that is needed for recovery, and it works only temporarily.

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 5.2
What Are Stuck Points?

Stuck Points are:

Black-and-white

Thoughts, not feelings

All-or-nothing

Thoughts behind moral statements or the Golden Rule

“If-then” statements

Not always “I” statements

Concise

HANDOUT 5.3

Practice Assignment after Session 1 of CPT

Date: _____ Client: _____

Please write at least a one-page statement on *why* you think your most distressing traumatic event occurred. You are *not* being asked to write specific details about this event. Write about what you have been thinking about the *cause* of this event.

Also, consider the effects this traumatic event has had on your beliefs about yourself, others, and the world in the following areas: safety, trust, power/control, esteem, and intimacy.

Bring this statement with you to the next session. Also, please read over the two handouts I have given you on PTSD symptoms and Stuck Points (Handouts 5.1 and 5.2), so that you understand the ideas we are talking about.

<p style="text-align: center;">HANDOUT 6.1 Stuck Point Log</p>
--

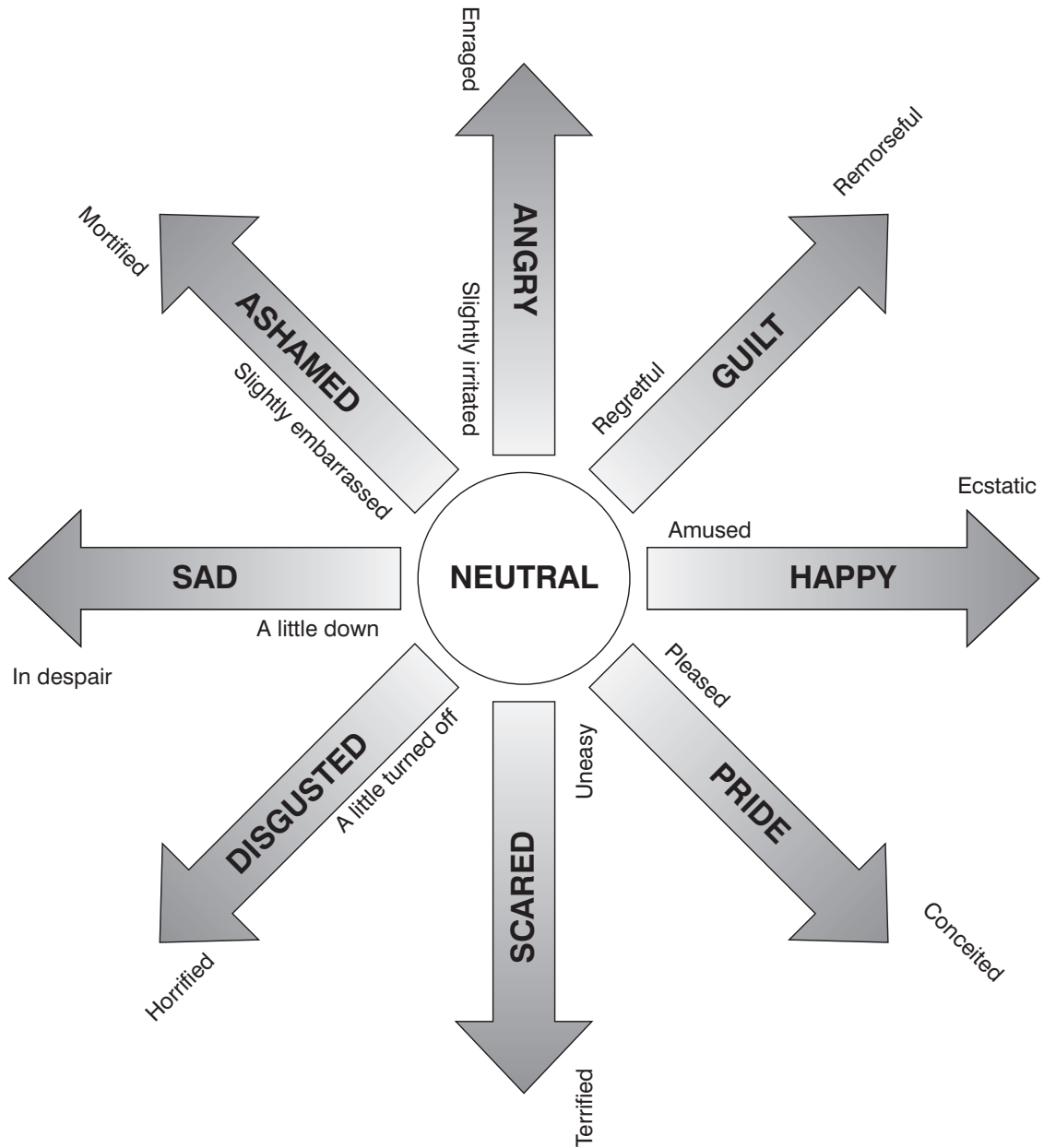
Date: _____ Client: _____

We will be using this Stuck Point Log throughout therapy, and you will always leave it in the front of your therapy binder or workbook. You will add to this log as you recognize Stuck Points after writing your Impact Statement. Throughout therapy, we will add to it or cross off thoughts that you no longer believe.

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 6.2
Identifying Emotions Handout

Date: _____ Client: _____



From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 6.3
ABC Worksheet

Date: _____ Client: _____

Activating Event
A
“Something happens”

Belief/Stuck Point
B
“I tell myself something”

Consequence
C
“I feel something”

--	--	--

Are my thoughts above in column B realistic or helpful? _____

What can I tell myself on such occasions in the future? _____

HANDOUT 6.3A
Sample ABC Worksheet

Date: _____ Client: _____

Activating Event A <i>“Something happens”</i>	Belief/Stuck Point B <i>“I tell myself something”</i>	Consequence C <i>“I feel something”</i>
<i>Shooting a Vietnamese woman while in combat</i>	<i>“I am a bad person because I killed a helpless civilian.”</i>	<i>Guilt and anger at myself</i>

Are my thoughts above in column B realistic or helpful? *No. One mistake does not make me a bad person. People make mistakes, and high-stress situations, like combat zones, increase the probability of such mistakes.*

What can I tell myself on such occasions in the future? *“I may have made mistakes in my life, but that does not make me a bad person. I may have done things that I regret, but I have also done good things in my life.”*

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 6.3B
Sample ABC Worksheet

Date: _____ Client: _____

Activating Event
A
“Something happens”

Belief/Stuck Point
B
“I tell myself something”

Consequence
C
“I feel something”

<i>My uncle raped me</i>	<i>“I let it happen and didn’t tell anyone.”</i>	<i>Guilt and shame</i>
--------------------------	--	------------------------

Are my thoughts above in column B realistic or helpful? _____

What can I tell myself on such occasions in the future? _____

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 6.3C
Sample ABC Worksheet

Date: _____ Client: _____

Activating Event A <i>"Something happens"</i>	Belief/Stuck Point B <i>"I tell myself something"</i>	Consequence C <i>"I feel something"</i>
<i>I build a porch and the railing comes loose.</i>	<i>"I can never do anything right."</i>	<i>Anger at myself and sadness</i>

Are my thoughts above in column B realistic or helpful? *No. It wouldn't hold up in a court of law, because I do some things right.*

What can I tell myself on such occasions in the future? *"There are some things that I do all right. It is not true that I 'never do anything right.'"*

HANDOUT 6.4
Stuck Point Help Sheet

Date: _____ Client: _____

What is a Stuck Point?

Stuck Points are thoughts that you have that keep you stuck from recovering.

- These thoughts may not be 100% accurate.
- Stuck Points may be:
 - Thoughts about your understanding of why the traumatic event happened.
 - Thoughts about yourself, others, and the world that have changed dramatically as a result of the traumatic event.
- Stuck Points are concise statements (but they must be longer than one word—for example, “trust” is not a Stuck Point).
- Stuck Points can often be formatted in an “If–then” structure. Here is an example: “If I let others get close, then I will get hurt.”
- Stuck Points often use extreme language, such as “never,” “always,” or “everyone.”

What is *not* a Stuck Point?

- **Behaviors.** For example, “I fight with my daughter all the time” is not a Stuck Point, because it is describing a behavior. Instead, consider what thoughts you have when you are fighting with your daughter.
- **Feelings.** For example, “I am nervous whenever I go on a date” is not a Stuck Point, because it is describing an emotion and a fact. Instead, consider what you are telling yourself that is making you feel nervous.
- **Facts.** For example, “I witnessed people die” is not a Stuck Point, because this is something that actually happened. Instead, consider what thoughts you had as this happened and what you think about it now.
- **Questions.** For example, “What will happen to me?” is not a Stuck Point, because it is a question. Instead, consider what answer to your question is at the back of your mind, such as “I will not have a future.”
- **Moral statements.** For example, “The criminal justice system should always work” is not a Stuck Point, because it reflects an ideal standard of behavior. Instead, consider how this statement pertains to you specifically, such as “The justice system failed me,” or “I can’t trust the government.”

Examples of Stuck Points

1. If I had done my job better, then other people would have survived.
2. Because I did not tell anyone, I am to blame for the abuse.

(continued)

HANDOUT 6.4 (p. 2 of 2)

3. Because I did not fight against my attacker, the abuse is my fault.
4. I should have known he would hurt me.
5. It is my fault the accident happened.
6. If I had been paying attention, no one would have died.
7. If I hadn't been drinking, it would not have happened.
8. I don't deserve to live when other people lost their lives.
9. If I let other people get close to me, I'll get hurt again.
10. Expressing any emotion means I will lose control of myself.
11. I must be on guard at all times.
12. I should be able to protect others.
13. I must control everything that happens to me.
14. Mistakes are intolerable and cause serious harm or death.
15. No civilians can understand me.
16. If I let myself think about what has happened, I will never get it out of my mind.
17. I must respond to all threats with force.
18. I can never really be a good, moral person again because of the things that I have done.
19. Other people should not be trusted.
20. Other people should not trust me.
21. If I have a happy life, I will be dishonoring my friends.
22. I have no control over my future.
23. The government cannot be trusted.
24. People in authority always abuse their power.
25. I am damaged forever because of the rape.
26. I am unlovable because of [the trauma].
27. I am worthless because I couldn't control what happened.
28. I deserve to have bad things happen to me.
29. I am dirty.
30. I deserved to have been abused.
31. Only people who were there can understand.

HANDOUT 6.5

Practice Assignment after Session 2 of CPT

Please complete the ABC Worksheets (Handout 6.3) to become aware of the connections between events, your thoughts, and your feelings. Complete at least one worksheet each day. Remember to fill out the worksheet as soon after an event as possible, and if you identify any new Stuck Points, add them to the Stuck Point Log (Handout 6.1). Complete at least one worksheet about the traumatic event that is causing you the most PTSD symptoms. Also, please use the Identifying Emotions Handout (Handout 6.2) to help you determine the emotions you are feeling.

HANDOUT 6.6

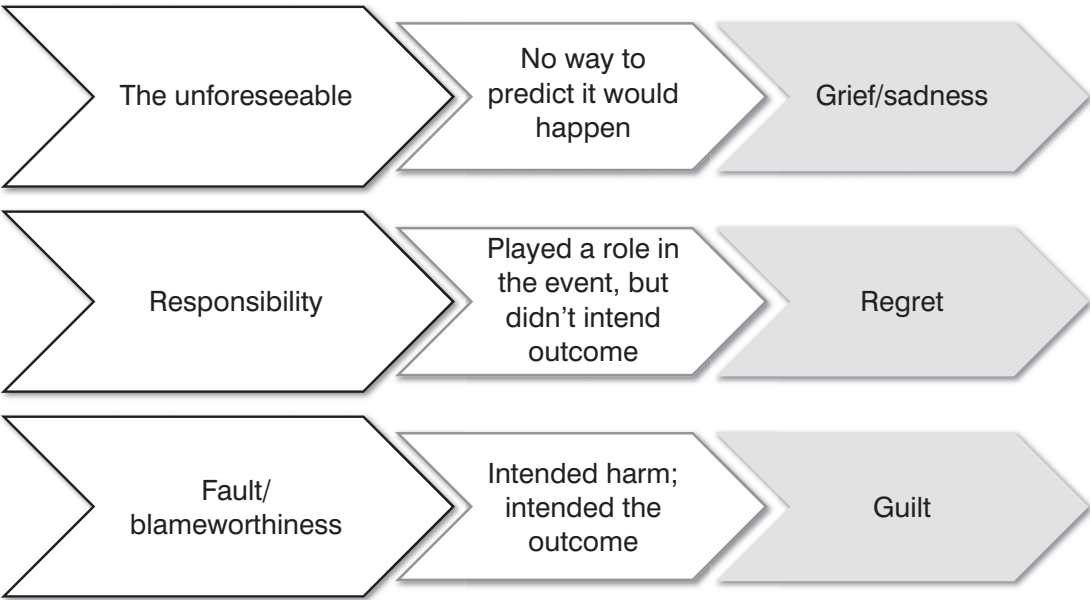
Practice Assignment after Session 3 of CPT

Please continue to self-monitor events, thoughts, and feelings with the ABC Worksheets (Handout 6.3) on a daily basis, to increase your mastery of this skill. You should complete one worksheet each day on the trauma causing you the most distress, or other traumas, but you can do additional worksheet items on day-to-day events. Please put any newly noticed Stuck Points on your Stuck Point Log (Handout 6.1) as you use the ABC Worksheets.

HANDOUT 7.1
Levels of Responsibility Handout

Date: _____ Client: _____

Your role in the traumatic event: What are the facts?



From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 7.2
Challenging Questions Worksheet

Date: _____ Client: _____

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

Belief:

1. What is the evidence for and against this Stuck Point?

For:

Against:

2. Is your Stuck Point a habit or based on facts?

3. In what ways is your Stuck Point not including all of the information?

(continued)

HANDOUT 7.2 (p. 2 of 2)

-
-
-
4. Does your Stuck Point include all-or-none terms?
5. Does the Stuck Point include words or phrases that are extreme or exaggerated (such as "always," "forever," "never," "need," "should," "must," "can't," and "every time")?
6. In what way is your Stuck Point focused on just one piece of the story?
7. Where did this Stuck Point come from? Is this a dependable source of information on this Stuck Point?
8. How is your Stuck Point confusing something that is possible with something that is likely?
9. In what ways is your Stuck Point based on feelings rather than facts?
10. In what ways is this Stuck Point focused on unrelated parts of the story?

HANDOUT 7.2A
Sample Challenging Questions Worksheet

Date: _____ Client: _____

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

Belief:

It is my fault that my uncle had sex with me. [Therapist asked whether the Stuck Point had a hidden word, "all."]

1. What is the evidence for and against this Stuck Point?

For:

~~*I must have done something that made him think it was OK.*~~ [After more questions by therapist about fault and intent:] *There is no evidence for its being my fault.*

Against:

I didn't want to do it, and I told him so. He threatened to hurt my little sister. He said no one would believe me. He was an adult, and I was a child. He was bigger and stronger than me.

2. Is your Stuck Point a habit or based on facts?

Habit. I have been saying this to myself for 25 years.

3. In what ways is your Stuck Point not including all of the information?

How could it be my fault? I didn't even know what sex was when he started. You don't do that to kids. Just because he read me stories and babysat me didn't give him the right to do that.

4. Does your Stuck Point include all-or-none terms?

Well, we talked about the hidden word "all." I thought it was all my fault and didn't even think about really blaming him. I was too scared of him, and my mother loved him.

5. Does the Stuck Point include words or phrases that are extreme or exaggerated (such as "always," "forever," "never," "need," "should," "must," "can't," and "every time")?

"All my fault."

6. In what way is your Stuck Point focused on just one piece of the story?

Because he did it to me, I assumed it was about me. I didn't think about the fact that I was a child or that what he did was a crime. I told him "No," and he threatened my family.

(continued)

HANDOUT 7.2A (p. 2 of 2)

7. Where did this Stuck Point come from? Is this a dependable source of information on this Stuck Point?

Mostly from me, but I think he said things that made it seem like it was my fault. I was so pretty, that he couldn't keep his hands off of me, I was special, etc.

8. How is your Stuck Point confusing something that is possible with something that is likely?

N/A.

9. In what ways is your Stuck Point based on feelings rather than facts?

Because I felt guilty and shameful, I thought it must be my fault.

10. In what ways is this Stuck Point focused on unrelated parts of the story?

I must have thought that I had more control over the situation than I did.

HANDOUT 7.2B
Sample Challenging Questions Worksheet

Date: _____ Client: _____

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

Belief:

It is my fault that my brother was killed in the car accident, because I should have done things differently.

1. What is the evidence for and against this Stuck Point?

For:

I should have made him wear his seat belt. He refused, and I thought it was only a few blocks so it didn't really matter. We were laughing and talking.

Against:

I didn't cause the crash. The other person was texting and ran the red light. The officer said that even with a seat belt, being hit from the side like that, my brother would have been killed anyway.

2. Is your Stuck Point a habit or based on facts?

Habit. I have been blaming myself for 2 years. I guess it was wishful thinking.

3. In what ways is your Stuck Point not including all of the information?

When the light turned green, I did look both ways before I entered the intersection. He was coming so fast that there was nowhere for me to go.

4. Does your Stuck Point include all-or-none terms?

I thought it was all my fault because my brother died, and I didn't even think about the driver of the other car. I kept saying I should have done something different to avoid the crash.

5. Does the Stuck Point include words or phrases that are extreme or exaggerated (such as "always," "forever," "never," "need," "should," "must," "can't," and "every time")?

"All my fault." "Should have done things differently."

6. In what way is your Stuck Point focused on just one piece of the story?

I was focused on the fact that my brother refused to put on his seat belt, and I didn't really listen when the officer said that with that kind of side crash, it wouldn't have made a difference. I was also focused on the fact that we were talking and laughing, but I overlooked the fact that I did look both ways.

(continued)

HANDOUT 7.2B (p. 2 of 2)

7. Where did this Stuck Point come from? Is this a dependable source of information on this Stuck Point?

The Stuck Point came from me, but when it first happened my parents' first reaction was that it was my fault, and that I shouldn't have started the car until he put his seat belt on. Later they were more supportive, but I think they were so upset at the time that they took it out on me.

8. How is your Stuck Point confusing something that is possible with something that is likely?

I kept thinking that I could have done something different to avoid the crash. Maybe there was something I could have done, but it isn't likely.

9. In what ways is your Stuck Point based on feelings rather than facts?

Because I felt guilty, I thought it must be my fault.

10. In what ways is this Stuck Point focused on unrelated parts of the story?

I was focused completely on the seat belt. I didn't kill my brother. The other driver did. He shouldn't have been texting and driving too fast. Focusing on the fact that we were laughing was irrelevant. I was paying attention and following the rules.

HANDOUT 7.3
Guide for the Challenging Questions Worksheet

Date: _____ Client: _____

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

Belief: *Put a Stuck Point here. You can use your Stuck Point Log to find one.*

*The belief should **not** be a feeling or behavior, and should **not** be too vague. Use “If–then” statements if possible.*

1. What is the evidence for and against this Stuck Point?

*Evidence consists of the type of facts that will hold up in court. We are not challenging that the event happened. We are looking for evidence that **supports** and does **not support** the Stuck Point you have given above.*

For: *Do **not** use another Stuck Point! Make sure you are identifying facts.*

Against: *Only **one** exception is needed to make a belief **not** a fact. A fact is 100% and absolute. If you can identify one exception to your Stuck Point, then it is not a fact, and therefore would not hold up in court.*

2. Is your Stuck Point a habit or based on facts?

*Have you been telling yourself this belief for so long that it **feels** like a fact? It’s like advertising: After a while, you start to believe it. Is this belief something that you have been in the habit of telling yourself for a long time?*

3. In what ways is your Stuck Point not including all of the information?

*Is it **possible** that your Stuck Point is unrealistic or not **completely** accurate or not **completely** true? Does your belief reflect all the facts of the situation? Remember the context of the trauma.*

4. Does your Stuck Point include all-or-none terms?

Does your Stuck Point reflect all-or-none, black-and-white categories? Are things all good or all bad? Are you missing the gray areas in between? Example: If your performance falls short of perfect, you see yourself as a failure.

5. Does the Stuck Point include words or phrases that are extreme or exaggerated (such as “always,” “forever,” “never,” “need,” “should,” “must,” “can’t,” and “every time”)?

These words or phrases may be hidden. Example: “Men can’t be trusted” is actually “All men can’t be trusted.”

(continued)

6. In what way is your Stuck Point focused on just one piece of the story?

This question is about deciding that one piece of information from the event caused the event to happen. Then, you use this one aspect to create your Stuck Point. Example: "If I had been stronger, then this wouldn't have happened." Now think about drawing a pie chart and showing one small slice of that pie as the one aspect you are focusing on. You are probably assigning 100% of the "blame" or "cause" to this "slice" and discounting all the remaining factors (other slices) in the rest of the pie. Other slices might include that you were outnumbered, the perpetrator had a weapon, you were taken by surprise, there were no other options at the time, or similar factors. Why are these other factors/slices not considered here as contributory? Are you discounting them and only focusing on the one factor/slice?

7. Where did this Stuck Point come from? Is this a dependable source of information on this Stuck Point?

Think about the time period when the event happened. Who were you at the time (a scared 20-year-old in combat, a child victimized by an adult, etc.)? Your Stuck Point may be based on a thought that you developed when you were scared or very young. You have retained that Stuck Point all these years, based on how you thought at the time. Or think about the enemy/perpetrator/other sources: Are these people reliable? Can they be trusted to make judgments about the event (or you)? Your Stuck Point might be a statement told to you by a perpetrator. Is a perpetrator to be trusted (reliable) to make this statement? Would we expect that a perpetrator is truthful? Consider your source.

8. How is your Stuck Point confusing something that is possible with something that is likely?

*This question is best for a Stuck Point that is focused on the present or the future. It asks you, "What is the likelihood or percentage/chance that the Stuck Point will happen again?" An example of a present or future-oriented Stuck Point would be "If I trust others, then I'll get hurt." It may actually be a low probability, but you are living your life as if it is a certainty. Yes, it **could** happen, but you are living as if it **will** happen. Of course, in a dangerous environment, you may have to consider everything as a high probability, because the consequences (death or injury) are great. But are you taking into consideration that you don't need to hold this same degree of probability in **all** environments? In other words, are you applying the Stuck Point as if it has a high probability (a certainty) of happening again in **all** situations now? For example, think about driving. We all know that many people die every year in car accidents, yet we still drive. We do this because although we are aware that we could die in a car accident, we don't live as if it **will** happen.*

9. In what ways is your Stuck Point based on feelings rather than facts?

*This question represents the idea that if you **feel** something is true, then it must be. For example, think about hypervigilance: Because you **feel** uncomfortable or under threat in a crowd, you assume (or develop the belief) that it is dangerous. This becomes "I don't like crowds," which translates into the Stuck Point "I am never safe in a crowd," or "If I am in a crowd, then I will be harmed." Another example is that if you **feel** guilty, then you assume you must be at fault.*

10. In what ways is this Stuck Point focused on unrelated parts of the story?

This question is about focusing the cause or blame on something that had nothing to do with the event's happening. For example, "I wore a red dress; therefore, I was assaulted." This is different from question 6 because it is about something that was irrelevant, whereas in question 6 the factor may have contributed to the event but is not wholly to blame. However, even in question 6, the piece may be incorrect rather than factual.

HANDOUT 7.4

Practice Assignment after Session 4 of CPT

Please choose one Stuck Point each day, and then answer the questions on the Challenging Questions Worksheet (Handout 7.2) with regard to this Stuck Point. Please work on Stuck Points related directly to the trauma first (e.g., “It is my fault,” “I could have prevented it,” or “If I had done X, it would not have happened”). Your therapist will give you extra copies of the Challenging Questions Worksheets, so you can work on multiple Stuck Points. Completed examples of this worksheet are provided as Handouts 7.2a and 7.2b, and a Guide to the Challenging Questions Worksheet (Handout 7.3) is also available.

HANDOUT 7.5
Patterns of Problematic Thinking Worksheet

Date: _____ Client: _____

Listed below are several different patterns of problematic thinking that people use in different life situations. These patterns often become automatic, habitual thoughts that cause people to engage in self-defeating behavior. Considering your own Stuck Points, or samples from your everyday thinking, find examples for each of these patterns. Write in the Stuck Point or typical thought under the appropriate pattern, and describe how it fits that pattern. Think about how that pattern affects you.

1. **Jumping to conclusions** or predicting the future.

2. **Exaggerating or minimizing** a situation (blowing things way out of proportion or shrinking their importance inappropriately).

3. **Ignoring important parts** of a situation.

4. **Oversimplifying** things as “good–bad” or “right–wrong.”

5. **Overgeneralizing** from a single incident (e.g., a negative event is seen as a never-ending pattern).

6. **Mind reading** (assuming that people are thinking negatively of you when there is no definite evidence for this).

7. **Emotional reasoning** (using your emotions as proof—e.g., “I feel fear, so I must be in danger”).

HANDOUT 7.5A

Sample Patterns of Problematic Thinking Worksheet

Date: _____ Client: _____

Listed below are several different patterns of problematic thinking that people use in different life situations. These patterns often become automatic, habitual thoughts that cause people to engage in self-defeating behavior. Considering your own Stuck Points, or samples from your everyday thinking, find examples for each of these patterns. Write in the Stuck Point or typical thought under the appropriate pattern, and describe how it fits that pattern. Think about how that pattern affects you.

1. **Jumping to conclusions** or predicting the future.

[Victim of childhood sexual abuse:] *If a man is alone with a child, then the man will hurt the child. But I know my husband will not hurt my kids so this belief is causing problems in my marriage*

2. **Exaggerating or minimizing** a situation (blowing things way out of proportion or shrinking their importance inappropriately).

[Traveler:] *I saw a dead body and riots, but I didn't get hurt and others saw worse, so my reaction to the situation was wrong. I was weak.*

3. **Ignoring important parts** of a situation.

[Robbery victim:] *I keep forgetting the fact that the perpetrator had a gun, which is important information about how much control I had.*

4. **Oversimplifying** things as “good–bad” or “right–wrong.”

[Police officer:] *Not everyone is all good or all bad. I may have done some things in my life that were not that good, but that does not make me a bad person.*

5. **Overgeneralizing** from a single incident (e.g., a negative event is seen as a never-ending pattern).

[Adult rape victim:] *I was raped by a man, so all men are dangerous. Maybe I am using this belief to stay away from men?*

6. **Mind reading** (in particular, assuming that people are thinking negatively of you when there is no definite evidence for this).

[Victim of childhood physical abuse:] *My dad yells now, so I assume he must be angry. But it's not true a lot of the times, because he yells sometimes because he is deaf in one ear and going deaf in another. He yells because he doesn't know he is yelling.*

7. **Emotional reasoning** (using your emotions as proof—e.g., “I feel fear, so I must be in danger”).

[Survivor of a traumatic bereavement:] *I feel guilt over my friend's death, so I must have done something wrong.*

HANDOUT 7.6

Practice Assignment after Session 5 of CPT

Your practice assignment is to consider your Stuck Points, as well as some examples of your everyday thinking, and to find ones that fit into each relevant thinking pattern on the Patterns of Problematic Thinking Worksheet (Handout 7.5). Each day, list a Stuck Point or example of everyday thinking under each pattern, and think about ways in which your reactions to the traumatic event may be affected by these habitual patterns. A completed example of this worksheet is provided as Handout 7.5a.

HANDOUT 8.1
Challenging Beliefs Worksheet

Date: _____ Client: _____

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
	<p data-bbox="262 1149 669 1323">C. Emotion(s) Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.</p>	<p data-bbox="669 625 1257 657">Evidence for?</p> <p data-bbox="669 698 1257 730">Evidence against?</p> <p data-bbox="669 771 1257 803">Habit or fact?</p> <p data-bbox="669 844 1257 876">Not including all information?</p> <p data-bbox="669 917 1257 950">All-or-none?</p> <p data-bbox="669 990 1257 1023">Extreme or exaggerated?</p> <p data-bbox="669 1063 1257 1096">Focused on just one piece?</p> <p data-bbox="669 1136 1257 1169">Source dependable?</p> <p data-bbox="669 1209 1257 1242">Confusing possible with likely?</p> <p data-bbox="669 1282 1257 1315">Based on feelings or facts?</p> <p data-bbox="669 1356 1257 1388">Focused on unrelated parts?</p>	<p data-bbox="1257 625 1644 657">Jumping to conclusions:</p> <p data-bbox="1257 698 1644 730">Exaggerating or minimizing:</p> <p data-bbox="1257 771 1644 803">Ignoring important parts:</p> <p data-bbox="1257 844 1644 876">Oversimplifying:</p> <p data-bbox="1257 917 1644 950">Overgeneralizing:</p> <p data-bbox="1257 990 1644 1023">Mind reading:</p> <p data-bbox="1257 1063 1644 1096">Emotional reasoning:</p>	<p data-bbox="1644 966 2047 1031">G. Re-Rate Old Thought/Stuck Point Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%.</p> <p data-bbox="1644 1047 2047 1144">H. Emotion(s) Now what do you feel? Rate it from 0 to 100%.</p>

HANDOUT 8.1A
Sample Challenging Beliefs Worksheet

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
<i>I have to ride on a plane.</i>	<i>Air travel is dangerous.—75%</i>	<p>Evidence for? <i>People have been killed.</i></p> <p>Evidence against? <i>Airport security has been increased.</i></p> <p>Habit or fact? <i>It is a habit.</i></p> <p>Not including all information? <i>The fact that planes fly every day and nothing happens to them.</i></p> <p>All-or-none? <i>Yes, I am making a statement that all flights are dangerous.</i></p> <p>Extreme or exaggerated? <i>Yes. I am exaggerating the risk.</i></p> <p>Focused on just one piece? <i>I notice in the news when there is a crash, but I don't pay attention to all of the flights that travel safely every day.</i></p> <p>Source dependable? <i>No, I misinterpreted turbulence.</i></p> <p>Confusing possible with likely? <i>Yes, I have been saying that it is likely that the plane will crash.</i></p> <p>Based on feelings or facts? <i>I am letting myself believe this because I feel scared and not because it is realistic.</i></p> <p>Focused on unrelated parts? <i>Many people I know have flown and haven't crashed.</i></p>	<p>Jumping to conclusions: <i>Yes, I assume that if I fly, the plane <u>will</u> crash.</i></p> <p>Exaggerating or minimizing: <i>I am exaggerating the possibility.</i></p> <p>Ignoring important parts: <i>All the thousands of planes that fly every day and don't crash.</i></p> <p>Oversimplifying:</p> <p>Overgeneralizing:</p> <p>Mind reading:</p> <p>Emotional reasoning: <i>Just because I am anxious on flights doesn't mean that flying is dangerous</i></p>	<p><i>The chances are very small that I will be killed or hurt while flying.—95%</i></p> <p><i>Even if the plane blew up, I could not do anything about it.—80%</i></p>
C. Emotion(s)				
Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%. <i>Afraid—100%</i> <i>Helpless—75%</i> <i>Anxious—75%</i>		<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> <p>Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%. <i>15%</i></p> <p style="text-align: center;">H. Emotion(s)</p> <p>Now what do you feel? Rate it from 0 to 100%. <i>Afraid—40%</i> <i>Helpless—5%</i> <i>Anxious—10%</i></p>		

HANDOUT 8.1B
Sample Challenging Beliefs Worksheet

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
I led my company into an ambush, and many of my men were killed.	I should have prevented it.—100%	<p>Evidence for? <i>People were killed.</i></p> <p>Evidence against? <i>There was no way to know that there was going to be an ambush—that's the nature of an ambush. To think I should have known it was coming is to ignore the fact that it was an ambush.</i></p> <p>Habit or fact? <i>A habit. I have been saying this for years.</i></p> <p>Not including all information? <i>It was an ambush. We had no intel that there were insurgents in that area.</i></p> <p>All-or-none? <i>No one else would have led their company into an ambush.</i></p> <p>Extreme or exaggerated? <i>Extreme to say I should have prevented it when I didn't know.</i></p> <p>Focused on just one piece? <i>That I am responsible for my men.</i></p> <p>Source dependable? <i>I am the source of the self-blame. No one else blamed me.</i></p> <p>Confusing possible with likely?</p> <p>Based on feelings or facts? <i>Feelings.</i></p> <p>Focused on unrelated parts? <i>That I was their leader. I couldn't predict the future.</i></p>	<p>Jumping to conclusions: <i>That I could have prevented it.</i></p> <p>Exaggerating or minimizing: <i>Exaggerating my control in the situation.</i></p> <p>Ignoring important parts: <i>I haven't been paying attention to the fact that it was an ambush. There was no way I could have known.</i></p> <p>Oversimplifying:</p> <p>Overgeneralizing:</p> <p>Mind reading:</p> <p>Emotional reasoning: <i>Because I feel guilty, I <u>am</u> guilty.</i></p>	<p><i>There was no way to see it coming at the time.—85%</i></p> <p><i>I did the best I could, given the circumstances.—90%</i></p>
	<p style="text-align: center;">C. Emotion(s)</p> <p>Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.</p> <p><i>Guilty—100%</i></p> <p><i>Helpless—100%</i></p> <p><i>Anxious—75%</i></p>			<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> <p>Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%.</p> <p><i>10%</i></p> <p style="text-align: center;">H. Emotion(s)</p> <p>Now what do you feel? Rate it from 0 to 100%.</p> <p><i>Guilty—40%</i></p> <p><i>Helpless—80%</i></p> <p><i>Anxious—40%</i></p>

HANDOUT 8.1C
Sample Challenging Beliefs Worksheet

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
I am putting off doing my therapy practice assignment.	If I let myself feel angry, I'll be out of control.—50%	<p>Evidence for? <i>I have acted aggressively in the past when I felt angry.</i></p> <p>Evidence against? <i>I have never been really destructive when I was angry. It is my choice how I act when I feel angry. I can always take a break or leave the situation.</i></p> <p>Habit or fact? <i>Habit.</i></p> <p>Not including all information? <i>That I am not totally out of control. I am still making choices on how to behave.</i></p> <p>All-or-none? <i>Yes, no control.</i></p> <p>Extreme or exaggerated? <i>It is exaggerated to say that I would be out of control, I have some control.</i></p> <p>Focused on just one piece? <i>That if I do my out-of-session therapy assignment, I will be angry and out of control.</i></p> <p>Source dependable? <i>No, my assumption.</i></p> <p>Confusing possible with likely? <i>Not likely I will lose control just from filling out a worksheet.</i></p> <p>Based on feelings or facts? <i>Feelings.</i></p> <p>Focused on unrelated parts? <i>It's just a worksheet, not the trauma.</i></p>	<p>Jumping to conclusions: <i>I am jumping to conclusions to assume that I will have no control if I feel my feelings.</i></p> <p>Exaggerating or minimizing: <i>I am equating anger with rage instead of what it is—unpleasant.</i></p> <p>Ignoring important parts: <i>I am disregarding the times I have felt angry and maintained control.</i></p> <p>Oversimplifying: <i>Yes, feeling angry is bad.</i></p> <p>Overgeneralizing: <i>Just because I have been aggressive in the past doesn't mean I will do it with a worksheet.</i></p> <p>Mind reading:</p> <p>Emotional reasoning: <i>Anger always leads to aggression.</i></p>	<p><i>Anger can be expressed without aggression.—60%</i></p> <p><i>Anger is an emotion like sadness. I can let myself feel that and still maintain control over my behaviors.—60%</i></p>
	<p style="text-align: center;">C. Emotion(s)</p> <p>Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.</p> <p><i>Angry—50%</i></p> <p><i>Afraid—95%</i></p>			<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> <p>Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%.</p> <p><i>20%</i></p>
				<p style="text-align: center;">H. Emotion(s)</p> <p>Now what do you feel? Rate it from 0 to 100%.</p> <p><i>Angry—30%</i></p> <p><i>Afraid—35%</i></p>

HANDOUT 8.1D
Sample Challenging Beliefs Worksheet

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
A friend wants to set me up for a date with someone she knows.	I can't get involved with anyone and let anyone close enough to see how restricted my life has become.—75%	<p>Evidence for? <i>One person I told about the assault while we were dating was very supportive at the time, but became more and more distant after that and finally stopped calling altogether.</i></p> <p>Evidence against? <i>My friends and family have been supportive.</i></p> <p>Habit or fact? <i>Habit.</i></p> <p>Not including all information? <i>My friend wouldn't set me up with a mean person.</i></p> <p>All-or-none? <i>Most healthy people would not run from a relationship.</i></p> <p>Extreme or exaggerated? <i>I am making assumptions about how other people will react.</i></p> <p>Focused on just one piece? <i>That he will judge me.</i></p>	<p>Jumping to conclusions: <i>Yes, assuming that it will go badly.</i></p> <p>Exaggerating or minimizing: <i>Because one date may have had problems, this doesn't mean that others will.</i></p> <p>Ignoring important parts: <i>That person was not healthy or secure.</i></p> <p>Oversimplifying: <i>If I tell someone who can't deal with it, it is not necessarily bad, because I could find out something important about the relationship.</i></p> <p>Overgeneralizing: <i>Same as above. One bad experience doesn't mean that everyone is the same. I don't have to talk about my restricted life.</i></p> <p>Mind reading: <i>Yes, I am assuming what he thinks, and I haven't even met him yet.</i></p> <p>Emotional reasoning: <i>Because I am scared, I assume that it will go badly.</i></p>	<p>A date could tell me they don't want anything to do with me because I am dealing with having been assaulted.—60</p> <p><i>Some people have been very supportive.—70%</i></p>
	<p style="text-align: center;">C. Emotion(s)</p> <p>Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.</p> <p><i>Fearful—50%</i></p> <p><i>Sad—80%</i></p> <p><i>Angry—50%</i></p>	<p>Source dependable? <i>Coming from past negative experience and from an unhealthy person.</i></p> <p>Confusing possible with likely? <i>It is possible that he won't like me, but it is possible I won't like him either.</i></p> <p>Based on feelings or facts? <i>Feelings.</i></p> <p>Focused on unrelated parts? <i>Just because I was a victim before doesn't mean that everyone will judge me. Maybe they would judge the rapist.</i></p>		<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> <p>Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%.</p> <p><i>50%</i></p>
	<p style="text-align: center;">H. Emotion(s)</p> <p>Now what do you feel? Rate it from 0 to 100%.</p> <p><i>Fearful—25%</i></p> <p><i>Sad—40%</i></p> <p><i>Angry—10%</i></p>			

HANDOUT 8.1E
Sample Challenging Beliefs Worksheet

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. Rate your belief in this thought/Stuck Point from 0 to 100%. (How much do you believe this thought?)	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
My lieutenant sent us down a road that he knew was filled with insurgents. Four friends were killed because of him.	He got them killed.—100%	<p>Evidence for? <i>They are dead!</i></p> <p>Evidence against? <i>He was probably given an order to send us there because they needed the supplies.</i></p> <p>Habit or fact? <i>He didn't actually kill them.</i></p> <p>Not including all information? <i>Insurgents killed them.</i></p> <p>All-or-none? <i>Yes.</i></p> <p>Extreme or exaggerated? <i>I guess. The order didn't seem to make sense, though—why did we have to go then? And there was a pretty good chance we all could have made it.</i></p> <p>Focused on just one piece? <i>I guess I don't know if he had pressure (orders) to send us there right then.</i></p> <p>Source dependable? <i>My assumption.</i></p> <p>Confusing possible with likely?</p> <p>Based on feelings or facts? <i>Outrage at not understanding why he made that call.</i></p> <p>Focused on unrelated parts? <i>That it was his fault. He didn't intend for them to get killed.</i></p>	<p>Jumping to conclusions: <i>I guess I don't know what he was thinking when he ordered us there.</i></p> <p>Exaggerating or minimizing: <i>Yes.</i></p> <p>Ignoring important parts: <i>I don't really know why he made that call.</i></p> <p>Oversimplifying: <i>We had made the run before there, even though it was really dangerous.</i></p> <p>Overgeneralizing:</p> <p>Mind reading: <i>I am mind-reading his intentions.</i></p> <p>Emotional reasoning: <i>I was angry and blamed him.</i></p>	<p><i>I hate that my friends died, and although it didn't seem critical to make that run, I don't know what the lieutenant was thinking or responding to —95%</i></p> <p><i>It was really risky, but we had made it safely four times previously.—90%</i></p>
	<p style="text-align: center;">C. Emotion(s)</p> <p>Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.</p> <p><i>Angry—100%</i></p>	<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> <p>Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%.</p> <p><i>40%</i></p>	<p style="text-align: center;">H. Emotion(s)</p> <p>Now what do you feel? Rate it from 0 to 100%.</p> <p><i>Relieved, not as angry—60%</i></p>	

HANDOUT 8.2

Practice Assignment after Session 6 of CPT

Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. You can also use the Challenging Beliefs Worksheets to challenge any negative or problematic thoughts and related emotions you may have about day-to-day events.

HANDOUT 8.3
Safety Issues Module

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

PRIOR EXPERIENCE

Negative	Positive
If you repeatedly experienced dangerous and uncontrollable life situations, you may have developed negative beliefs about your ability to protect yourself from harm. A new traumatic event may seem to confirm those beliefs.	If you have had positive prior experiences, you may develop the belief that you have control over most events and can protect yourself from harm. The traumatic event may have shattered this belief.
Symptoms Associated with Negative Safety Beliefs about the Self	
<ul style="list-style-type: none"> • Chronic and persistent anxiety • Intrusive thoughts about themes of danger • Irritability • Startled responses or physical arousal • Intense fears related to future victimization 	
Examples of Possible Stuck Points	
<p>“I can’t protect myself from danger.”</p> <p>“If I go out, I will be hurt.”</p> <p>“When I feel fear, that means I am in danger.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	A possible alternative thought may be . . .
“It can’t happen to me,” then you will need to resolve the conflict between this belief and the traumatic event.	“It is unlikely to happen again, but the possibility exists. Even if it does, I have more skills I can use to manage my reactions.”
“I can protect myself from any harm,” then you will need to resolve the conflict between your prior beliefs and the traumatic event.	“I do not have control over everything that happens to me, but I can take precautions to reduce the risk of future traumatic events.”
“I cannot protect myself,” then the new traumatic event will seem to confirm these beliefs. New beliefs must be developed that are more balanced regarding your ability to keep yourself safe.	“I do have some ability to keep myself safe, and I can take steps to protect myself from harm.”

(continued)

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

PRIOR EXPERIENCE

Negative	Positive
If you experienced people as dangerous in early life, or if you believed violence to be a normal way of relating, the new traumatic event will seem to confirm these beliefs.	If you experienced people as safe in early life, you may expect others to keep you safe and not cause harm, injury, or loss. The traumatic event may have caused a disruption in this belief.
Symptoms Associated with Negative Safety Beliefs about Others	
<ul style="list-style-type: none"> • Avoidant or phobic responses • Social withdrawal 	
Examples of Possible Stuck Points	
<p>“The world is very dangerous everywhere.”</p> <p>“People will always try to harm me.”</p> <p>“There is nowhere safe to be.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	Possible alternative thoughts may be . . .
“Others are out to harm me and most people will hurt me if they can,” then you will need to modify this belief, or it will be impossible to have trusting, happy relationships with others.	“There are some people out there who are dangerous, but not everyone is out to harm me in some way.”
“I will never be hurt by others,” then you will need to resolve the conflict between this belief and the victimization.	“There may be some people who will try to harm me, but not everyone I meet will hurt me. I can take precautions to reduce the likelihood that others can hurt me.”

HANDOUT 8.4

Practice Assignment after Session 7 of CPT

Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. Also, please read over the Safety Issues Module (Handout 8.3), and think about how your prior beliefs were affected by your trauma. If you have safety issues related to yourself or others, complete at least one worksheet to confront those beliefs. Use the remaining sheets for other Stuck Points on your Stuck Point Log (Handout 6.1) or for distressing events that have occurred recently.

HANDOUT 9.1
Trust Issues Module

Trust Beliefs Related to SELF: The belief that you can trust or rely on your own judgments and decisions. Trusting yourself is an important building block for developing healthy, trusting relationships with others

PRIOR EXPERIENCE

Negative	Positive
If you had prior experiences where you were blamed for negative events, you may have developed negative beliefs about your ability to make decisions or judgments about situations or people. A new traumatic event may seem to confirm these beliefs.	If you had prior experiences that led you to believe that you had great judgment, the traumatic event may have undercut this belief.
Symptoms Associated with Negative Trust Beliefs about the Self	
<ul style="list-style-type: none"> • Feelings of self-betrayal • Anxiety • Confusion • Excessive caution • Inability to make decisions • Self-doubt and excessive self-criticism 	
Examples of Possible Stuck Points	
<p>“I can’t make good decisions, so I let others make decisions for me.”</p> <p>“Because I am a poor judge of character, I can’t tell who can be trusted.”</p> <p>“If I make choices, then they never work out.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	A possible alternative thought may be . . .
“I cannot trust my judgment” or “I have bad judgment,” the recent traumatic event may have reinforced these beliefs. It is important to understand that the traumatic event was not your fault and that your decisions did not cause the traumatic event.	<p>“I can still trust my judgment even though it’s not perfect.”</p> <p>“Even if I misjudged this person or situation, I realize that I cannot always realistically predict what others will do or how a situation may turn out.”</p>

(continued)

HANDOUT 9.1 (p. 2 of 3)

If you previously believed that . . .	A possible alternative thought may be . . .
"I have perfect judgment, and I never make bad decisions," then the traumatic event may have shattered this belief. New beliefs need to reflect the possibilities that you can make mistakes but still have good judgment, and that mistakes in judgment cannot always be blamed as the reason why traumatic events occur.	"No one has perfect judgment. I did the best I could in an unpredictable situation, and I can still trust my ability to make decisions even though it is not perfect." "My bad decision did not cause the event to happen."

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

PRIOR EXPERIENCE

Negative	Positive
If you were betrayed in early life, you may have developed the generalized belief that "No one can be trusted." A new traumatic event may serve to confirm this belief, especially if you were hurt by an acquaintance.	If you had particularly good experiences growing up, you may have developed the belief that "All people can be trusted." The traumatic event may have shattered this belief.

POSTTRAUMATIC EXPERIENCE

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

Symptoms Associated with Negative Trust Beliefs about Others
<ul style="list-style-type: none">• Pervasive sense of disillusionment and disappointment in others.• Fear of betrayal or abandonment.• Anger and rage at betrayers.• After repeated betrayals, negative beliefs so rigid that even people who are trustworthy may be viewed with suspicion.• Fear of close relationships; particularly when trust is beginning to develop, active anxiety and fear of being betrayed.

(continued)

HANDOUT 9.1 (p. 3 of 3)

Examples of Possible Stuck Points

- “No one can be trusted.”
- “People in authority will always take advantage of you.”
- “If I trust someone, they will hurt me.”
- “If I get close to someone, they will leave.”

POSSIBLE RESOLUTIONS

If you previously believed that . . .	Possible alternative thoughts may be . . .
“No one can be trusted,” which was seemingly confirmed by the traumatic event, then you need to adopt new beliefs that will allow you to enter into new relationships from a neutral position that allows you to see whether various kinds of trust can be built.	“Although I may find some people to be untrustworthy in some ways, I cannot assume that everyone is always untrustworthy.” “Trusting another involves some risk, but I can protect myself by developing trust slowly and including what I learn about that person as I get to know him or her.”
“Everyone can be trusted,” then the traumatic event will have shattered this belief. To avoid becoming suspicious of the trustworthiness of others, including those you used to trust, you will need to understand that trust is not an either-or matter.	“I may not be able to trust everyone in every way, but that doesn’t mean I have to stop trusting the people I used to trust.”
“I can trust my family and friends,” then the traumatic event may have shattered your beliefs about the trustworthiness of your support system when these persons did not act the way you wanted them to after they learned about the traumatic event. Before you assume that you cannot trust anyone in your support system, it is important to consider why these people may have reacted the way they did. Many people do not know how to respond when someone they care about is traumatized, and they may have been reacting out of ignorance. Some people may have responded out of fear or denial, because what has happened to you made them feel vulnerable and may have affected their own beliefs.	“Trust is not an all-or-none concept. Some people may be more trustworthy than others.” “It may help to tell others what I need from them and then see if they do a better job of meeting my needs. I can use this as a way to assess their trustworthiness.” If you find that others continue to be unsupportive about the trauma, but kind to you in other ways, you may choose to adopt a statement such as “There are some people I cannot talk to about the traumatic event, but there are other areas of my life where I can trust them.” If a person continues to be negative or make blaming statements toward you, you might want to tell yourself, “This person is not trustworthy, and it is not healthy for me to have the person in my life at this time.”

HANDOUT 9.2

Practice Assignment after Session 8 of CPT

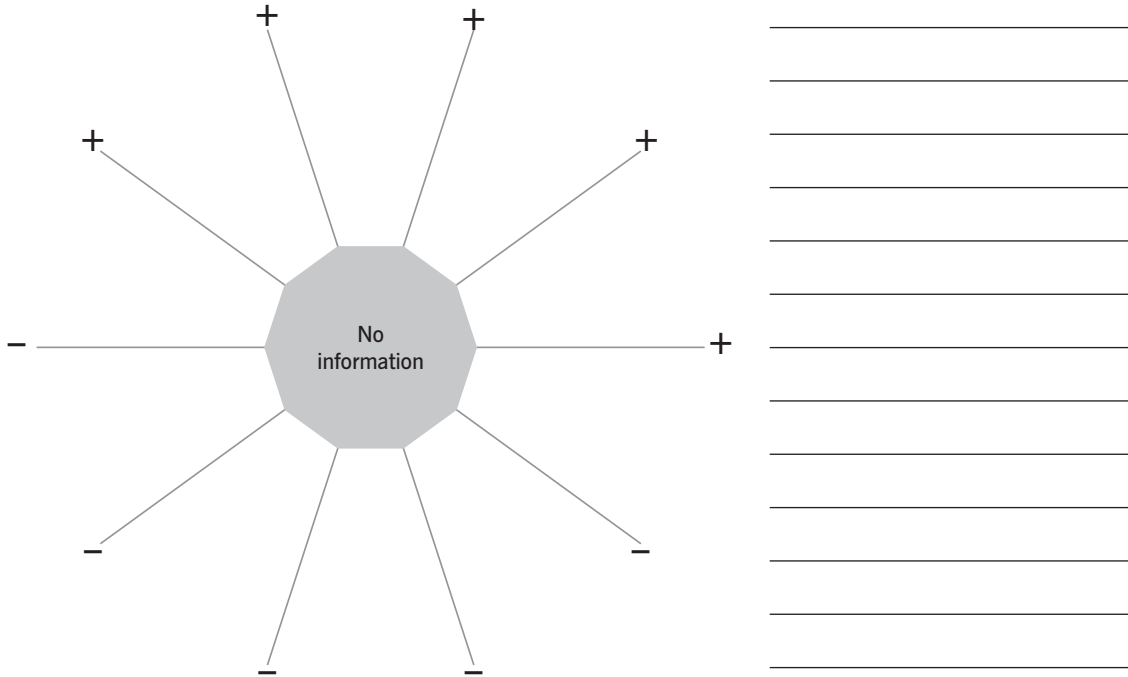
Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. Also, please read over the Trust Issues Module (Handout 9.1), and think about how your prior beliefs about trust were affected by your trauma. If you have trust issues, Stuck Points, related to yourself or others, complete at least one worksheet to examine those beliefs. Use the remaining sheets for other Stuck Points on your Stuck Point Log (Handout 6.1) or for distressing events that have occurred recently.

HANDOUT 9.3
Trust Star Worksheet

Date: _____ Client: _____

There are many different types of trust (such as keeping secrets and being reliable). Below, in the lines down the right side of the page, list all the different types of trust you can think of. Then think about one particular person. Write in your relationship with this person here: _____ . If you cannot think of a family member or friend, then think of someone in which you must place your trust, such as a doctor, mechanic, or bus driver. Put a star by the most important types of trust for this person. Then fill in the Trust Star graphic by writing a type of trust on each line, and putting an x on the line to indicate how much you trust this person with that type of trust. The plus sign at one end of each line means maximum trust; the minus sign means no trust at all. If you don't know how much you trust the person in this way, put the x just inside the "No information" circle. Does this person need to be trustworthy in every way? What about the most important ways? Would you trust this person to pull your tooth, cut your hair, or fix your car?

TYPES OF TRUST

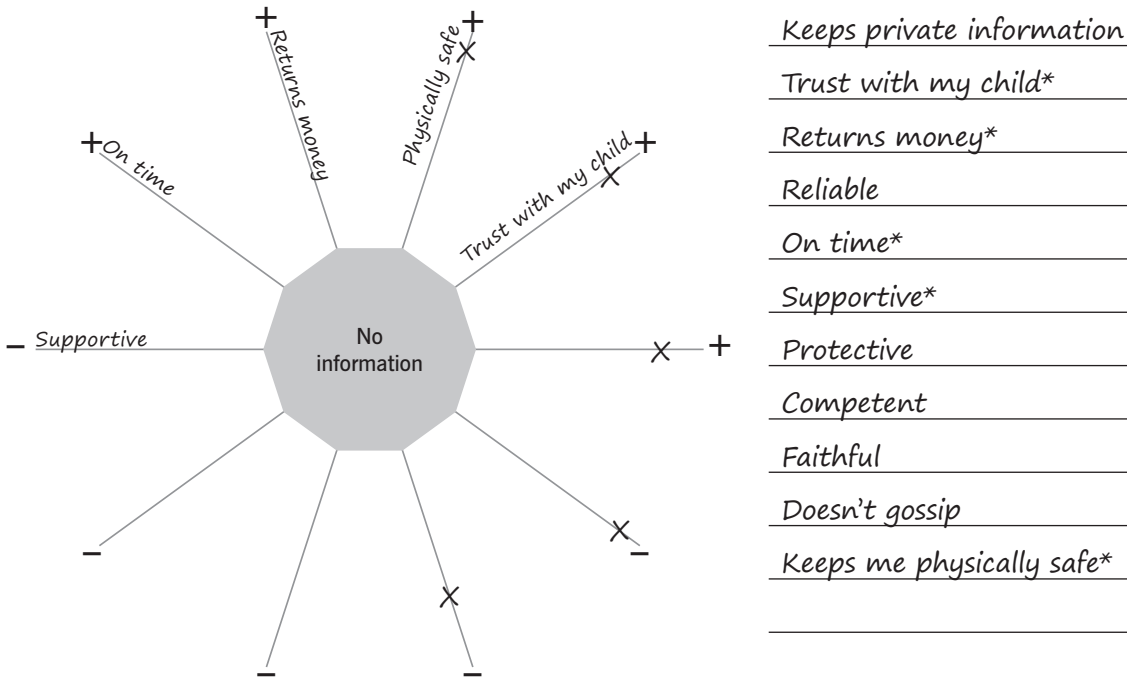


From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 9.3A
Sample Trust Star Worksheet

There are many different types of trust (such as keeping secrets and being reliable). Below, in the lines down the right side of the page, list all the different types of trust you can think of. Then think about one particular person. Write in your relationship with this person here: friend. If you cannot think of a family member or friend, then think of someone in which you must place your trust, such as a doctor, mechanic, or bus driver. Put a star by the most important types of trust for this person. Then fill in the Trust Star graphic by writing a type of trust on each line, and putting an x on the line to indicate how much you trust this person with that type of trust. The plus sign at one end of each line means maximum trust; the minus sign means no trust at all. If you don't know how much you trust the person in this way, put the x just inside the "No information" circle. Does this person need to be trustworthy in every way? What about the most important ways? Would you trust this person to pull your tooth, cut your hair, or fix your car?

TYPES OF TRUST



From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 9.4
Power/Control Issues Module

Power and Control Beliefs Related to SELF: Beliefs that you can solve problems and meet challenges that you may face.

PRIOR EXPERIENCE

Negative	Positive
If you grew up experiencing repeated negative events, you may have developed the belief that you cannot control events or solve problems even if they are controllable/solvable. A new traumatic event may seem to confirm prior beliefs about helplessness.	If you grew up believing that you had control over events and could solve problems, the traumatic event may have disrupted those beliefs.
Symptoms Associated with Negative Power/Control Beliefs about the Self	
<ul style="list-style-type: none"> • Numbing of feelings • Avoidance of emotions • Chronic passivity • Hopelessness and depression • Self-destructive patterns • Outrage when you are faced with events that are out of your control, or with people who do not behave as you would like 	
Examples of Possible Stuck Points	
<p>“Because I can’t be completely in control, I might as well be out of control.”</p> <p>“The traumatic event wouldn’t have happened if I had had better control over it.”</p> <p>“I need to be perfect to be in control.”</p> <p>“If I lose complete control over my emotions, something bad will happen.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	A possible alternative thought may be . . .
“I have control over everything that I do and say, as well as over the actions of others,” then it will be important to realize that none of us can have complete control over our emotions or behavior at all times. Although you may be able to influence many external events, it is impossible to control all events or all behaviors of other people. Neither of these	<p>“I do not have total control over my reactions, other people, or events at all times. However, I am able to have some control over my reactions to events, and to influence some behaviors of others or the outcomes of some events.”</p> <p>“Bad things do not always happen when I am not in control.”</p>

(continued)

HANDOUT 9.4 (p. 2 of 3)

If you previously believed that . . .	A possible alternative thought may be . . .
facts is a sign of weakness, but only an understanding that you are human and can admit that you are not in control of everything that happens to you or your reactions.	
“I am helpless or powerless to control myself or others,” then you will need to work on developing a sense of control to decrease the symptoms of depression and low self-esteem that often go along with believing you are helpless. It may help to look at your actual ability to control some events in your life.	<p>“I cannot control all events outside myself, but I do have some control over what happens to me and my reactions to events.”</p> <p>“I can try to notice all the little things I have control over in my life, and I can practice taking control over more things in my life that are important to me.”</p>

Power and Control Beliefs Related to OTHERS: Beliefs that you can control others or future events related to others (including people in power).

PRIOR EXPERIENCE

Negative	Positive
If you had prior experiences with others that led you to believe that you had no control in your relationships with others, or that you had no power in relation to powerful others, the traumatic event will seem to confirm those beliefs.	If you had prior positive experiences in your relationships with others and in relation to powerful others, you may have come to believe that you could influence others. The traumatic event may shatter this belief because you were unable to exert enough control, despite your best efforts, to prevent the event.
Symptoms Associated with Negative Power/Control Beliefs about Others	
<ul style="list-style-type: none"> • Passivity • Submissiveness • Lack of assertiveness that can generalize to all relationships • Inability to maintain relationships, because you do not allow the other persons to exert any control in the relationships (including becoming enraged if the other persons try to exert even a minimal amount of control) 	
Examples of Possible Stuck Points	
<p>“People will always try to control you.”</p> <p>“There is no point in even trying to fight against authority.”</p> <p>“This event just proves that people have too much power over me.”</p>	

(continued)

POSSIBLE RESOLUTIONS

If you previously believed that . . .	Possible alternative thoughts may be . . .
“I am powerless and have no control in relationships,” then you will need to learn ways that it is safe and appropriate for you to exert control over yourself, others, and events.	“Even though I cannot always get everything I want in a relationship, I do have the ability to influence others by standing up assertively for my rights and asking for what I want.”
“I have to control everything in the lives of people I care about, or they will be hurt,” then the traumatic event may have further reinforced this belief. It will be important for you to realize that healthy relationships involve sharing power and control, and that relationships in which one person has all the power can be abusive (even if you are the one with all the power). It may also be helpful to realize that it can be relaxing to give up some of the power, and freeing to let others make decisions some of the time.	“Even though I may not get everything I want or need out of a relationship, I can assert myself and ask for it. A good relationship is one in which power is balanced between both people. If I am not allowed any control, I can exert my control in this relationship by ending it, if necessary.” “I can learn to let others have some of the power in a relationship, and even enjoy having others take responsibility for some of the things that need to be done.”

HANDOUT 9.5

Practice Assignment after Session 9 of CPT

Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. Also, if not completed in session, complete the trust star example (Handout 9.3). Please read over the Power/Control Issues Module (Handout 9.4), and think about how your prior beliefs about power/control were affected by your trauma. If you have power/control Stuck Points related to yourself or others, complete at least one worksheet to examine those beliefs. Use the remaining sheets for other Stuck Points on your Stuck Point Log (Handout 6.1) or for distressing events that have occurred recently.

HANDOUT 9.6

Ways of Giving and Taking Power Handout

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

HANDOUT 9.7
Esteem Issues Module

Esteem Beliefs Related to SELF: Beliefs in your own worth. Such beliefs are a basic human need. Being understood, respected, and taken seriously is basic to the development of self-esteem.

PRIOR EXPERIENCE

Negative	Positive
<p>If you had prior experiences that made you doubt your own worth, a new traumatic event will seem to confirm these negative beliefs about your self-worth. Some life experiences that can lead to negative beliefs about the self include these:</p> <ul style="list-style-type: none"> • Believing other people’s negative statements about you • Receiving little caring or support from others • Being criticized or blamed by others, even when things were not your fault 	<p>If you had prior experiences that were positive and built up your beliefs in your own worth, the traumatic event may have disrupted those beliefs and lowered your self-esteem. Your self-confidence in making decisions and your faith in your opinions may be decreased.</p>
Symptoms Associated with Negative Esteem Beliefs about the Self	
<ul style="list-style-type: none"> • Depression • Guilt • Shame • Possible self-destructive behavior 	
Examples of Possible Stuck Points	
<p>“I am bad, destructive, or evil.” “I am responsible for bad, destructive, or evil acts.” “I am basically damaged or flawed.” “Because I am worthless, I deserve unhappiness and suffering.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	A possible alternative thought may be . . .
<p>“I am worthless” (or any of the beliefs listed above) because of prior experiences, then the traumatic event may seem to confirm this</p>	<p>“Sometimes bad things happen to good people. Just because someone says something bad about me, that does not make</p>

(continued)

HANDOUT 9.7 (p. 2 of 4)

If you previously believed that . . .	A possible alternative thought may be . . .
<p>belief. If you received poor social support after the event, this may also confirm negatives beliefs about yourself. To improve your self-esteem, it may help to reevaluate your beliefs about your self-worth and replace maladaptive beliefs with more realistic, positive ones.</p>	<p>it true. No one deserves this, and that includes me. Even if I have made mistakes in the past, that does not make me a bad person deserving of unhappiness or suffering (including the traumatic event)."</p>
<p>"Bad things will not happen to me because I am a good person," then the event may have disrupted such beliefs, and you may wonder what you did to deserve the event (e.g., "Maybe I was being punished for something I had done, or because I am actually a bad person"). To regain your prior positive beliefs about your self-worth, you will need to look carefully at the situation, so that your sense of worth is not disrupted every time something unexpected and bad happens to you. When you can accept that bad things might happen to you (as they happen to everybody from time to time), you will let go of blaming yourself for events that you did not cause.</p>	<p>"Sometimes bad things happen to good people. If something bad happens to me, it is not necessarily because I did something to cause it or because I deserved it. Sometimes there is not a good explanation for why bad things happen. I might have been the occasion, but not the cause of the event."</p>

Esteem Beliefs Related to OTHERS: Beliefs about how much you value other people. Realistic views of others are important to psychological health. In less psychologically healthy people, these beliefs are stereotyped, rigid, and relatively unchanged by new information.

PRIOR EXPERIENCE

Negative	Positive
<p>If you had many bad experiences with people in the past, you may have concluded that other people are not good or not to be trusted. You may have developed this belief about everyone (even those who are basically good and have your best interests at heart). The traumatic event may seem to confirm these beliefs about people. In addition, negative experiences may make it difficult to respect people in authority, especially if your trauma involved someone in a position of power.</p>	<p>If your prior experiences with people were positive, and if negative events in the world did not seem to have an impact on you, the traumatic event was probably belief-shattering. Prior beliefs in the basic goodness of other people may have been particularly disrupted if people who were assumed to be supportive were not there for you after the event.</p>

(continued)

HANDOUT 9.7 (p. 3 of 4)

Symptoms Associated with Negative Esteem Beliefs about Others

- Chronic anger
- Contempt
- Bitterness
- Cynicism
- Disbelief when treated with genuine caring compassion (“What do they really want?”)
- Isolation or withdrawal from others
- Antisocial behavior, justified by the belief that people are only out for themselves

Examples of Possible Stuck Points

- “People are basically uncaring, indifferent, and only out for themselves.”
- “People are bad, evil, or malicious.”
- “Large parts of the human race [e.g., all men, all government officials] are bad, evil, or malicious.”

POSSIBLE RESOLUTIONS

If you previously believed that . . .	Possible self-statements may be . . .
<p>“All people are no good,” then it will be important for you to reconsider the automatic conclusion that all people (or at least all people from a particular group) are no good, and consider how that belief has affected your behavior and social life in general. When you first meet someone, it is important that you do not make decisions based on stereotypes, which are not generally true for the majority of people you will meet. It is better and more accurate to adopt a “wait-and-see” attitude, which will allow you time to develop your beliefs about the other person without automatically judging the person you are trying to get to know.</p>	<p>“While some [members of a particular group] do bad things, not all [members of this group] are out to hurt me.”</p> <p>“While some people in power will abuse their power, not all people in power are out to hurt others.”</p>
<p>“I need to put up with other people’s behavior, even if it makes me uncomfortable,” you need to keep in mind that if over time a person makes you uncomfortable, or does things that may hurt you, you are free to stop trying to develop the relationship. It is important to remember, however, that all people make mistakes, and you need to consider your ground rules for friendships or intimate relationships ahead of time. If you confront the person with a request to stop doing</p>	<p>“Although there are people I do not respect and do not wish to know, I cannot assume this about every new person I meet. I may come to this conclusion later, but it will be after I have learned more about this person.”</p>

(continued)

HANDOUT 9.7 (p. 4 of 4)

If you previously believed that . . .	Possible self-statements may be . . .
<p>something that makes you uncomfortable, you can use that person's reaction to your request to help you decide if the person is going to be good for you to have in your life. That is, if the person is apologetic and makes a genuine effort to avoid making the same mistake, then you might want to continue getting to know this person. If the person is insensitive to your request or belittles you in some way, then you may want to get out of this relationship. The important point about esteem of others is like the point about trust of others: You need time to get to know people and form an opinion of them. It is important that you adopt a view of others that is balanced and allows for changes.</p>	
<p>"People I expect to support me will always let me down," it will be important not to drop relationships immediately, even if those you expected support from let you down. Talk to them about how you feel and what you want from them. Use their reactions to your request as a way of evaluating where you want these relationships to go.</p>	<p>"People sometimes make mistakes. I will try to find out whether they understand it was a mistake or whether it reflects a negative pattern that will continue from that person. At that point, I can end the relationship if it is something I cannot accept."</p>

HANDOUT 9.8

Practice Assignment after Session 10 of CPT

Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. Also, please read over the Esteem Issues Module (Handout 9.7) and think about how your prior beliefs about esteem were affected by your trauma. If you have esteem Stuck Points related to yourself or others, complete at least one worksheet to examine those beliefs. Use the remaining sheets for other Stuck Points on your Stuck Point Log (Handout 6.1) or for distressing events that have occurred recently.

Also, each day before the next session, do one nice thing for yourself “just because,” not because you achieved something. Also, practice giving one compliment and receiving one compliment each day. Write the nice things you did for yourself, and the names of the persons whom you complimented and who complimented you, on this sheet. It is better to compliment people for something they did rather than how they look. If any of these assignments result in Stuck Points, please complete a Challenging Beliefs Worksheet on them.

HANDOUT 10.1
Intimacy Issues Module

Intimacy Beliefs Related to SELF: Beliefs that you can take care of your own emotional needs. An important part of healthy living is the ability to soothe and calm oneself. Part of self-intimacy is the ability to be alone without feeling lonely or empty.

PRIOR EXPERIENCE

Negative	Positive
If you had prior experiences (or poor role models) that led you to believe that you are unable to cope with negative life events, you may have reacted to the traumatic event with negative thoughts suggesting that you were unable to soothe, comfort, or nurture yourself.	If you previously had healthy, positive self-intimacy, you may be able to cope with a traumatic event because of the ability to use internal coping strategies. However, some traumatic events can create conflict; you may begin to doubt your ability to take care of your needs.
Symptoms Associated with Negative Intimacy Beliefs about the Self	
<ul style="list-style-type: none"> • Inability to comfort and soothe the self • Fear of being alone • Experience of inner emptiness or deadness • Periods of great anxiety or panic if reminded of trauma when alone • Possibly looking to external sources of comfort—overeating, alcohol or other substance use, spending money, self-harm behaviors, or sex • Needy or demanding relationships 	
Examples of Possible Stuck Points	
<p>“If I get emotional, I will be out of control.”</p> <p>“I can’t tolerate being alone.”</p> <p>“I can’t handle my trauma symptoms by myself.”</p>	

POSSIBLE RESOLUTIONS

If you previously believed that . . .	A possible alternative thought may be . . .
“I can take care of myself, and other people’s actions do not affect me,” the traumatic event may have shaken this belief. It will be helpful for you to remember the ways that you have taken care of meeting your needs in the past,	“I will not suffer forever. I can soothe myself and use the skills I have learned to cope with these painful feelings. I may need help in dealing with my reactions, but that is normal.” “The skills and abilities I am developing now

(continued)

HANDOUT 10.1 (p. 2 of 4)

If you previously believed that . . .	A possible alternative thought may be . . .
<p>and how you were able not to make other people's crises your own. In addition, understanding the typical reactions to trauma may help you feel less panicky about what you are experiencing. When some people have a difficult time making themselves feel better, they may turn to unhealthy behaviors (substance abuse, overeating, gambling, etc.) that only mask the symptoms instead of helping with recovery. The painful thoughts and feelings do not go away, however, and these persons then have to deal with the consequences of the unhealthy behaviors, which usually compound the problems.</p>	<p>will help me to cope better with other stressful situations in the future."</p>
<p>"I cannot take care of myself; I must have other people to help me," the traumatic event may have reinforced this belief. You may have become convinced that you do not have any skills to help yourself or make yourself feel better. It will help for you to begin to identify the small ways that you take care of yourself every day and to build on these small wins. It is good to have others in your life that you can rely on, but there are times when others are not available.</p>	<p>"Although it may be hard at first, I can develop skills for taking care of myself, including practicing self-care by doing things that I enjoy doing." "It is healthy to ask others for help when I need it, but people are not always free immediately, and I can learn to take care of myself until they are available."</p>

Intimacy Beliefs Related to OTHERS: Beliefs that you are capable of making different types of emotional connections with others. The desire for closeness is one of the most basic human needs. Intimate connections with others can be negatively affected by traumatic events or damaged by insensitive, hurtful, or unempathic responses from others.

PRIOR EXPERIENCE

Negative	Positive
<p>Negative beliefs may have resulted from traumatic loss of intimate connections. The traumatic event may seem to confirm your belief in your inability to be close to another person.</p>	<p>If you previously had satisfying intimate relationships with others, you may find that the traumatic event (especially if it was an act committed by someone you knew) left you believing that you could never be close to anyone again.</p>

(continued)

HANDOUT 10.1 (p. 3 of 4)

Posttraumatic Experience

You may also have experienced a disruption in your belief about your ability to be intimate with others if you were blamed or rejected by persons you thought would be supportive.

Symptoms Associated with Negative Esteem Beliefs about Others

- Pervasive loneliness
- Emptiness or isolation
- Failure to experience connectedness with others, even in relationships that are genuinely loving and intimate

Examples of Possible Stuck Points

“If I get close to someone, I will get hurt.”
“All anyone ever wants is sex.”
“I will always be taken advantage of in relationships.”

POSSIBLE RESOLUTIONS

If you previously believed that . . .	Possible self-statements may be . . .
<p>“I can depend on others and feel close and connected to them,” the traumatic event may have had negative effects on your ability to feel intimate with others. It will be important for you to regain healthy beliefs about your ability to become close to others. To have intimate relationships with others again, you may need to adopt new, more adaptive beliefs about intimacy. Intimate relationships take time to develop and effort from both people. You are not solely responsible for the failure of prior or future relationships. The development of relationships involves risk taking, and it is possible that you may be hurt again. Staying away from relationships for this reason alone, however, is likely to leave you feeling empty and alone.</p>	<p>“Even though a past relationship did not work out, it does not mean that I cannot have satisfying intimate relationships in the future. Not everyone will betray me. I will need to take risks in developing relationships in the future, but if I take it slowly, I will have a better chance of telling whether this person can be trusted.”</p>
<p>“I cannot be close to others, and everyone will hurt me,” the trauma may have reinforced this belief. It will be important for you to begin slowly taking chances with some other people, and to learn that you can not only trust them but can also be intimate with them. If there are people who let you down or hurt you with their response after the event, you can attempt to improve your relationships with them by telling them what you need and</p>	<p>“I can still be close to people, but I may not be able (or may not want) to be intimate with everyone I meet. I may lose prior or future intimate relationships with others who cannot meet me halfway, but this is not my fault or due to the fact that I did not try.”</p>

(continued)

HANDOUT 10.1 (p. 4 of 4)

If you previously believed that . . .	Possible self-statements may be . . .
<p>letting them know how you feel about what they said or did. If they are unable to adjust to your requests and are unable to give you what you need, you may decide that you can no longer be close to those people. You may find, however, that they responded as they did out of ignorance or fear. If you talk to them about this, your relationships with them may improve, and you may end up feeling closer to them than you did before the traumatic event.</p> <p>Remember, many people need the support of others to recover from a traumatic event.</p>	

HANDOUT 10.2

Practice Assignment after Session 11 of CPT

Read the Intimacy Issues Module (Handout 10.1), and use Challenging Beliefs Worksheets (Handout 8.1) to confront Stuck Points about intimacy related to yourself or others. Continue completing worksheets on previous topics that are still problematic, and/or any concerns you have about the ending of treatment.

Continue to practice doing nice/worthwhile things for yourself, and giving and receiving compliments.

Finally, please write at least one page on what you think *now* about why your traumatic event(s) occurred. Also, consider what you believe *now* about yourself, others, and the world in the following areas: safety, trust, power/control, esteem, and intimacy.

HANDOUT 11.1

Practice Assignment after Session 3 of CPT+A

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

Read the whole account to yourself every day until the next session. Allow yourself to feel your feelings. Bring your account to the next session.

Also, continue to work with the ABC Worksheets (Handout 6.3) every day. When you find Stuck Points, add them to your Stuck Point Log (Handout 6.1).

HANDOUT 11.2

Practice Assignment after Session 4 of CPT+A

Write another account of the whole traumatic incident as soon as possible. If you were unable to complete the assignment the first time, please write more than you did last time. Add more sensory details, as well as more of your thoughts and feelings during the incident. Also, this time, write your *current* thoughts and feelings in parentheses—for instance, “(Right now I’m feeling very angry.)”

Remember to read over the new account every day before the next session.

Also, continue to work with the ABC Worksheets (Handout 6.3) every day.

HANDOUT 11.3

Practice Assignment after Session 7 of CPT+A

Use the Challenging Beliefs Worksheets (Handout 8.1) to analyze and confront at least one of your Stuck Points each day. Also, please read over the Safety Issues Module (Handout 8.1), and think about how your prior beliefs about safety were affected by your traumatic event. If you have issues with safety pertaining to yourself or others, complete at least one Challenging Beliefs Worksheet to confront those issues. Use the remaining sheets for other Stuck Points on your Stuck Point Log (Handout 6.1) or for distressing events that have occurred recently.

HANDOUT 12.1

Cognitive Processing Therapy for Sexual Abuse (CPT-SA): Treatment Overview

CPT-SA is conducted in 16 sessions lasting 55 minutes each. Here is a general overview of the session content:

SESSION 1

Therapist provides introduction to CPT-SA and education about the treatment, symptom responses, social-cognitive theory, emotions, and Stuck Points.

Practice assignment: Read the handouts on Stuck Points and developmental stages.

SESSION 2

Review the Session 1 practice assignment. Discuss developmental issues and their impact on current beliefs and behaviors. Explore family dynamics.

Practice assignment: Write an Impact Statement on the ways in which the abuse has affected your beliefs about yourself, others, and the world.

SESSION 3

Review the Session 2 practice assignment. Begin examining connections between thoughts and feelings. Look over the ABC Worksheet.

Practice assignment: Complete ABC Worksheets.

SESSION 4

Review the Session 3 practice assignment. Look at links among thoughts, feelings, and behaviors.

Practice assignment: Write a full account of the index traumatic incident of childhood sexual abuse, and read it to yourself daily. Continue to complete ABC Worksheets.

SESSION 5

Review the Session 4 practice assignment. Read the written account in session, process emotions, and review the account for Stuck Points.

Practice assignment: Write a second account of the index traumatic incident of childhood sexual

(continued)

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

abuse, incorporating more sensory detail, and read it to yourself daily. Continue to complete ABC Worksheets.

SESSION 6

Review the Session 5 practice assignment. Read the second written account in session, process emotions, and review the account for Stuck Points.

Practice assignment: Write an account of the next most traumatic incident (if there is one), and read it to yourself daily. Continue to complete ABC Worksheets.

SESSION 7

Review the Session 6 practice assignment. Read the third written account, continuing to process emotions and looking for Stuck Points. Look over the Challenging Questions Worksheet.

Practice assignment: Challenge at least one Stuck Point related to the abuse, using a Challenging Questions Worksheet, and use additional copies of this sheet to challenge Stuck Points from your Stuck Point Log. If you wish, write another account of the second incident, or write about a third incident, and read the account to yourself daily.

SESSION 8

Review the Session 7 practice assignment. Read the most recent written account, and continue to process emotions and review the account for any additional Stuck Points. Review the Challenging Questions Worksheets. Look over the Patterns of Problematic Thinking Worksheet.

Practice assignment: Use the Patterns of Problematic Thinking Worksheet to identify such patterns as they relate to your Stuck Points. Challenge at least one rule with the Challenging Questions Worksheet. Continue to read account(s) daily.

SESSION 9

Review the Session 8 practice assignment. Review problematic thinking patterns, their development, and their impact. Look over the Challenging Beliefs Worksheet and the Safety Issues Module.

Practice assignment: Read the Safety Issues Module. Challenge Stuck Points (including ones on safety), using Challenging Beliefs Worksheets. Continue to read accounts.

SESSION 10

Review the Session 9 practice assignment. Discuss safety, and challenge Stuck Points related to safety. Look over the Trust Issues Module.

Practice assignment: Read the Trust Issues Module. Continue to challenge Stuck Points (including ones on trust), using Challenging Beliefs Worksheets.

(continued)

SESSION 11

Review the Session 10 practice assignment. Discuss trust, and challenge Stuck Points related to trust. Look over the Power/Control Issues Module.

Practice assignment: Read the Power/Control Issues Module. Continue to challenge Stuck Points (including ones on power/control), using Challenging Beliefs Worksheets.

SESSION 12

Review the Session 11 practice assignment. Discuss power/control, and challenge Stuck Points related to power/control. Look over the Esteem Issues Module.

Practice assignment: Read the Esteem Issues Module. Continue to challenge Stuck Points (including ones on esteem), using Challenging Beliefs Worksheets.

SESSION 13

Review the Session 12 practice assignment. Discuss esteem, and challenge Stuck Points related to esteem.

Practice assignment: Continue to challenge Stuck Points (including ones on esteem), using Challenging Beliefs Worksheets. Read handouts on assertiveness and communication.

SESSION 14

Review the Session 13 practice assignment. Continue to discuss esteem, and explore how assertiveness is tied to self-esteem. Look over the Intimacy Issues Module.

Practice assignment: Read the Intimacy Issues Module. Continue to challenge Stuck Points (including ones on intimacy), using Challenging Beliefs Worksheets.

SESSION 15

Review the Session 14 practice assignment. Continue to discuss intimacy, and challenge Stuck Points related to intimacy. Look over the Social Support Module.

Practice assignment: Read the Social Support Module, and continue to challenge Stuck Points (including ones on social support), using Challenging Beliefs Worksheets. Write a second Impact Statement.

WEEK 16

Review the Session 15 practice assignment. Read the new Impact Statement in session, discuss social support, and identify goals for the future.

HANDOUT 13.1
Modified Challenging Questions Worksheet

Date: _____ Client: _____

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

Belief:

What is the evidence for and against this stuck point?

For:

Against:

Now choose one of the next three questions:

In what ways is your Stuck Point not including all of the information?

In what way is your Stuck Point focused on just one piece of the story?

(continued)

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 13.1 *(p. 2 of 2)*

In what ways is this Stuck Point focused on unrelated parts of the story?

Now choose three of the following questions (the three you understand best):

Is your Stuck Point a habit or based on facts?

Does your Stuck Point include all-or-none terms?

Does the Stuck Point include words or phrases that are extreme or exaggerated (such as “always,” “forever,” “never,” “need,” “should,” “must,” “can’t,” and “every time”)?

Where did this Stuck Point come from? Is this a dependable source of information on this Stuck Point?

How is your Stuck Point confusing something that is possible with something that is likely?

In what ways is your Stuck Point based on feelings rather than facts?

HANDOUT 13.2
Modified Challenging Beliefs Worksheet

Date: _____ Client: _____

A. Situation	B. Thought/Stuck Point	D. Challenging Thoughts	E. Problematic Patterns	F. Alternative Thought(s)
Describe the event, thought, or belief leading to the unpleasant emotion(s).	Write thought/Stuck Point related to situation in section A. (How much do you believe this thought?) Rate your belief in this thought/Stuck Point from 0 to 100%.	Use Challenging Questions to examine your automatic thought from section B. Consider whether the thought is balanced and factual, or extreme.	Use the Patterns of Problematic Thinking Worksheet to decide whether this is one of your problematic patterns of thinking.	What else can I say instead of the thought in section B? How else can I interpret the event instead of this thought? Rate your belief in the alternative thought(s) from 0 to 100%.
	<p style="text-align: center;">C. Emotion(s)</p> Specify your emotion(s) (sad, angry, etc.), and rate how strongly you feel each emotion from 0 to 100%.	Evidence for? Evidence against? One of the next three questions: Not including all information? Focused on just one piece? Focused on unrelated parts? Any three of the following questions: Habit or fact? All-or-none? Extreme or exaggerated? Source dependable? Confusing possible with likely? Based on feelings or facts?	Jumping to conclusions: Exaggerating or minimizing: Ignoring important parts: Oversimplifying: Overgeneralizing: Mind reading: Emotional reasoning:	<p style="text-align: center;">G. Re-Rate Old Thought/Stuck Point</p> Re-rate how much you now believe the thought/Stuck Point in section B, from 0 to 100%. <p style="text-align: center;">H. Emotion(s)</p> Now what do you feel? Rate it from 0 to 100%.

HANDOUT 13.3
Simplified Challenging Beliefs Worksheet

Date: _____ Client: _____

Stuck Point	Challenging Questions	New Belief
<p>List one of your Stuck Points here, and rate how much you believe it (from 0 to 100%).</p> <p style="text-align: center;">_____ %</p>	<p>Use these five questions to challenge your Stuck Point.</p> <p>Evidence for the Stuck Point?</p> <p>Evidence against the Stuck Point?</p> <p>Is the Stuck Point not including all the information?</p> <p>Is the Stuck Point extreme or exaggerated?</p> <p>Is the Stuck Point based on feelings rather than all the facts?</p>	<p>What can you tell yourself in the future, and how much do you believe it (from 0 to 100%)?</p> <p style="text-align: center;">_____ %</p>

From *Cognitive Processing Therapy for PTSD: A Comprehensive Manual* by Patricia A. Resick, Candice M. Monson, and Kathleen M. Chard. Copyright © 2017 The Guilford Press. Permission to photocopy this handout is granted to purchasers of this book for personal use or for use with individual clients (see copyright page for details).

HANDOUT 13.4

Examples of Stuck Points about Grief and Mourning

1. Because grief and mourning decrease steadily over time, there is something wrong with me.
2. If I stop having flashbacks or nightmares, I will forget the person who died.
3. All losses should result in the same type of grief and mourning.
4. If I hang on to my guilt or anger, I won't have to accept that the person has died and feel sad.
5. The best way to recover from the death of someone is to get on with life and not think about the person.
6. Grief will affect the mourner emotionally, but should not interfere in other ways.
7. If I don't feel intensely about the person's death, this means I am not grieving right.
8. If I stop thinking about the deaths of the people I've lost, this means that they died for nothing, or that I and other people will forget them.
9. Continuing to grieve honors a person's death.
10. Losing someone to a sudden, unexpected, or violent death is the same as losing someone to an expected death.
11. Grief is over in a year.
12. Time heals all wounds.