

BOX 10.1

Theme and Curriculum for Session 1 *The Resource of Hope: Introducing the Client to Treatment*

By the time a client with a history of trauma comes to therapy, they have often reached the limits of their capacity to function. Still, by coming to therapy, the client is holding on to some vestige of hope. The therapist's primary task is to sustain and strengthen this hope. Hope emerges from both a sense of being understood and a belief in the possibility of change. Thus the first of the therapist's tasks is to listen carefully to the client and reflect back an accurate and empathic understanding of the client's symptoms and life circumstances. In addition, the therapist must then propose a treatment plan that addresses these problems, and, in collaboration with the client, must come to an agreement about the goals of the therapy and the means by which these goals will be reached. The therapist will also give the client "something to go home with" by beginning skills training in a mind-body exercise (Focused Breathing).

PLANNING AND PREPARATION

Review client's evaluation materials, particularly trauma history, symptoms, and coping skills. Bring handouts on treatment rationale and Focused Breathing (Handouts 10.1 and 10.2). The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Welcome client to treatment and identify focus of the session.
- Review client's evaluation experience, trauma history, and symptoms.
- Establish the therapeutic contract.
- Provide overview of treatment plan.
- Explain goals of Module I: STAIR (emotion regulation and interpersonal skills development).
- Explain goals of Module II: Narrative Therapy (PTSD symptom reduction and creation of life narrative, if relevant to client's treatment plan).
- Review rationale for and benefits of a two-module treatment (if relevant to client's treatment plan).
- Provide a coping skill: Focused Breathing.
- Provide rationale for between-session skills practice.
- Summarize the goals of the session.
- Plan skills practice:
 - Practice Focused Breathing twice a day.

(continued)

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SESSION HANDOUTS

Handout 10.1. Treatment Overview: What is STAIR Narrative Therapy?

Handout 10.2. Instructions for Focused Breathing

HANDOUT 10.1

Treatment Overview: What Is STAIR Narrative Therapy?

RATIONALE

This treatment was originally designed for adults with a history of childhood abuse who suffer from posttraumatic stress disorder (PTSD) symptoms and experience difficulties with emotion management and interpersonal relationships. Over time, it was broadened to apply to people with a range of traumatic experiences and symptoms.

The first module of treatment, Skills Training in Affective and Interpersonal Regulation (STAIR), directly addresses current relationship and emotion management problems. Module I of treatment also prepares you to work effectively in the more intense Module II, which involves discussing and analyzing painful memories of trauma.

People often try to cope with traumatic memories by avoiding them. This avoidance is understandable, but ultimately, in the long run, it does not work. The memories return in unpredictable and uncontrollable ways. The goal of Module II, Narrative Therapy, is to organize your memories of trauma and resolve your feelings about them. Doing so helps you control the memories, rather than having the memories control you.

In addition, the process of describing your past is a way for you to identify deeper beliefs about yourself and patterns of relating to others. Those patterns might have been adaptive at the time of the trauma, but no longer are adaptive and need adjustment. This process pairs nicely with the skills training from Module I, which will help you leave behind old patterns and develop new interpersonal behaviors and emotion management skills more consistent with your current life goals.

OVERVIEW

This treatment consists of two modules, as described above. You and your therapist may decide that a different number or spacing of sessions would be most appropriate to your needs. The following table provides a general overview of the treatment.

	Module I: STAIR	Module II: Narrative Therapy
Estimated session number and format	10 weekly 60-minute sessions	8–10 weekly 60-minute sessions
Focus	Learning skills to manage emotions and improve relationships	Making sense of the trauma and processing related memories and feelings
Goals	<ol style="list-style-type: none">1. Develop emotional awareness.2. Build coping skills for handling negative feelings and distress.	<ol style="list-style-type: none">1. Revisit trauma memories to help emotional processing of what happened.

(continued)

Treatment Overview: What Is STAIR Narrative Therapy? *(page 2 of 2)*

	Module I: STAIR	Module II: Narrative Therapy
Goals <i>(continued)</i>	<ol style="list-style-type: none">3. Review how to make decisions about whether tolerating distress makes sense to reach your goals.4. Understand relationship patterns and create healthy alternatives to unhelpful patterns.5. Learn interpersonal skills to pair with emotional coping skills to improve relationships.	<ol style="list-style-type: none">2. Repeat tellings of the events to habituate to (get used to and decrease) the feelings of anxiety that the memories trigger.3. Make meaningful connections between your feelings and your experiences.4. Differentiate the traumatic past from the present, freeing your behavior and thinking from the control of the trauma.5. Explore your life and create the story of your life, taking a long view of it, where the trauma is part of but not all of your experience and story.

HANDOUT 10.2

Instructions for Focused Breathing

RATIONALE

One way of dealing with distressing feelings involves decreasing your physiological arousal through a skill we call Focused Breathing. The aim is to slow down your breathing to decrease anxiety, breathlessness, and disorientation. In addition, the exercise is similar to meditation, in that it helps you reduce disorganized thinking or flooding by focusing on a single sensation and single task—namely, breathing.

Focused Breathing can be used to manage states of anxiety, irritation, or anger, and as a meditative tool for feeling calm and grounded. It is also an exercise that highlights the connection between the mind and the body. By clearing the mind of all thoughts and by directing your concentration toward regular breathing, you will experience the influence of mind over body. The relaxation of the body that comes from regular breathing will also reduce the flow of undirected, distracting thoughts, which completes the circle with the influence of body over mind.

Practicing Focused Breathing will help you experience the connectedness and integrity of the body and mind in a positive, healthy way. The ability to engage in Focused Breathing in a meditational fashion is a challenge and takes practice. So do not become discouraged. Practice regularly and with patience, and your skill will develop over time.

PROCEDURE FOR FOCUSED BREATHING

Getting Started

Place one hand on your chest and the other on your stomach. Take a slow, deep breath, and pay attention to which hand moves. When you are breathing from your diaphragm, only the hand on the stomach should move up and down, with little movement coming from the chest. It may help to think of how babies sleep—how their stomachs quietly move up and down. Or you might imagine your stomach as a balloon, filling with air and expanding as you inhale, then letting out the air and shrinking as you exhale.

Slow Down Your Rate of Breathing

Take in enough air to fill the space under the diaphragm, then let it out slowly. Sometimes breathing out through the nose is easier because your nostrils are smaller openings, which will help slow the rate of exhalation. Pause briefly after exhaling before inhaling again. Some people tend to hold their breath too long at first; the pause should be brief after exhaling. Imagery can be helpful in maintaining a slow and steady rhythm. For example, seeing your breath as a wave, following it as it ebbs and flows, can be a helpful image. Alternatively, imagine climbing up a slide (inhaling) and then sliding down (exhaling), and briefly pausing at the bottom before walking around and climbing up again.

(continued)

Instructions for Focused Breathing *(page 2 of 2)*

Meditational Component

In order to help slow your thoughts and focus your attention on breathing, count your breaths as you inhale, and think “Relax,” “Calm,” or some similar thought as you exhale. Continue counting your breaths until you get to 10, and then start over at 1. It is perfectly natural for other thoughts to come into your mind. Try not to get angry or frustrated; just allow the thoughts to pass through your mind, and bring your attention back to counting as often as you need to. Some people find it helpful to concentrate mostly on the physical sensation of their breathing, others on the counting or “Relax” statement. Experiment with different methods, and do whatever works best for you.

Practice

Practice is essential to develop this skill, so that it becomes something you can use to decrease distress in stressful situations. It is best to practice Focused Breathing in a comfortable, quiet place where you will not be disturbed. Take a few seconds to relax, and then practice the breathing exercise for at least 5 minutes. Practicing at least twice a day is the goal. When you are beginning to learn this skill, it is best not to practice when you are already distressed. The idea is that if you practice the breathing when you are in a calm state, it will become a habit that you can then call upon more easily when you are distressed. As you become more skilled at it, you may begin practicing using it in mildly distressing situations, such as when you are feeling impatient while waiting in a line.

BOX 11.1

Theme and Curriculum for Session 2 *The Resource of Feeling: Emotional Awareness*

Identifying and naming feelings may seem to be a simple activity. But, in fact, many survivors of interpersonal trauma have not had sufficient opportunity to do this. In this session, the therapist helps the client enhance their ability to identify and label their feelings, their sources, and associated thoughts and actions. In addition, the therapist helps create a sense of safety in the client's experiencing and naming of feelings, helps to clarify different kinds of feelings, and furnishes support for their expression and felt reality.

PLANNING AND PREPARATION

Review client's evaluation materials related to difficulties with emotion regulation. Bring several copies of the Feelings Monitoring Form (Handout 11.3), as well as a copy of each other Session 2 handout. Prepare examples for the Feelings Monitoring Form. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Introduce concept of emotion regulation.
- Explore and identify difficulties with emotion regulation.
- Introduce the Feelings Monitoring Form.
- Provide rationale for monitoring and understanding feelings.
- Use channels of emotion to help organize experience.
- Describe the functions of feelings.
- Identify and discuss client's problematic emotions.
- Discuss discrimination among different kinds of feelings.
- Practice using the Feelings Monitoring Form together.
- Summarize the goals of the session.
- Plan skills practice:
 - Practice Focused Breathing twice a day.
 - Complete Feelings Monitoring Form once a day.

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SESSION HANDOUTS

- Handout 11.1. The Impact of Childhood Abuse and Neglect on Emotion Regulation
- Handout 11.2. Social Influences on Your Emotional Experiences
- Handout 11.3. Feelings Monitoring Form (several copies)
- Handout 11.4. Examples of Emotion Regulation Coping Skills for the Three Channels of Emotion
- Handout 11.5. Three Channels Skills Graphic
- Handout 11.6. Negative and Positive Emotions as Messengers
- Handout 11.7. Feelings List
- Handout 11.8. Feelings Wheel

HANDOUT 11.1

The Impact of Childhood Abuse and Neglect on Emotion Regulation

For many people, experiences of abuse and neglect in childhood have a powerful impact on emotional functioning in adulthood. Good parenting provides children with emotion regulation skills, which include the ability to identify feelings, understand their sources, and manage them for optimal functioning. Abuse and neglect elicit a range of powerful and confusing feelings. Often survivors of childhood abuse and neglect have been raised in a family context where caregivers offer poor soothing during times of distress and poor guidance in modulating feelings. Many survivors feel overwhelmed by their emotions, or, in contrast, feel numb and unable to experience many or all emotions.

TYPES OF EMOTION REGULATION DIFFICULTIES

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

THE ROLES OF FEELINGS

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

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

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

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FEELINGS MONITORING FORM

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

HANDOUT 11.2

Social Influences on Your Emotional Experiences

What are the messages you have received about emotions throughout your life?

	Growing Up (Examples: your family, teachers, friends)	Current Relationships (Examples: close friends, romantic partner)	Community/Society (Examples: military, culture, religious community)
Which emotions should you feel?			
How should you cope with emotions?			
How should you express your emotions?			

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HANDOUT 11.3

Feelings Monitoring Form

Triggering Situation	Feeling	Intensity at Start (0-10)	Duration	Thoughts	Behavior	Intensity Afterward (0-10)	Effective?

Situation

Feelings

Thoughts

Behavior

Result

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HANDOUT 11.4

Examples of Emotion Regulation Coping Skills for the Three Channels of Emotion

THREE CHANNELS OF EMOTION

To help us explore our feelings, we can think of our emotional experiences as expressed through three channels: body, thought, and behavior.

The “body channel” is what we feel physically in our bodies. For example, when we’re feeling anxious, we may notice that our breathing quickens, our heart rate increases, and we sweat or shake.

The “thought channel” includes what we say to ourselves, our beliefs, and the attributions we make. For example, when we’re feeling anxious, we may think to ourselves, “I’m such a loser,” or “I can’t trust anyone.” These thoughts contribute to and maintain distress.

Finally, the “behavior channel” consists of what we actually do in response to the distress. For example, when we’re feeling anxious, we may overeat, get into a fight with someone, or distract ourselves with another activity.

Of course, there are healthier ways to cope and experience emotion in each channel, and that’s what this treatment is all about!

EXAMPLES OF COPING SKILLS FOR EACH CHANNEL

Because these channels are interconnected, we can target interventions at any one channel. The bonus effect is that targeting one channel will have an impact on the other channels as well. People differ about which channel feels easiest to tackle first. Not all people feel relief from using each of these coping skills. By trying each one, you’ll find which skills work best for you!

In the body channel, Focused Breathing helps to reduce the bodily symptoms of distress. That’s why you have learned Focused Breathing first! Other relaxation techniques can also help in this way, so you don’t have to stop there.

In the thought channel, Thought Shifting can be effective. Examples of Thought Shifting include cleaning your home, calling a friend, planning a vacation, recalling pleasant past events, watching a funny movie, and counting backward by sevens. Positive Imagery can also intervene in the thought channel. This technique involves calling to mind a situation or setting (real or imagined) in which you feel calm and happy. To get the most benefit from Positive Imagery, you should make the image as clear as possible by imagining how the place looks, smells, feels, and so forth. Another thought channel skill is making Positive Self-Statements. When your thoughts are self-critical, it can be useful to weaken those negative thoughts by formulating positive responses. For example, in response to the thought “I’m a loser,” you may tell yourself, “I’m doing my best.”

In the behavior channel, Take a Break/Time Out and Replacement Behaviors are helpful. Time Out involves leaving a difficult situation for a period of time to reduce your distress before responding. For example, if you’re having a fight with a friend, you can tell your friend that you will finish the discussion in an hour, and then go out for a walk to give yourself time to calm down. Engaging in Replacement Behaviors entails doing pleasurable or neutral activities to distract yourself from distress.

Note that these are all just examples of many options you can select in each of the channels. You and your therapist can select what you think works best for you and what might be appropriate for any given situation.

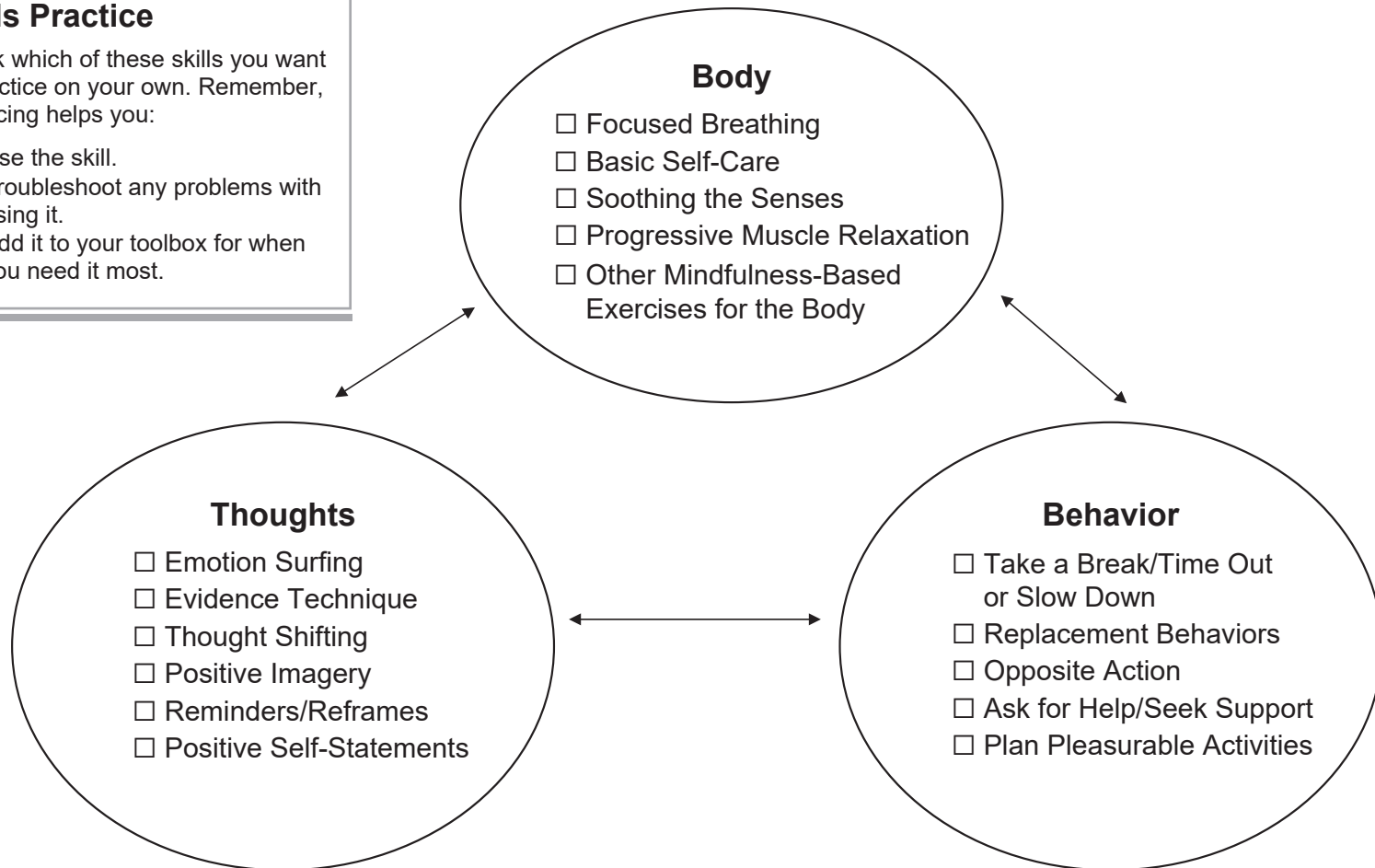
HANDOUT 11.5

Three Channels Skills Graphic

Skills Practice

Check which of these skills you want to practice on your own. Remember, practicing helps you:

- Use the skill.
- Troubleshoot any problems with using it.
- Add it to your toolbox for when you need it most.



HANDOUT 11.6

Negative and Positive Emotions as Messengers

Emotion	Purpose
Fear or anxiety	Keeps you safe.
Anger	Provides warning that action may be needed.
Sadness	Provides time to rest and reevaluate.
Guilt	Lets you review what has been done and make amends as appropriate.
Happiness	Reinforces certain actions and relationships; supports engagement in life.
Pride	Indicates a positive action or result; builds self-esteem/sense of worth.
Love	Helps maintain connection with others, even in times of conflict!

HANDOUT 11.7

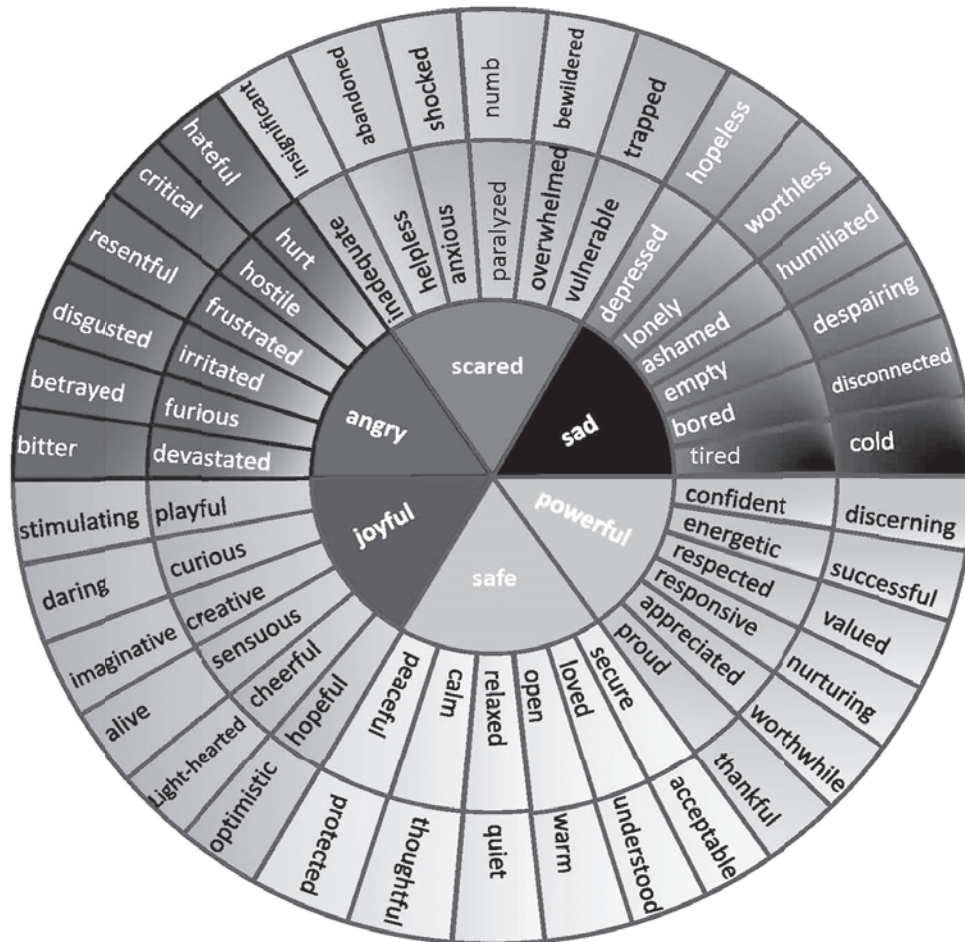
Feelings List

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

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HANDOUT 11.8

Feelings Wheel



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BOX 12.1

Theme and Curriculum for Session 3

Emotion Regulation: Focus on the Body

Individuals learn emotion regulation early in life in the context of relationships with caregivers. Clients who were traumatized as children often have caregivers who cannot regulate their own feelings. Such caregivers may use alcohol or other substances to make themselves feel better, or may express emotions in frightening ways, such as rage or dissociation. Thus clients may never have learned positive and effective ways to cope with their emotions. Instead, such clients may go to extreme measures to avoid difficult feelings or may adopt ineffective strategies they have observed in their environment (e.g., social withdrawal or substance misuse). Understanding such behaviors as unproductive efforts to cope is a first step in learning new, positive, and more adaptive skills to manage feelings. This session is the first of two sessions that introduce specific, healthy coping skills by the emotion channel each set of skills taps. We start with focusing on how emotions are experienced in the body and how clients can learn to cope by using healthy, body-based skills.

PLANNING AND PREPARATION

Review emotion regulation self-report measures to identify patterns that can guide your work with the client. Bring additional copies of the Feelings Monitoring Form (Handout 11.3) and copies of the Session 3 handouts listed below. Prepare several examples of emotion regulation skills for the body channel of emotion. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Elaborate on concept of emotion regulation.
- Identify and evaluate client's current emotion regulation skills.
- Introduce skills for the body channel of emotions:
 - Basic Self-Care.
 - Soothing the Senses.
 - Progressive Muscle Relaxation.
 - Other mindfulness-based skills for the body channel.
- Review misconceptions about emotion regulation work (as necessary).

(continued)

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- Summarize the goals of the session.
- Plan skills practice:
 - Complete Feelings Monitoring Form once a day (note positive and negative emotions). Specify coping skills on the body channel that were used to deal with difficult feelings or situations described in entries.
 - Practice one or more new body channel skills once a day.
 - Practice Focused Breathing twice a day.

SESSION HANDOUTS

Handout 12.1. Healthy and Unhealthy Ways to Cope on the Body Channel

Handout 12.2. Body Channel Coping Skills

Handout 12.3. Basics of Self-Care (A Body Channel Skill)

Handout 12.4. Soothing the Senses (A Body Channel Skill)

Handout 12.5. Progressive Muscle Relaxation (A Body Channel Skill)

Additional copies of Handout 11.3. Feelings Monitoring Form

HANDOUT 12.1

Healthy and Unhealthy Ways to Cope on the Body Channel

Check any of the following if they seem familiar to your own experience. All of them are common among survivors of trauma.

UNHEALTHY EFFORTS TO COPE

- Poor sleep habits
- Poor diet (examples: fast food only, overeating, undereating)
- Use of harmful substances
- No or limited exercise
- Pushing your body too much or too much exercise
- Ignoring your body (examples: not treating illness, not visiting the doctor or dentist, ignoring physical discomfort like being too hot or too cold)
- Self-harm to cope with negative feelings or to help with numbness (examples: pinching yourself, cutting, burning, etc.)
- Poor hygiene (examples: not showering, not shaving, not combing your hair)

Others?

- _____
- _____
- _____

Check any of the following that you'd like to practice for coping better with your feelings.

HEALTHY EFFORTS TO COPE: BODY CHANNEL SKILLS

- Focused Breathing
- Basic Self-Care
- Soothing the Senses
- Progressive Muscle Relaxation
- Other mindfulness-based body exercises (sitting meditation, walking meditation, etc.)

Others?

- _____
- _____
- _____

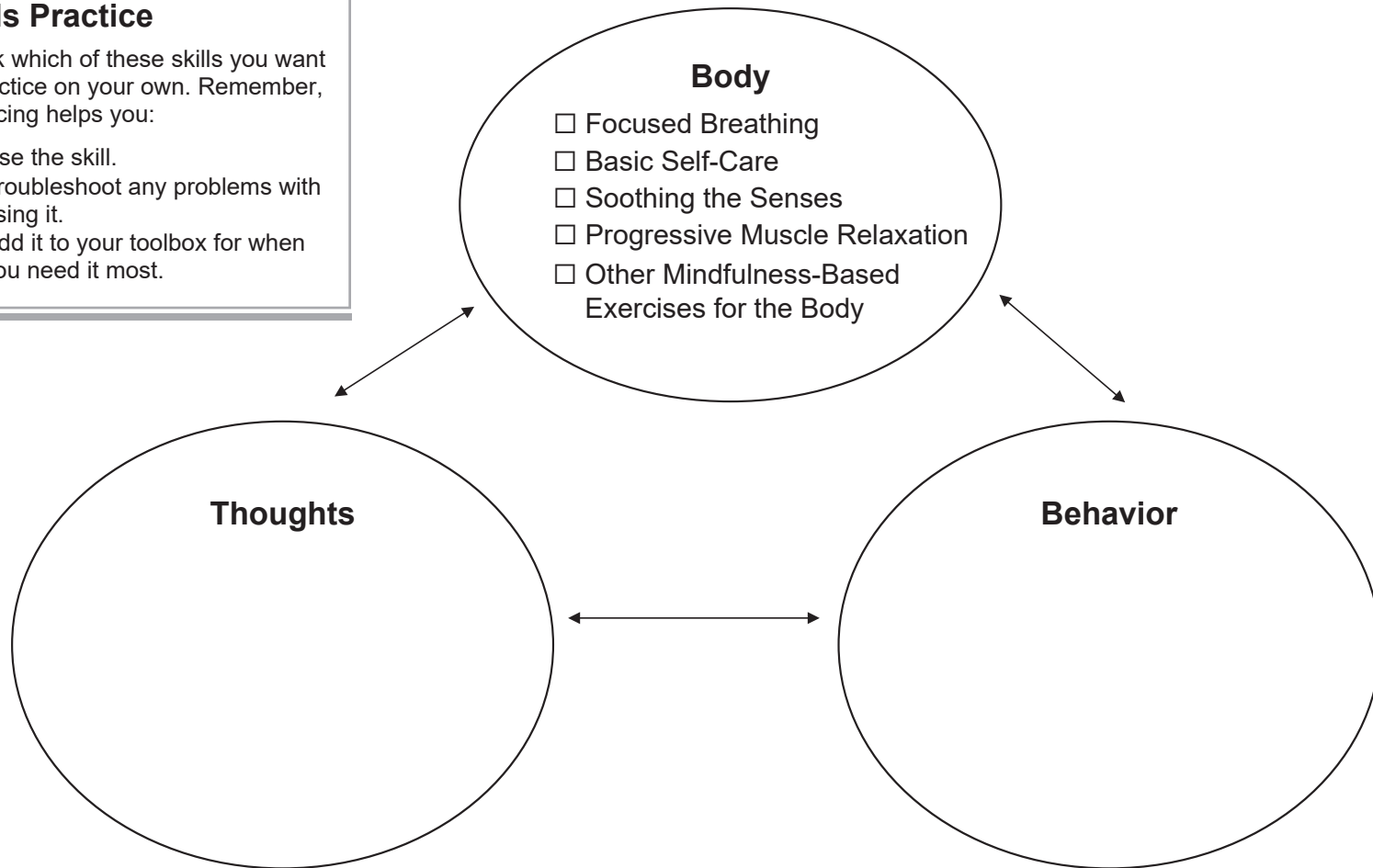
HANDOUT 12.2

Body Channel Coping Skills

Skills Practice

Check which of these skills you want to practice on your own. Remember, practicing helps you:

- Use the skill.
- Troubleshoot any problems with using it.
- Add it to your toolbox for when you need it most.



HANDOUT 12.3

Basics of Self-Care (A Body Channel Skill)

IMPROVING YOUR EMOTIONAL HEALTH

Your emotional health is like your physical health: It needs nurturing. When it does not get care, you begin to show more strain, and it has an impact on what triggers you, how you respond (thoughts/feelings), and how you behave as a result.

WHAT WOULD IT TAKE TO REFUEL YOUR EMOTIONAL TANK?

- Meet your basic needs.
 - *Stress and lack of attention to your body* (hunger, thirst, rest, illness, discomfort/pain, hygiene, and exercise) can influence your mood.
 - *Routinely refuel your body.* Treat your body well with a good diet, adequate sleep, regular exercise, and other healthy behaviors.
- **Exercise.** Take a walk, run, or stretch.
- **Improve your physical environment to make yourself feel comfortable.** When possible, notice your response to temperature, clothing, colors/textures, sounds/noise, and clutter. Small changes in your surroundings can increase serenity and positive emotions.
- **Create a Basic Self-Care health plan.** Make *one* commitment to do something to improve your physical health, starting today. Schedule and track your activities related to this commitment. You can use the Feelings Monitoring Form to track how specific Basic Self-Care practices you try out affect your mood, thoughts, and behavior.

- Sleep _____
- Eating _____
- Exercise _____
- Your environment _____

HANDOUT 12.4

Soothing the Senses (A Body Channel Skill)

In addition to basic refueling and other aspects of self-care, you can learn skills for reducing stress. You have already learned the Focused Breathing exercise, which you should keep on using. The Soothing the Senses skill is about exploring ways that your bodily senses can help calm you. You can pick any or all of the sense experiences below to explore, but pick at least two. For your chosen senses, write down specific soothing examples that come to mind. It helps to choose ones that you can either imagine vividly or actually experience when you want to relax.

GET IN TOUCH WITH THE ENVIRONMENT, USING ALL FIVE SENSES

Sight

- What can you carry with you to **look** at that is soothing? _____

Sound

- What can you **listen** to that is soothing, or which person can you call? _____

Smell

- What can you **smell** that is soothing? _____

Taste

- What can you **taste** that is soothing? _____

Touch

- What can you **touch** that is soothing? _____

Try to target more than one sense at a time, to help you relax more quickly and effectively.

HANDOUT 12.5

Progressive Muscle Relaxation (A Body Channel Skill)

Brief description: You'll be alternately tensing and relaxing specific groups of muscles. After tension, a muscle will be more relaxed than it was before the tensing. Concentrate on the feel of the muscles—specifically, the contrast between tension and relaxation. In time, you will recognize tension in any specific muscle and will be able to reduce that tension. This exercise may be especially helpful for people with chronic pain and/or dissociation.

How often do you practice it? Do the entire sequence once a day if you can, until you feel you are able to control your muscle tensions.

Before the exercise: Sit in a comfortable chair or lie down on a bed. Get as comfortable as possible—no tight clothes, no shoes. Also, don't cross your legs.

Be careful: If you have problems with pulled muscles, broken bones, or any medical contraindication for physical activities, consult your doctor first. Don't do things that hurt. If you have pain in a specific area, skip that area.

Directions: Take a deep breath; let it out slowly. Again. Don't tense muscles other than the specific group at each step. Don't hold your breath, grit your teeth, or squint! Breathe slowly and evenly and think only about the tension–relaxation contrast.

- Each tensing is for 10 seconds; each relaxing is for 10 or 15 seconds. Count “one-one-thousand, two-one-thousand . . .” until you have a feel for the time span.
- Note that each step is really two steps: one cycle of tension–relaxation for each set of opposing muscles.
 1. Hands.
 2. Biceps and triceps.
 3. Shoulders.
 4. Neck
 5. Mouth.
 6. Tongue
 7. Eyes.
 8. Back.
 9. Butt.
 10. Thighs.
 11. Stomach.
 12. Calves and feet.
 13. Toes.

BOX 13.1

Theme and Curriculum for Session 4 *Emotion Regulation: Focus on Thoughts and Behaviors*

The focus of this session is on introducing and exploring trauma-driven maladaptive thoughts and behaviors, and exploring alternative ways of thinking and behaving. This session completes the introduction and review of the three channels of emotion. The body channel interventions from the previous session ideally help the client move away from a sense of chronic crisis or threat, which in turn opens a window of opportunity for the client to become curious and open about what changes might be of value to them. The goal of the session is to engage and motivate the client to select, test, and practice alternative thoughts and behaviors that match the client's personal and interpersonal aspirations. The tools selected should be based on the client's preferences and strengths. The ultimate goal of the session is to integrate all three channels and demonstrate how they all work together.

PLANNING AND PREPARATION

Bring extra copies of the Feelings Monitoring Form (Handout 11.3) and copies of the Session 4 handouts listed below. Review the skills for the thought and behavior channels, and consider which might be a good match for the client. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Review trauma-related patterns of thinking.
- Review and select thought channel skills.
- Review trauma-related patterns of behaviors.
- Review and select behavior channel skills.
- Explore positive emotions and plan pleasurable activities.
- Complete Summary of Three Channels of Emotion Skills checklist.
- Apply new skills to Feelings Monitoring Form.
- Summarize the goals of the session.

(continued)

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- Plan skills practice:
 - Complete Feelings Monitoring Form once a day (note positive and negative emotions). Specify coping skills in any channel that were used to deal with difficult feelings or situations described in entries.
 - Practice at least one skill identified in each of the thought and behavior channels (continue practicing body channel skills as helpful to client).
 - Continue to practice Focused Breathing twice daily
 - Do something pleasurable.

SESSION HANDOUTS

Handout 13.1. Typical Trauma-Related Thought Patterns

Handout 13.2. Thought Channel Skills for Emotion Regulation

Handout 13.3. Emotion Surfing

Handout 13.4. Examples of Positive Self-Statements (Affirmations)

Handout 13.5. Typical Trauma-Related Behaviors

Handout 13.6. Behavior Channel Skills for Emotion Regulation

Handout 13.7. Time Out (A Behavior Channel Skill)

Handout 13.8. Opposite Action (A Behavior Channel Skill)

Handout 13.9. Pleasurable Activities List

Handout 13.10. Summary of Three Channels of Emotion Skills

Additional copies of Handout 11.3. Feelings Monitoring Form

HANDOUT 13.1

Typical Trauma-Related Thinking Patterns

- Assuming that you are not safe
- Assuming that no one is there for you or won't help you
- Avoiding thinking about your own negative emotions
- Refusing to trust others and/or yourself
- Tuning in the negative and tuning out the positive
- “Black-and-white” thinking (everything is either one way or the other; there are no in-betweens)
- “Doomsday” thinking (“What’s the use?”)
- Being tyrannized by the “shoulds” (“shoulda, woulda, coulda . . .”)
- Avoiding thoughts and memories
- Thinking nonstop about problems; trying to prolong negative feelings
- “Blanking out” or dissociating

HANDOUT 13.2

Thought Channel Skills for Emotion Regulation

- **Emotion Surfing**
 - Imagine your emotions are waves in the ocean, rising and falling; notice how they change naturally over time.
 - Be aware of your feelings, but just “ride on top” of them.
- **Evidence Technique**
 - *What's the proof?* List the evidence for and against the accuracy of a negative thought.
 - *How strong is the proof?* Compare the evidence for and against the accuracy of the thought, to determine how realistic or valid it is.
 - *What else could it be?* Consider alternatives; ask friends or people you trust for ideas.
 - *Try it on for size.* Live with each alternative for a while, and consider the benefits.
 - *Let go.* Be willing to let go of inaccurate or unhelpful automatic thoughts.
- **Thought Shifting**
 - *Temporarily shift your attention*, rather than focusing on your worries, until your distress is down to a level where you can think clearly and act appropriately.
 - *Shift to another thought*: Focus on something else in the room (e.g., colors, lights, smells), or replace your thought with another thought—a positive thought/statement, memory, or image.
 - *Shift to a healthy activity*: To help change your focus, go for a walk, listen to music, watch a video, clean/organize, call a friend, or complete some easy tasks that remain unfinished.
- **Reminders/Reframes**
 - These are predetermined positive interpretations. Especially good are ones about accepting your feelings, such as these:
 - “Feelings are just feelings, and thoughts are just thoughts; they are not facts, and they don’t have to control my behavior.”
 - “Feelings are short-term and will not be there forever.”
 - “Stuffing feelings inside only makes it harder.”
- **Positive Self-Statements**
 - These are positive thoughts, mantras, or goals to repeat regularly and commit to practicing.
- **Positive Imagery**
 - *Imagine/visualize a situation or setting* (real or imagined) where you feel calm and good.
 - *Make that image as clear and vivid as possible* by imagining how the place looks, smells, sounds, etc.
 - *Keep it handy.* Keep pictures or symbols to remind you of the image/memory (in your phone or wallet, or on a keychain) to help remind you of the positive setting when you’re distressed.

HANDOUT 13.3

Emotion Surfing

1. Notice your emotion.
2. Notice how it feels in your body.
3. Notice your thoughts.
4. Notice your behavior.
5. Notice the intensity of the emotion.
6. Notice how the emotion crests, like a wave.
7. Notice how the emotion (body, thoughts, behavior) slowly changes and diminishes over time.

HANDOUT 13.4

Examples of Positive Self-Statements (Affirmations)

- “I choose to LIVE!”
- “Excellence does not require perfection.”
- “I am letting my feelings drive my actions and beliefs. I don’t have to.”
- “If I try, I can succeed.”
- “I can ask for help.”
- “I am willing to forgive.”
- “I don’t have to act on this feeling. I can make choices about how I behave.”
- “The most common way people give up their power is thinking they don’t have any.”
- “This too shall pass.”
- “One day at a time.”
- “I write my own story.”

Your own personal mantra:

HANDOUT 13.5

Typical Trauma-Related Behaviors

Check which of these behaviors are true for you:

- Avoiding necessary daily activities to avoid anxiety (example: not opening mail or paying bills because doing so feels like “too much”)
- Getting stuck in addictive behaviors: alcohol, drugs, food, gambling, pornography, shopping, video games
- Purposefully avoiding taking care of yourself: restricting food intake, stopping self-care
- Acting aggressively to distance others
- Avoiding family and friends
- Taking care of other people to avoid your own problems
- Avoiding having experiences that are positive or pleasurable
- Using controlling behavior to avoid feeling unsafe in situations and in relationships
- Treating people badly when you are struggling with negative feelings
- Other: _____

HANDOUT 13.6

Behavior Channel Skills for Emotion Regulation

- **Take a Break/Time Out**
 - Take a Break/Time Out:
 - Remove yourself from the situation.
 - Identify and communicate (if possible) a time you will return.
- **Replacement Behaviors and Opposite Actions**
 - Replacement Behaviors:
 - Plan to do something as a replacement for a less helpful habit or addictive behavior.
 - Choose (ahead of time) options that are enjoyable.
 - Opposite Actions:
 - Don't give in automatically to your initial impulse when under stress.
 - Choose a healthy action to counter your emotional urge.
- **Ask for Help/Seek Support**
 - Call or text a friend/family member/sponsor/provider, and share your frustrations or ask for help.
 - Attend a meeting or group.
 - If in crisis, call a 24/7 hotline (identify your local number).
- **Plan Pleasurable Activities (see Handout 13.9, Pleasurable Activities List)**
 - Routinely engage in meaningful and pleasant activities to increase your enjoyment.
 - When distressed, use pleasant activities to improve your mood.

HANDOUT 13.7

Time Out (A Behavior Channel Skill)

- **Goal:** Allowing yourself to take a break from a stressful situation until your emotional level has decreased and you are less upset. This is deliberately choosing to take a break, not avoidance that is automatic and unhelpful.
- **When to use it**
 - You are struggling with an automatic response that feels overwhelming.
 - You think you may make the situation worse.
 - You are so worked up that you cannot think clearly enough to be effective in the situation.
 - Example: You become very angry while arguing with a family member and think you may say hurtful things or become violent.
- **How to use it effectively**
 - **Simply stop** the discussion that is provoking your increased distress, and/or leave the situation that is causing your escalation.
 - **Communicate** to others what you are doing, why, and when you will be back.
 - **Example:** “I am feeling really angry, and I need a Time Out before I say or do something I will regret. I’m going to take the day to cool down. When I come back and you are willing, I would like to continue this conversation.”
 - **During Time Out:**
 - Do not try to purposefully hold on to the negative emotion, increase the emotion, or try to suppress/avoid it.
 - Notice the emotion and watch it slowly ebb away.
 - Engage in an activity (like a walk) or other coping strategies that will help you deescalate your distress. Time Out can also be used with other strategies, and you may want to think about activities that would best suit you and your needs.

HANDOUT 13.8

Opposite Action (A Behavior Channel Skill)

Your Emotion	Your Urge	Opposite Action
Anxiety	Avoid	<input type="checkbox"/> Approach. <input type="checkbox"/> Do it anyway (repeatedly). <input type="checkbox"/> Start small.
Anger	Attack/punish	<input type="checkbox"/> Practice empathy and sympathy. <input type="checkbox"/> Do something nice. <input type="checkbox"/> Disengage from conflict or stressor.
Sadness	Isolate/withdraw	<input type="checkbox"/> Be active. <input type="checkbox"/> Do things that make you feel competent. <input type="checkbox"/> Do things that you enjoy.
Guilt	Hide/punish self or others	<input type="checkbox"/> Understand whether this feeling is justified or not. <input type="checkbox"/> Identify and repair wrong as needed. <input type="checkbox"/> Commit to doing things differently in future, accept consequences, and let go.
Shame	Hide	<input type="checkbox"/> Understand whether this feeling is justified or not. <input type="checkbox"/> Accept and have compassion for self. <input type="checkbox"/> Commit to doing things differently in the future, accept consequences, and let go.
Feeling overwhelmed	Shut down/avoid	<input type="checkbox"/> Slow things down. <input type="checkbox"/> Be present in the current moment. <input type="checkbox"/> Make a list. <input type="checkbox"/> Start with small steps. <input type="checkbox"/> Do it anyway (repeatedly).
Hopelessness	Give up	<input type="checkbox"/> Do it anyway (repeatedly). <input type="checkbox"/> Start small.

HANDOUT 13.9

Pleasurable Activities List

Arts and crafts	Listening to music
Bike riding	Meditating
Browsing in a bookstore	Painting
Camping	Pampering yourself (haircut, shave, manicure/ pedicure, facial, etc.)
Cooking	People watching
Dancing	Photography
Drawing	Playing music
Exercising	Playing board games/cards with friends or family
Fishing	Playing with pets or kids
Gardening	Reading a book
Getting a massage	Relaxing in the park
Going for a drive	Sitting in a coffee shop
Going hiking	Supporting a cause
Going on a picnic	Swimming
Going to church	Taking a long hot bath
Going to a library	Taking an interesting class
Going to a play or concert	Taking a walk
Going to a museum	Talking on the phone with a friend
Having lunch/dinner with a friend	Visiting friends
Hanging out with a good friend	Viewing beautiful scenery
Helping a friend	Volunteering
Jogging	Watching a game on TV
Journal writing	Watching a favorite movie
Lifting weights	
Others:	

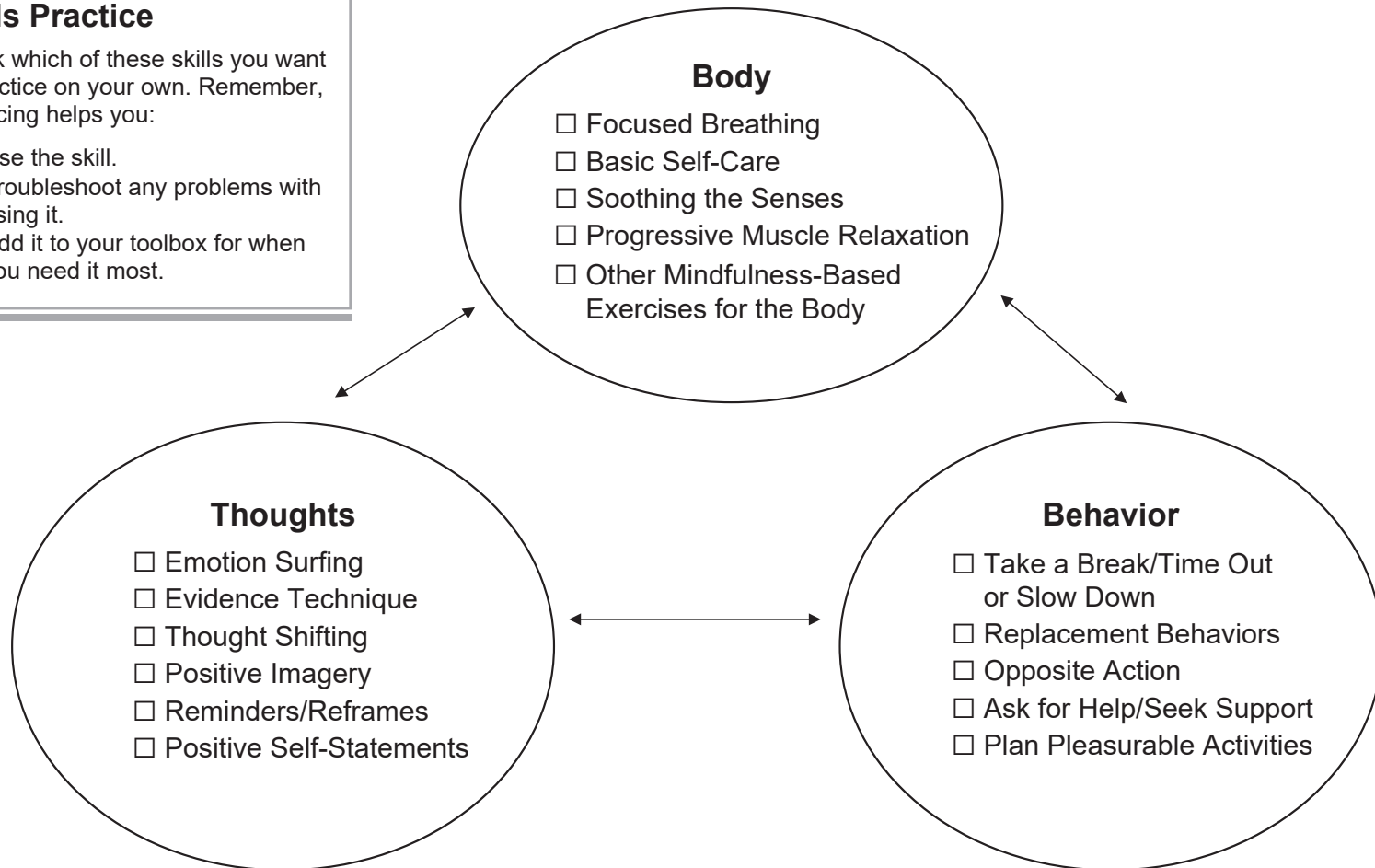
HANDOUT 13.10

Summary of Three Channels of Emotion Skills

Skills Practice

Check which of these skills you want to practice on your own. Remember, practicing helps you:

- Use the skill.
- Troubleshoot any problems with using it.
- Add it to your toolbox for when you need it most.



BOX 14.1

Theme and Curriculum for Session 5 *Emotionally Engaged Living: Distress Tolerance*

This session introduces the counterintuitive idea that tolerating and even accepting some emotional distress can be healthy and can advance the client toward improved life functioning. A clear distinction is made between distress that results from trauma, and necessary distress that emerges as part of reaching one's chosen goals. This session provides clients with practice in identifying goals, determining the value of each goal in relation to unavoidable distress, and deciding to reject or accept the goal and attendant distress. A key task in this session is to identify and consolidate skills from each of the three channels that are working well for the client, and to highlight ways the skills can be integrated to help manage a single situation. The selection of valued goals provides an opportunity for the client and therapist to consolidate the client's mastery of skills and integrate their use into daily life. Each of the previous sessions has introduced new skills. This session provides an opportunity to take a "step back" and review which skills have been working well for the client, and consciously and purposefully to review their potential value in reaching a valued goal. Lastly, the therapist encourages the client to value positive feelings as a guide to goal identification, and to engage in "approach behaviors" toward positive life experiences.

PLANNING AND PREPARATION

Review concept of distress tolerance. Bring extra copies of the Feelings Monitoring Form (Handout 11.3) and a copy of each of the two handouts for this session. Prepare several examples of tolerating distress in pursuit of valued goals that may be relevant to your client in the treatment. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Present concept of distress tolerance.
- Assess the client's distress tolerance skills.
- Connect distress tolerance to client's goals.
- Present and practice skill of assessing Pros and Cons.
- Match distress reduction strategies to goals.

(continued)

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- Introduce practice of distress tolerance during life’s “random moments.”
- Discuss role of positive feelings in pursuing goals.
- Prepare client for work on interpersonal problems.
- Summarize the goals of the session.
- Plan skills practice:
 - Complete Feelings Monitoring Form once a day (note positive and negative emotions). Specify coping skills in any channel that were used to deal with difficult feelings or situations described in entries.
 - Identify three emotion regulation skills relevant to client’s needs and practice one each day, especially in situations where tolerating distress is helpful.
 - Continue to practice Focused Breathing twice daily.
 - Schedule at least one pleasurable activity per week.

SESSION HANDOUTS

Handout 14.1. What Is Distress Tolerance and Why Should I Do It?

Handout 14.2. Using Three Channels of Emotion Skills to Reach Goals

Additional copies of Handout 11.3. Feelings Monitoring Form

HANDOUT 14.1

What Is Distress Tolerance and Why Should I Do It?

Distress tolerance is . . .

- The ability to endure pain or hardship without resorting to unhelpful actions that are damaging to yourself or others.
- Distress tolerance is a necessary life skill that most of us practice daily.
- It requires us to weigh the **Pros and Cons** of tolerating stress when it's necessary to reach our goals.
- Examples:
 - Effectively controlling your anger when you feel a friend or family member has wronged you.
 - Managing anxiety when you are receiving a performance review from your work supervisor.
 - What are other examples?

Why tolerate unpleasant emotions? Because doing so . . .

- **Allows us to act in a crisis**, instead of giving up or freezing.
- **Frees up energy we use for avoidance.** Avoiding stress saps energy.
- **Enables us to make positive changes.** If you don't allow yourself to be in touch with distress, there'll be no motivation to make important changes. Distress can tell you that something is wrong, as well as which areas in your life you need to pay attention to and change.
- **Allows us to experience positive emotions.** Avoiding feelings means that most or many feelings are cut off, not just negative ones. Tolerating more difficult feelings has an important benefit: It allows us to be more open to having positive feelings as well.
- **Allows us to achieve goals.** It allows us to do difficult but worthwhile things (such as interviewing for a job). Preparing to make any major life change involves some anxiety and discomfort. By tolerating distress, we allow ourselves to achieve goals important to us.

Use your new skills to tolerate what you need to and live the life you want to live!

HANDOUT 14.2

Using Three Channels of Emotion Skills to Reach Goals

Distress Tolerance

Check which of these skills you can use to tolerate distress. Remember to use skills when tolerating distress helps you:

- Reach your goals.
- Live your values.
- Improve your relationships (without causing undue harm to you!).

Body

- Focused Breathing
- Basic Self-Care
- Soothing the Senses
- Progressive Muscle Relaxation
- Other Mindfulness-Based Exercises for the Body

Thoughts

- Emotion Surfing
- Evidence Technique
- Thought Shifting
- Positive Imagery
- Reminders/Reframes
- Positive Self-Statements

Behavior

- Take a Break/Time Out or Slow Down
- Replacement Behaviors
- Opposite Action
- Ask for Help/Seek Support
- Plan Pleasurable Activities

BOX 15.1

Theme and Curriculum for Session 6

The Resource of Connection: Understanding Relationship Patterns

Relationship models are templates for how we expect relationships to work. Originally described by John Bowlby, the father of attachment theory, relationship models arise from actual experiences with caregivers and other important persons in our lives. They represent ideas about who we are, what we expect of others, how relationships work, and what outcomes we expect. Relationship models that arise in the context of childhood interpersonal trauma are typically adaptive in the traumatic context, but once the trauma is over or life conditions have changed, they may no longer be effective for happy and healthy living. The goal of this session is to help clients identify trauma-generated relationship models by reviewing current relationship problems and having the client consider whether they may have “outgrown” their old models. The next session will invite the client to consider developing and testing new relationship models.

PLANNING AND PREPARATION

Review interpersonal situations described in past Feelings Monitoring Forms as a guide to formulating potential relationship models that can be shared and discussed with the client. Bring several copies of Handout 15.3, and a copy of each of the other handouts listed below. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Introduce concept of relationship models and patterns.
- Explore and identify client’s relationship patterns.
- Review common relationship beliefs among survivors of trauma.
- Introduce Relationship Patterns Worksheet–1.
- Practice using Relationship Patterns Worksheet–1.
- Summarize the goals of the session.

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- Plan skills practice:
 - Complete a copy of Relationship Patterns Worksheet–1 once daily.
 - Include emotion regulation skills as relevant to the situation, and keep practicing Focused Breathing.
 - Engage in one pleasurable activity.

SESSION HANDOUTS

Handout 15.1. Relationship Models: Instruction Manuals for Relationships

Handout 15.2. Common Relationship Beliefs among Survivors of Trauma

Handout 15.3. Relationship Patterns Worksheet–1 (several copies)

Handout 15.4. How to Complete Relationship Patterns Worksheet–1

HANDOUT 15.1

Relationship Models: Instruction Manuals for Relationships

WHAT DOES YOUR RELATIONSHIP INSTRUCTION MANUAL LOOK LIKE?

- **What are relationship models?** These are models we develop of relationships that act as “blueprints” or “instruction manuals.” They reflect our beliefs about ourselves, about others, and about how relationships work. They guide our expectations, feelings, and behaviors in relationships.
- **How are they created?** They are initially formed in our early environments, in the context of our relationships to caregivers and our experiences in our families. We learn to think, do, and feel *what allowed us to be successful or kept us safe* in those situations:
 - *We do what rewarded us then.* For example, being a nurturer led to love, or being distrustful/keeping people at a distance led to safety.
 - *We don't do what led to punishment/negative consequences then.* For example, trusting others or relaxing your guard led to abuse, or asserting your needs led to aggression, criticism, or danger.
- **How are they influenced by trauma?** Abusive or neglectful environments, or other traumatic experiences, affect how these models are developed and often result in negative beliefs about ourselves and expectations that others will view and treat us poorly.
 - Example: “I can't trust others; other people will hurt me.”
- **How do they affect us now?** The relationship models we developed earlier in life continue to play a central role in shaping thoughts, feelings, and behaviors in ways that we may not be aware of or notice. We bring them into adulthood and apply them to current situations.
 - Example: “I still can't trust others, even now.”
- **How do they become relationship patterns?** Relationship models can act as self-fulfilling prophecies, because they lead us to behave in ways that prepare us for what we expect will happen in relationships. Over time the relationship models we rely on become more generalized and ingrained, and form our relationship patterns. We don't give ourselves opportunities for new experiences or look for evidence that might contradict our beliefs. Instead, we may continue to behave in ways we learned in early relationships, which may not be effective or helpful in current relationship situations.
 - Example: Shelby has a belief that no one will love him because he is unlovable. So he keeps others at a distance and isolates himself. Therefore, he misses opportunities for others to get to know him. He then uses the fact that he does not have close friends or a romantic partner as evidence that he must be unlovable.
- **The good news: Relationship patterns can be modified!** You can write a new instruction manual for yourself. This treatment will help you explore, identify, and change patterns to be more flexible and effective in your current and future relationships.

HANDOUT 15.2

Common Relationship Beliefs among Survivors of Trauma

The first step to changing your relationship patterns is identifying them. Check the beliefs that you recognize in your life.

SAFETY

- If I let someone close to me, I may get hurt.
- The only way to stay safe is to keep others at a distance
- If I am alone, I can't take care of or protect myself.

TRUST/INTIMACY

- I can't trust my own judgment to stay safe, or I have bad judgment.
- No one can be trusted. I can't trust that others will keep me safe or have my best interests in mind.
- I can't trust anyone enough to share what happened to me.
 - Others cannot handle hearing my experiences.
 - They will judge/hate/disrespect me if they find out what has happened to me.

POWER/CONTROL

- I cannot control anything in my life. I am powerless to solve problems in my life.
- I cannot trust others to be in control.
- People who have power abuse it.
- Who has power is an either-or situation. Only one person can have power (either another person has it or I have it, but both of us cannot have power).

SELF-ESTEEM/NEEDS

- If I share my problems or disclose my feelings, I will not be respected or will be seen as weak.
- If I don't sacrifice my goals/needs in relationships, others will not love me.
- Others' needs are more important than my own.
- Asserting my needs will cause problems in my relationships.
- Only one person's needs can be met at a time.
- If I am not in a romantic relationship, something is wrong with me.
- I am broken/crazy/unlovable.

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HANDOUT 15.3

Relationship Patterns Worksheet–1

Interpersonal situation	What did I feel and think about myself?		What were my expectations about the other person?		My resulting behavior
What happened?	My feelings	My thoughts	Their feelings	Their thoughts	What did I do?
speaking with housing specialist	furious	I don't trust myself to handle this without going off	disinterested doesn't care	She's not as important as my other clients	avoided talking to housing specialist, but couldn't wait anymore and then went into her office and yelled at her

-someone upsets me

-I wil lash out

Relationship model: "If -things don't go my way, then -I don't trust myself to handle it well."

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HANDOUT 15.4

How to Complete Relationship Patterns Worksheet–1

- Take note when your interactions with others feel uncomfortable, confusing, or stressful, or lead to misunderstandings or conflicts.
- Notice your thoughts and emotions in these challenging interactions.
- Notice what your expectations of others are in these situations. Notice what you believe is going on for them (their thoughts, emotions, and behaviors) and your evidence for your expectations (is it “hard evidence,” or could you be “mind reading”?).
- You will summarize this by using two new tools called the Relationship Patterns Worksheets. Today we will introduce the first of these sheets, Relationship Patterns Worksheet–1.
- You will note that Relationship Patterns Worksheet–1 is just like the Feelings Monitoring Form, in that you will focus on situations, thoughts, and feelings. The only difference is that now it involves two people, and you will also focus on your beliefs about the other person’s feelings and thoughts about the situations.
- After you have completed describing the problematic situation, try to identify what relationship model or “blueprint” you may have been using in this situation.

BOX 16.1

Theme and Curriculum for Session 7

Changing Relationship Patterns: Focus on Assertiveness

Once the client's key relationship models have been identified, the next step is to begin generating alternative, more flexible ones. Though this is not an easy process, therapist and client develop aspirational relational models and then experiment with new ways of interacting with others that align with the models. These include making new assumptions, trying out alternative behaviors, and exploring different feelings. Role playing and covert modeling are useful ways to develop and practice new interpersonal skills. This session focuses on identifying and revising problematic patterns related to assertiveness.

PLANNING AND PREPARATION

Using material from past sessions, consider what type of assertiveness problems the client may have. Bring handouts for this session, including several copies of Handout 16.4 (see list below). The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Provide psychoeducation about assertiveness and basic personal rights.
- Clarify basis of client's assumptions about assertiveness (as relevant).
- Review and practice an "I Message" (the first role play).
- Complete Relationship Patterns Worksheet–2.
- Introduce additional assertiveness skills to practice.
- Summarize the goals of the session.
- Plan skills practice:
 - Complete two copies of Relationship Patterns Worksheet–2, with a focus on assertiveness.
 - Use skills from all channels as applicable to interpersonal events described in the copies of Relationship Patterns Worksheet–2.
 - Do something pleasurable.
 - Continue to practice Focused Breathing twice daily.

(continued)

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SESSION HANDOUTS

Handout 16.1. Understanding Assertiveness

Handout 16.2. Basic Personal Rights

Handout 16.3. “I Messages”

Handout 16.4. Relationship Patterns Worksheet–2 (several copies)

Handout 16.5. Additional Assertiveness Skills

Handout 16.6. Practicing Assertiveness to Improve Relationship Patterns

HANDOUT 16.1

Understanding Assertiveness

- “Assertive behavior” means standing up for your legitimate rights and presenting your needs/wants in a way that is respectful of both yourself and others. Assertive behavior may lead you to feel confident, self-respecting, and good about yourself.
- “Nonassertive behavior” means ignoring or not expressing your own rights, needs, and desires. Nonassertive behavior may lead you to feel hurt, resentful, anxious, disappointed, and/or angry.
- “Aggressive behavior” means expressing your own rights at the expense of others through inappropriate outbursts or hostility. Aggressive behavior may lead you to feel angry, indignant, out of control, and/or guilty.

HANDOUT 16.2
Basic Personal Rights

1. I have the right to ask for what I want.
2. I have the right to say no.
3. I have the right to feel and express my feelings, both positive and negative.
4. I have the right to make mistakes.
5. I have the right to have my own opinions, convictions, and values.
6. I have the right to be treated with dignity and respect.
7. I have the right to change my mind or decide on a different course of action.
8. I have the right to protest unfair treatment or criticism.
9. I have the right to expect honesty from others.
10. I have the right to be angry at someone I love.
11. I have the right to say, "I don't know."
12. I have the right to negotiate for change.
13. I have the right to be in a nonabusive environment.
14. I have the right to ask for help or emotional support.
15. I have the right to my own needs for personal space and time, even if others would prefer my company.
16. I have the right not to have to justify myself to others.
17. I have the right not to take responsibility for someone else's behavior, feelings, or problems.
18. I have the right not to have to anticipate others' needs and wishes.
19. I have the right not to have to worry all the time about the goodwill of others.
20. I have the right to choose not to respond to a situation.

HANDOUT 16.3

“I Messages”

- Goal: To express hurt feelings or distress, or to give feedback about another’s behavior.
 - The key is to focus on the consequences you experience due to the other person’s troubling behavior, rather than focusing on the person themselves. Focusing on the consequences their behavior causes you makes it less likely that the person will feel attacked or criticized.
- Format: Situation (or Behavior) → Feeling → Consequence.
- The following formula can be helpful: “When I [state observed behavior], I feel [state the feeling], because [state the consequence for you].” Example:
 - “When I had to wait longer to be picked up today, I was upset, because I did not have time to get all my errands done.”
- Success in this exercise means stating your concerns clearly and respectfully, not necessarily having the other person agree with you.

An “I Message” has three parts: a situation, a feeling, and a result.

1. Situation: What is happening around you? What is the other person doing?

2. Feeling: How does the person’s behavior make you feel?

3. Consequence: What happens as a result?

Use this structure for your sentence:

“When I _____ [situation],
I feel _____ [feeling],
because _____ [result].”

HANDOUT 16.4

Relationship Patterns Worksheet–2

Interpersonal situation	What did I feel and think about myself?		What were my expectations about the other person?		My resulting behavior
<p>What happened?</p> <p>BF canceled</p>	<p>My feelings</p> <p>disappointment neglected</p>	<p>My thoughts</p> <p>i'm not that imp. secondary to everything</p>	<p>Their feelings</p> <p>excitement happiness</p>	<p>Their thoughts</p> <p>yay, extra work didn't think about me at all</p>	<p>What did I do?</p> <p>hung up on him so he came to the house and said I think we're having a problem with the phone</p>

a better opportunity comes along

I will be secondary, it's because

Relationship model: "I am in a rel with someone, _____, then _____."

no one really cares about me

then my needs are not as important as theirs

Interpersonal goals for situation	Alternative beliefs and feelings about myself: What else could I . . .		Alternative beliefs and feelings about the other person: What else could I expect the other person . . .		Alternative actions
<p>What are my goals in this situation?</p> <p>to me before canceling dates. to have my needs acknowledged in the relationship too</p>	<p>. . . feel about myself?</p> <p>maybe validated and heard. optimistic</p>	<p>. . . think about myself?</p> <p>I'm important. I'm asking for what I need</p>	<p>. . . to feel?</p> <p>respectful</p>	<p>. . . to think?</p> <p>going to impact plans. I should check in with her before committing</p>	<p>What else could I do?</p> <p>What else might they do?</p> <p>use 3 point message, tell him how I feel</p>

Alternative relationship model: "If _____ If i'm in a relationship with someone, then my needs are _____,

then _____ important too, and I can ask for what I need _____."

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Additional Assertiveness Skills

1. **Making Requests.** Be specific about what you want, and state it clearly and simply.
 - Couch your request as a sentence beginning with “I,” such as “I would like . . .”
 - State the positive consequences of the other’s following through with your request, and/or the negative consequences of the other’s lack of follow-through (an “I Message” may be helpful in this case).
 - Avoid making excuses, downplaying your request, or blaming the other person.
 - Delay the situation if the other person responds angrily or aggressively. Use a coping skill, if useful, to help you calm down before deciding your next step.

2. **Saying No.** The approach you choose depends on the kind of relationship and your interest in maintaining the relationship.
 - If you *do* want to maintain the relationship:
 - Acknowledge the other person’s request by repeating it (do this also to make sure you understand it).
 - Without apologizing, give a brief explanation of your reason for declining.
 - If appropriate, suggest an alternative plan in which both your needs and the other person’s will be met.
 - If Saying No is especially difficult, give yourself some time before responding to a request. You can try coping skills you’ve learned to ease your distress!
 - If you *do not* want to maintain the relationship:
 - Say, “No, thank you,” in a respectful but firm tone. You may still explain why if it will benefit you or ease the situation.
 - If the other person persists, repeat yourself while maintaining eye contact and slightly raising the tone of your voice.
 - Or use the Broken Record approach: Repeat a concise sentence over and over, without getting sidetracked by other issues.

Remember: Behaving assertively doesn’t guarantee that people will respond positively. Though you may sometimes receive negative or unhelpful responses to your assertive behaviors, you will generally, in the long run, be more successful in your interactions with other people.

HANDOUT 16.6

Practicing Assertiveness to Improve Relationship Patterns

GUIDELINES FOR COMPLETING BOTTOM HALF OF RELATIONSHIP PATTERNS WORKSHEET-2

1. Identify a positive goal for the relationship.
2. Identify a belief and feeling that supports the relationship goal. Ask your therapist or a friend for suggestions if you get stuck.
3. Imagine a response from the person that supports your goal. What could they be feeling and thinking? Ask for help if you get stuck.
4. Imagine actions that you can take to support the goal or maintain that goal if you reach it.
5. Try out the action you came up with, see if it works, and adjust your approach as needed.

OTHER ASSERTIVENESS PRACTICE SITUATIONS

- Ask a salesperson to help you find something.
- Call or text a friend you haven't seen in a while to schedule a time to catch up.
- Ask your therapist to explain a concept or skill again if you're having trouble understanding or remembering the details.
- Ask your therapist for additional copies of handouts if you need more or if you misplaced old ones.
- Ask the pharmacist for information on an over-the-counter drug.
- Ask for a substitution on the menu when ordering a meal.
- Ask coworkers or classmates to do a favor for you (for example, ask for them to get you a cup of coffee while they get their own).
- Disagree with someone's opinion politely but with confidence.
- Ask a friend for help in fixing something.
- Ask your landlord to fix a problem in your apartment.
- Ask a person to stop doing something that bothers you—a great opportunity to use an “I Message”!

Note. The majority of the other assertiveness practice situations are adapted from *DBT Skills Training Manual, Second Edition* (p. 255), by Marsha M. Linehan. Copyright © 2015 Marsha M. Linehan. Additional ideas come from authors of this book.

BOX 17.1

Theme and Curriculum for Session 8

Changing Relationship Patterns: Managing Power

This session addresses the effective negotiation of power dynamics in relationships. Individuals who have experienced violence or exploitation often feel uneasy in situations where they feel the pull of power in the interactions. The session introduces the inevitability of power dynamics in relationships—whether the client is in a situation where the power balance is equal, or whether the client feels they have more or less power than the other person. The therapist proposes that the solution to discomfort around power is to experience respect for oneself and for others in every interaction, regardless of the type of power balance. Respect for self and others is critical for good communication, effective partnerships, and social functioning. The session provides skills training in acknowledging and signaling respect for others with an attitude of respect for oneself. Copies of Relationship Patterns Worksheet–2 are used to organize and distill problematic relationship power dynamics, and to provide alternative models of relating that support skills practice in the expression of respect for oneself and others.

PLANNING AND PREPARATION

Consider what kinds of problems in power management the client has been experiencing to organize your discussion in the session. Bring the handouts for Session 8 (listed below), as well as multiple copies of Relationship Patterns Worksheet–2. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Review and discuss three types of power balances.
- Discuss respect and power: Respect is the constant.
- Introduce the Respect Bookends skill.
- Summarize the goals of the session.
- Plan skills practice:
 - Complete two copies of Relationship Patterns Worksheet–2, with a focus on power dynamics.
 - Practice Respect Bookends.

(continued)

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- Use emotion management skills from three channels to support interpersonal work.
- Do something pleasurable.
- Continue Focused Breathing twice daily.

SESSION HANDOUTS

Handout 17.1. Power Balances in Relationships

Handout 17.2. Impact of Trauma on Managing Power Balances

Handout 17.3. Managing Power Balances with Respect

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

HANDOUT 17.1

Power Balances in Relationships

There are three types of power balances in relationships:

Type I: You have equal power with a person (examples: someone who is your friend, sibling, coworker, partner, or team member).

Type II: You have less power than the other person (examples: someone who is your employer, supervisor, parent, teacher, or coach).

Type III: You have more power than the other person (examples: someone who is your child, employee, supervisee, student, or trainee).

Name people you interact with where each type of power balance exists:

I have equal power: _____

I have less power: _____

I have more power: _____

HANDOUT 17.2

Impact of Trauma on Managing Power Balances

Type I: You have equal power (*examples:* friend, sibling, coworker, partner, team member).

Barriers: Although you are equal in power, there are problems. You may see yourself as having more or less power than you do.

Related thoughts:

- Your work colleagues, peers/friends, or family members are threats or enemies.
- They will be aggressive, will be competitive with you, or will exploit you.
- You need to be vigilant and aggressive.
- You need to act like you have more power and authority than you actually have to protect yourself.
- You need to keep a safe distance from them, not trust them.

Type II: You have less power (*examples:* employee, supervisee, child, student, trainee).

Barriers: You have less power than someone else, and you expect them to take advantage of you.

Related thoughts:

- The authority figure or boss is a threat or enemy.
- You feel anxious and worried that something bad will happen to you if they are displeased with you or they are in a bad mood.
- You may be too eager to please, may find it difficult to say no, or may not ask for the authority or resources you need or want, because you are afraid they will punish/hurt you.
- You become angry and accuse them of being exploitative when that might not be true, but you were too afraid to ask about things you were seeing going on and made your own interpretation.

Type III: You have more power (*examples:* parent, employer, supervisor, teacher, coach).

Barriers: You have more power than others, and this makes you very uncomfortable.

Related thoughts:

- You cannot execute your authority, so you do a bad job (as a boss, parent, or leader).
- You are afraid that you will be abusive when you use your power, so you don't exert it at all.
- You feel taken advantage of by those under your authority.
- Sometimes you do exert your power, but the results are unsatisfactory.
- You feel mean/abusive, so you are apologetic and sometimes take back what you say
- You actually act mean/abusive, and then you feel bad.

HANDOUT 17.3

Managing Power Balances with Respect

MANAGING DIFFERENT POWER BALANCES: RESPECT IS A CONSTANT

While differences in power balances are a fact of life, respect for oneself and others should be a constant, no matter what a specific power balance is like. **When you have less power**, remember that you have a right to act in ways that respect yourself and your values (for example, politely express your point of view, but also remember also to express respect for those with more power, rather than mistrust or fear of abuse). When you interact with others with whom you have **more power**, remember to show respect for their personhood and express your power in a positive way, with confidence and warmth.

A SKILL FOR MANAGING POWER BALANCES: BEGIN AND END WITH RESPECT

Skill: Select the power balance that causes you the greatest difficulty. Select a situation that you can also describe in the top portion of Relationship Patterns Worksheet–2. Formulate the point of view you want to express in a way that is open, direct, and clear (for example, use an “I Message”). But now begin and end what you want to say in a manner that acknowledges positive aspects of the person or relationship. This skill is called Respect Bookends.

- Begin with a statement that recognizes positive aspects or behaviors of the person.
- State your request, concern, decision, or point of view.
- End with a statement that again recognizes the person’s positive aspects or behaviors.

Example: Mother to child (mother has more power than child):

“I so enjoyed seeing you talk with your grandmom. She just lights up with you. I noticed she was in that hard-backed chair. What do you think of giving her the cushioned chair you usually sit on when she visits, as her back hurts and it’s the only one that is comfortable for her? [Discuss.] She’ll be coming by next week, and I am sure she will be much more comfortable with the cushy chair. Thanks so much for doing this. I know you want her to be happy by the way I see you pop up and get her the tea. This will definitely make her comfortable and happy as well.”

Try out this practice:

- Say what you plan to say aloud, remembering to use Respect Bookends.
- Your coach/therapist repeats what you plan to say. Now imagine yourself as the other person.
- How does it feel? What are your thoughts and reactions?
- Practice again, to maximize the chances that you will get a good response. Make adjustments as desired.

BOX 18.1

Theme and Curriculum for Session 9

Changing Relationship Patterns: Increasing Closeness

This session continues the work on interpersonal relationship skills by focusing on optimizing closeness in relationships. Survivors of trauma often have impairment in this domain, due to the effects of avoidance and emotional numbing and/or reactivity. Previous sessions have introduced a range of interpersonal skills, but this session serves to apply such skills directly to the goal of either repairing intimacy problems in current relationships or establishing new relationships that can grow over time. Clients with childhood trauma that adversely affected their development in relational capacities may have more severe impairments in this domain, so the therapist can focus on more foundational skills with such a client as relevant.

PLANNING AND PREPARATION

Review concept of emotional intimacy/closeness. Bring extra copies of the Relationship Patterns Worksheet–2 (Handout 16.4), plus a copy of each handout for this session. Prepare several examples of ways the client may address struggles with intimacy and boundaries. The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Present concepts of boundaries and emotional distance.
- Explore client's relationship patterns related to closeness.
- Review and select steps for developing new relationships or deepening existing ones.
- Complete Relationship Patterns Worksheet–2.
- Complete one role play on chosen skill.
- Explore additional skill domains (optional).
- Summarize the goals of the session.
- Plan skills practice:
 - Complete Relationship Patterns Worksheet–2 twice a week before next session (to record practice interacting in a situation with opportunity to increase closeness).
 - Use coping skills from all three channels to support interpersonal goals.

(continued)

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- Schedule at least one pleasurable activity for the week.
- Continue practice of Focused Breathing twice a day.

SESSION HANDOUTS

Handout 18.1. Healthy Relationships = Healthy Boundaries

Handout 18.2. What Creates Emotional Distance and Ruptures in Relationships?

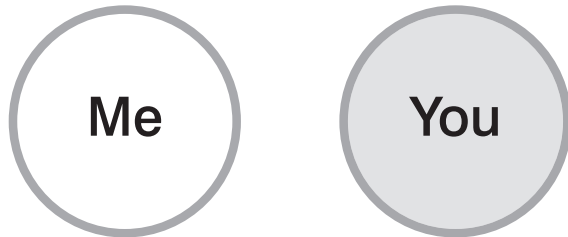
Handout 18.3. Relationship Guidelines to Enhance Intimacy and Closeness

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

HANDOUT 18.1

Healthy Relationships = Healthy Boundaries

COMMON BOUNDARIES IN RELATIONSHIPS



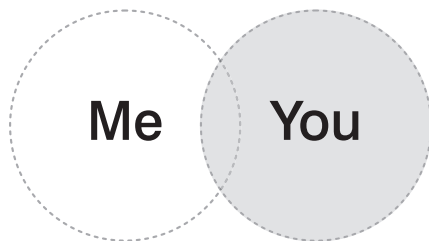
NOT CLOSE ENOUGH Holding others at a distance

Pros:

- Feel protected and safe
- Less or no conflict

Cons:

- Not connected
- Lonely
- Lack of support
- Too much self-reliance



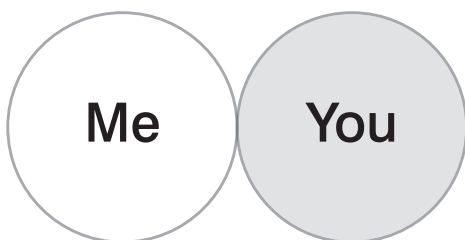
TOO CLOSE Being "codependent"

Pros:

- Feel connected and "in sync"
- May feel support sometimes

Cons:

- Lack of support for your own priorities
- Lose sense of unique identity
- Not getting your needs and/or goals met
- Not enough self-reliance



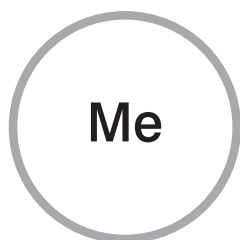
OPTIMAL Healthy boundaries

Pros:

- Feel connected
- Feel support
- Strong sense of individual identity
- Support of each other's goals and needs

HANDOUT 18.2

**What Creates Emotional Distance and Ruptures
in Relationships?**



What leads people to create emotional distance in relationships?

What specific behaviors create emotional distance?

**Remember, no matter where your relationships are now,
you can work to improve them and grow closer to people.
Just take it one step at a time!**

HANDOUT 18.3

Relationship Guidelines to Enhance Intimacy and Closeness

How to increase social engagement:

1. Smile kindly at someone (a grocery clerk, a pharmacist, a neighbor walking down the street, etc.).
2. Say hello to someone.
3. Compliment someone on doing good work or being kind.
4. Make eye contact during these exchanges or other interactions.

How to start new relationships:

1. Initiate contact with small talk.
2. Get to know the other person, and identify common interests and/or values.
3. Make a point of acting respectfully and expressing positive emotions.
4. Initiate spending time together in low-effort ways (for example, coffee).
5. If things go well, start spending more time together (movies, hikes, etc.).

How to increase intimacy and reduce distance:

1. Ask about the other person's life, values, and interests.
2. Be willing to support them in their interests and activities.
3. Share your interests and opinions or recent life events.
4. Express positive emotions.
5. Address unresolved conflicts and issues respectfully.
6. Spend time together in enjoyable ways.
7. Express caring and respect.
8. Invite them to weigh in on your decision-making processes.
9. Be genuine and sincere.
10. Offer to help and/or ask for help and support when needed.

How to repair relationships after a fight or conflict:

1. Ask if the other person is willing to talk about what happened.
2. Acknowledge that the last contact did not go well.
3. Convey your respect and caring for the other person.
4. Acknowledge mistakes that you may have made and the hurt/damage that you think you caused.
5. Share your feelings and thoughts about your behavior and about the other person's behavior in a way that is respectful and minimizes the risk of the other person's feeling defensive. In other words, use "I Messages."
6. Ask how the other person felt about what happened.
7. Ask questions for clarification, and invite the other person to ask such questions.
8. Ask if you can make amends, or ask the other person to make amends, if appropriate.
9. Discuss how you can avoid similar situations in the future.

BOX 19.1

Theme and Curriculum for Session 10 *Self-Compassion and Summary of Skills Training*

This session marks the ending of one phase of treatment and a transition to another—either to more independent growth or to more advanced trauma work (such as Narrative Therapy). For all clients, though, this session includes the new overarching theme of compassion to help shape continued efforts at growth and psychological well-being. Although the capacity for feeling compassion is inherent for most of humankind, survivors of trauma can find it difficult to reconnect with a sense of compassion for themselves. Clients who have experienced childhood maltreatment or sustained domestic violence have internalized the explicit and implicit messages that communicate they “deserved” the abuse/violence and are not worthy of care or respect. By this time in treatment, clients ideally will have enough skills to develop an emerging sense of compassion for themselves and what they have been through. The timing of the explicit introduction of self-compassion also corresponds nicely with the other component of this session—transitions. Self-compassion is important for a client moving on to Narrative Therapy, where they will be reviewing and appraising the meaning of past traumas. However, not all clients will move on to Narrative Therapy; they will pursue life without therapy or explore other options. Here too, self-compassion is important in recognizing that important recovery tasks remain, in planning for potential relapses, and in understanding that recovery in its entirety will take time and that patience is needed. The material for this session is organized so that guidance for a client following either pathway is provided: moving to Narrative Therapy, or ending this particular treatment.

PLANNING AND PREPARATION

Review concept of self-compassion (and consider client’s potential barriers to living more compassionately). Review changes in symptoms and problems over the course of skills training to aid reflection on progress. Bring extra copies of forms relevant to client’s treatment plans, such as the Feelings Monitoring Form (Handout 11.3) or Relationship Patterns Worksheet–2 (Handout 17.4). The work in the session is estimated to take about 60 minutes; a flexible application is assumed (i.e., not every client will need all interventions).

AGENDA

Check-in and review of skills practice.

Identify focus of the session.

(continued)

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Introduce concept of compassion.

Practice Self-Compassion Meditation.

Summarize accomplishments in skills training.

Prepare client for next step: Select Option 1 or 2.

Option 1: Moving to Narrative Therapy

- Prepare client for move to Narrative Therapy.
- Summarize the goals of the session.
- Plan skills practice:
 - Complete Relationship Patterns Worksheet–2 twice a week before next session, with a focus on situations related to increasing compassion.
 - Practice interacting in a situation where there is an opportunity to feel and express compassion for oneself and for another person (ideally as related to client’s goals).
 - Use coping skills from all three channels to support treatment goals (including Focused Breathing twice daily, if preferred).
 - Practice Self-Compassion Meditation once a day.
 - Make a list of questions and concerns about the transition to Narrative Therapy.
 - Schedule at least one pleasurable activity per week.

Option 2: Completing Treatment—The Final Session

- Review and summarize the treatment as a whole.
- Prepare client for independent skills practice.
- Plan for independent skills practice.
- Present completion certificate.

SESSION HANDOUTS

Handout 19.1. Compassion: Recovery Is a Journey

Handout 19.2. Summary of Accomplishments (So Far)

Handout 19.3. STAIR Skills for Continued Practice

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

Additional copies of Handout 11.3. Feelings Monitoring Form (optional)

HANDOUT 19.1

Compassion: Recovery Is a Journey

Having compassion for yourself can be challenging, given the messages you may have gotten from others and the negative beliefs you may still hold about yourself. There are several benefits to self-compassion, however, including:

1. Compassion for yourself goes hand in hand with compassion for others. So self-compassion may lead to having more compassion for others and improving your relationships.
2. Having compassion for yourself also allows you to change and experiment with new ways of behaving and feeling, such as asking for help or being more assertive. You'll be able to practice your new skills without fear if you just have compassion for yourself as a person who is learning, growing, and changing.
3. Finally, compassion for yourself allows success in the journey of recovery. There will be lapses and challenges. But the more accepting you are of your shortcomings, the easier it will be for you to focus your efforts on change. The energy you used up criticizing or defending yourself before you started treatment can be channeled into the work needed to reach your goals.

Consider your successes in this work and accept them. Consider your challenges and limitations and accept them too. Continue to work toward your goals with compassion for your past and your continuing struggles.

SELF-COMPASSION MEDITATION EXERCISE

Take a moment to focus on your breathing. If it feels comfortable, close your eyes.

Now take a slow, deep breath. Exhale slowly, allowing all of the air to leave your lungs. Inhale. And exhale slowly.

Continue to breathe at this pace.

Now imagine yourself. See all the parts of yourself.

View the parts that represent some of the positive aspects of yourself, such as happiness, joy, pleasurable feelings, positive beliefs, and loving memories. What do you notice?

Now, take a moment to view the painful parts of yourself—those that represent your distressing emotions, fears, negative beliefs, and painful life experiences. What do you notice?

Now imagine that these different parts of yourself are struggling with each other. It's a long struggle that has been going on for many years. The painful parts are trying to find an advantage over the positive parts, while the positive parts desperately respond with all of their might to avoid being taken over and ignored. What do you notice?

(continued)

Compassion: Recovery Is a Journey *(page 2 of 2)*

Now imagine that instead of allowing the positive and painful parts of yourself to fight against each other, you allow them to exist together without needing to struggle. Rather than allowing the painful pieces to win and viewing yourself as all bad, worthless, or unlovable, allow yourself to hold all of these parts together with compassion. Imagine seeing yourself as a person with strengths and weaknesses, just like others, and at the same time seeing yourself as deserving love, respect, and compassion.

Focus on what this experience feels like. View all the parts of yourself as a whole, without judgment.

Now, return your focus to just noticing your breath . . . taking slow, deep breaths. And when you're ready, open your eyes, and slowly return your focus to the room around you.

HANDOUT 19.2

Summary of Accomplishments (So Far)

Let's review all the things you've learned and accomplished during this treatment!

- We discussed how trauma affects emotion and how it affected you.

Before STAIR, how did you experience your emotions?

- We then explored skills that could change how you coped with your emotions. Later today, we'll select the skills from the three channels of emotion (body, thought, behavior) that you want to continue practicing. For now, consider:

What are ways you're experiencing your emotions differently from before starting treatment?

- We also explored how trauma affects relationships, and we identified different ways to approach and manage relationships—with flexibility, assertiveness, power, intimacy, and compassion.

What are ways you're approaching relationships differently in what you believe, feel, and do?

(continued)

Summary of Accomplishments (So Far) *(page 2 of 2)*

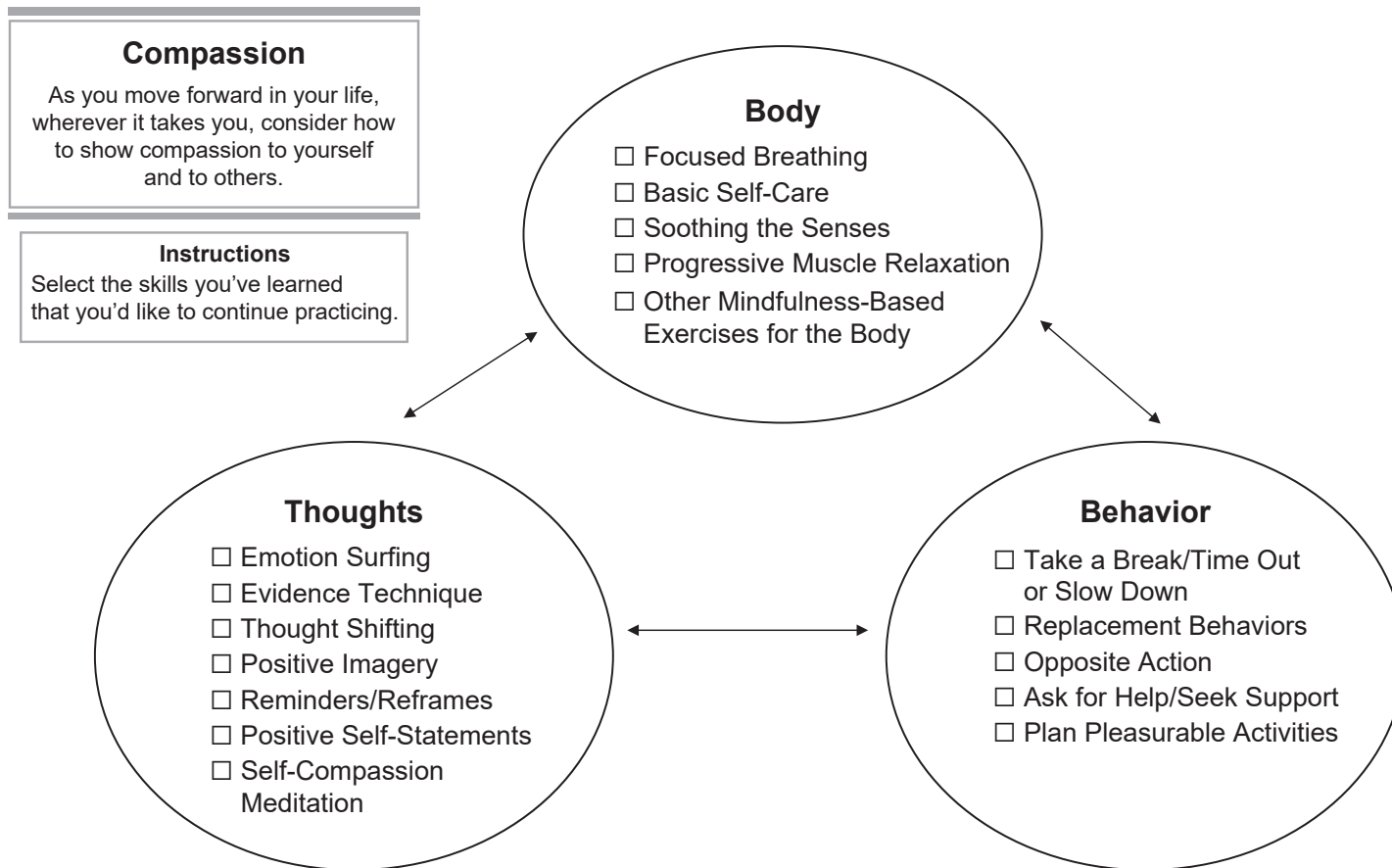
- As you prepare to move on, let's reflect on the progress you've made.

<p><i>What are the most important lessons you've learned?</i></p>	
<p><i>What lessons felt most helpful?</i></p>	
<p><i>How have your thoughts, emotions, and behaviors changed?</i></p>	
<p><i>How will you continue to build on the progress you've made so far?</i></p>	

HANDOUT 19.3

STAIR Skills for Continued Practice

EMOTIONAL COPING



(continued)

STAIR Skills for Continued Practice *(page 2 of 2)*

Compassion

Just as it's important for your own emotional coping, compassion is a key part of creating the relationships you want in your life. Compassion for yourself and for other people will help you thrive. Make sure you don't neglect one for the other—everyone deserves compassion, especially you!

RELATIONSHIP SKILLS

Instructions: Below is a summary of the relationship skills you've learned about, organized by theme. Jot down some relationship goals you still want to work toward, and list the skills you think would be most helpful in meeting those goals.

<u>Assertiveness</u> "I Messages" Making Requests Saying No	<u>Power</u> Understanding Power Balances Respect Bookends	<u>Closeness and Intimacy</u> Increasing Social Engagement Starting New Relationships Reducing Emotional Distance Repairing Relationships after Conflict	<u>Flexibility</u> Self-Compassion Meditation Compassion for Others Distress Tolerance to Meet Goals Pros and Cons
Your Relationship Goals		Skills Useful to Meet Your Goals	

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BOX 21.1

Theme and Curriculum for Session 11 *Introduction to Narrative Therapy*

Narrative Therapy involves a client's repeated telling of specific traumatic memories, organizing these memories into coherent life events, critically evaluating their meaning, and deliberating about their place in the client's life history. Confronting the memories leads to the realization that the traumatic images and thoughts are simply memories that have no real power over the client. In addition, telling about the trauma allows the client to organize the traumatic events in a way that helps them understand what happened and explore their meaning. The client identifies beliefs about the self and others (relationship models) that emerged from the narratives, with the goal of understanding that these beliefs belong to a particular life context—namely, a traumatic past. The circumstances of the client's life have changed, and therefore these old beliefs and guidelines for living, which were once adaptive, are no longer necessary or even valuable. The client is free to choose alternative strategies for living.

PLANNING AND PREPARATION

Bring a copy each of Handouts 21.1 and 21.2, as well as several copies of Relationship Patterns Worksheet–2 (Handout 16.4). This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the current session.
- Provide overview of Narrative Therapy.
- Review application of emotion regulation skills.
- Confirm client's commitment to narrative work.
- Create memory hierarchy.
- Summarize the goals of the session.
- Plan skills practice:
 - Read Overview of Narrative Therapy handout.
 - Complete distress tolerance exercise (Pros and Cons) for engaging in narrative work.
 - Complete Relationship Patterns Worksheet–2 twice during week.
 - Practice Focused Breathing twice a day, and other emotion regulation skills as relevant.

(continued)

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SESSION HANDOUTS

Handout 21.1. Overview of Narrative Therapy

Handout 21.2. Memory Hierarchy

Additional copies of Handout 16.4. Relationship Patterns Worksheet-2

HANDOUT 21.1

Overview of Narrative Therapy

Beginning in the next session, you will carry out narrative exercises in sessions and every day at home for the duration of the treatment program. This is very likely to be one of the most difficult parts of your treatment. However, it will help to bring about long-term relief from your distress and to facilitate positive changes in the way you think about yourself and relate to others. It is important, therefore, that you do your best to do the narrative work and resist urges to avoid doing it. To assist you, this handout reviews the rationale and instructions for Narrative Therapy.

RATIONALE

The purpose of narrating the trauma is to have you revisit and organize your trauma memories. It is not easy to understand and make sense of traumatic experiences. When you are reminded of your trauma, you may experience extreme anxiety or other negative feelings. So you may tend to push away or avoid these painful memories. You may tell yourself, “Don’t think about it,” or “I just have to forget about it.”

But as you have discussed in therapy, no matter how hard you try to push away thoughts about the trauma, the experiences come back to haunt you through nightmares, flashbacks, fears/phobias, and negative beliefs about yourself and others. These symptoms serve as signals that the trauma is still “unfinished business.” This is because avoidance prevents you from processing the thoughts and feelings that go along with the memories.

After a traumatic event, your mind begins the work of organizing the experience. When various aspects of the experience are organized into a story, this process is completed. Additionally, your feelings are organized within the context of the story and as a result become more manageable. The meaning of the event—particularly beliefs about yourself and the world—is evaluated and placed in the larger context of other life experiences. If, however, the process is interrupted, the story never gets organized, and the emotions remain intense and unmanageable. Powerful and emotionally charged fragments of a story never settle into a sensible or coherent account of what happened or how it affects you. The unanchored memories dominate your internal experience, leaving you feeling fragmented, disorganized, hostile, out of control, and fearful. Relationships are equally fragmented and undermined by strong and unexpected emotions. These reactions are often intrusions of unsettled feelings from the past. They may have little to do with the present.

The goal of Narrative Therapy is to help you process the memories connected with your traumas and create a life story that (1) helps you understand the trauma’s impact on your feelings and relationships, and (2) allows you to put the past in its place. As you confront the memories and experience the intense emotions that go with them, the emotions will become less distressing. This process is called “deconditioning” or “habituation.” In addition, the process of narrating the trauma will help you distinguish the feelings and beliefs that are results of the trauma from your current desires, wishes, and plans for yourself—in other words, to separate the past from the present. By identifying the relationship models in your narrative after you finish it or finish listening to a recording, you can explore how those beliefs influence your functioning in the present, whether they are helpful to you, and how relevant they are to your current goals. Although these relationship models were consistent with and adaptive to your traumatic environment, they are not likely to help you now that you are out of this environment and have goals other than avoiding, escaping, or confronting threat. Awareness of these

(continued)

Overview of Narrative Therapy *(page 2 of 2)*

models and their lack of relevance to your current life will help you recognize when you are using them and help you disengage from them. Practice and success with the alternative relationship models that you have developed in the STAIR treatment module will gradually replace behaviors generated from the trauma-related models.

PROCEDURE FOR BETWEEN-SESSION NARRATIVE REVIEW AND ANALYSIS

To help you carry out the narrative work you will do between sessions, your therapist will have you record the narratives you have completed in your treatment sessions. Listen to the recordings of the narrative conducted with your therapist in the session, and use the material from the session to guide you through the narrative analysis (relationship patterns work) again. When you listen to the recording, if you have trouble arranging the privacy you may need, it may be helpful to use headphones. Try to find a comfortable place where you will not be disturbed.

During the narrative, try to relive the experience; smell, taste, and feel everything as if you are really there. Although this can be scary, in the back of your mind you will know that you are safe. Some people find it helpful to have a trusted family member or friend nearby in another room or available by phone the first time they do the narrative homework alone. If you feel you will not be able to follow through without support, you may make arrangements for someone to be present or easily available to you during the task.

You will use the Subjective Units of Distress (SUDs) during Trauma Narration form, which will be introduced to you during your first in-session narration, to record your “subjective units of distress” (SUDs) immediately before and after the narrative. Also note the highest SUDs level you reached during the narrative. Next, jot down on a copy of Relationship Patterns Worksheet–2 the event described in the narrative and the relationship model you associate with this story. If possible, formulate an alternative way of interacting with others and a relationship model that is more representative of the beliefs you wish to hold about yourself and your relationship with others in the present. If you cannot do this on your own, you and your therapist will complete this work in your next session.

HANDOUT 21.2
Memory Hierarchy

Number	Memory	SUDS Score

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BOX 22.1

Theme and Curriculum for Session 12

Narrative of First Memory

The client's recollection of the trauma is only a memory, and as such it cannot hurt the client. When the client is able to revisit the memory in a detailed and emotionally alive way, there is an opportunity to help the client experience mastery over the traumatic memory. When the client listens to the recording of the narrative plus the narrative analysis of the memory, they often become aware of feelings that were not available during the telling of the story. These include sympathy for what they have been through, and curiosity about the self as a person with a story to tell.

PLANNING AND PREPARATION

Prepare two completed versions of the Memory Hierarchy (Handout 21.2), one for the client and one for your own use as the therapist. You will need to make a recording of the trauma narrative, both to listen to with the client in session and for the client to bring home. Often this is easiest if done on the client's smartphone, but if the client does not have that capacity, then identify other options for recording the narrative. Bring a copy each of Handouts 22.1 and 22.2, and several copies of the Relationship Patterns Worksheet-2 (Handout 16.4). This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Practice narrative of a neutral memory.
- Conduct first narrative of a trauma memory.
- Ground the client in the present.
- Listen to the first narrative recording together.
- Explore beliefs about self and/or others in narrative.
- Summarize the goals of the session.
- Plan skills practice:

(continued)

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- Listen to the recording daily; monitor distress with SUDs, using Subjective Units of Distress (SUDs) during Trauma Narration form.
 - Initiate at least one interpersonal situation and practice an alternative relationship model, using a copy of Relationship Patterns Worksheet–2 to record the practice and the results; include emotion regulation skills as relevant to situation.
 - Continue to practice Focused Breathing twice a day.

SESSION HANDOUTS

Two completed copies of Handout 21.1. Memory Hierarchy

Handout 22.1. Subjective Units of Distress (SUDs) during Trauma Narration (several copies)

Handout 22.2. Assessment of Postnarrative Emotional State

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

HANDOUT 22.1

Subjective Units of Distress (SUDs) during Trauma Narration

This form is to be used when you are listening to the trauma narrative as between-session practice. First, provide a brief description of the memory. Then record the date of practice, along with the subjective units of distress (SUDs; 0–100) ratings for before, highest during, and after listening to the memory.

Brief description of memory: _____

Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments
Date	Preexposure SUDs ____ Highest SUDs ____ Postexposure SUDs ____	Comments

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HANDOUT 22.2

Assessment of Postnarrative Emotional State

After completing the narrative of the trauma memory, rate the intensity of each emotion on the scale of 1 to 10 below, with 1 being “the least intense/not at all feeling that emotion” and 10 being “the most intense.”

Date: _____ Exposure #: _____ Session #: _____

Rating scale

1 2 3 4 5 6 7 8 9 10
Not at all Mild Moderate Severe Extreme

Fear/anxiety

1 2 3 4 5 6 7 8 9 10

Numbness

1 2 3 4 5 6 7 8 9 10

Anger

1 2 3 4 5 6 7 8 9 10

Sadness

1 2 3 4 5 6 7 8 9 10

Shame

1 2 3 4 5 6 7 8 9 10

Guilt

1 2 3 4 5 6 7 8 9 10

Strongest feeling: _____

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BOX 23.1

Theme and Curriculum for Sessions 13–17

Narratives of Fear

Clients quickly learn the structure and process of Narrative Therapy. The five sessions that follow Session 12 involve conducting repeated narratives of the most distressing aspects of a particular traumatic event, or moving to other events that would have been too distressing with which to begin the narrative work. The resolution of fear reactions results in large part from the realization that the trauma belongs to the past, and as such cannot hurt the client. The client begins to experience control over their memories and is actively working to organize them. The client also begins to assess the memories' influence over the client's current attitudes and behaviors. Consequently, the narrative work is a form of self-reflection and the beginning of the development of a historical sense of self. The repeated narration of an organized past, and identification of its relationship to the present, establish and reinforce an experience of continuity in the self.

PLANNING AND PREPARATION

Bring therapist's copy of completed Memory Hierarchy (Handout 21.2), and ensure that the client has a way to record the narrative processing. Bring other handouts as listed below. This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Complete narrative of fear memory.
- Work with avoidance behaviors.
- Manage dissociative reactions.
- Conduct narrative analysis.
- Summarize the goals of the session.

(continued)

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- Plan skills practice:
 - Listen to recording daily; monitor distress with Subjective Units of Distress (SUDs) during Trauma Narration form.
 - Initiate at least one interpersonal situation and practice alternative relationship model(s), using Relationship Patterns Worksheet–2 to record the practice and results; include emotion regulation skills as relevant to situation.
 - Continue to practice Focused Breathing twice a day, and other emotion regulation skills as relevant.

SESSION HANDOUTS

Completed copy of Handout 21.2. Memory Hierarchy

Additional copies of Handout 22.1. Subjective Units of Distress (SUDs) during Trauma Narration

At least one additional copy of Handout 22.2. Assessment of Postnarrative Emotional State

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

BOX 24.1

Theme and Curriculum for Sessions 13–17

Narratives of Shame

Often the most difficult aspects of a trauma story involve themes of shame. Effective work with shame involves several aspects, the most important of which is repairing the client's diminished sense of worth. Ways in which this can be accomplished are critically analyzing the sources for the client's shame, building alternative relationship models in which they feel competent and valued, and developing opportunities for building self-confidence and for having positive experiences with others who value the client. The therapist also accomplishes this through direct expressions of positive regard for the client.

PLANNING AND PREPARATION

Bring therapist's copy of completed Memory Hierarchy (Handout 21.2); at least one copy of Assessment of Postnarrative Emotional State (Handout 22.2); and several copies each of Subjective Units of Distress (SUDs) during Trauma Narration (Handout 22.1) and Relationship Patterns Worksheet–2 (Handout 16.4). This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Discuss value of telling. Complete narrative about shame.
- Conduct narrative analysis.
- Provide support: Express positive regard.
- Summarize the goals of the session.
- Plan skills practice:
 - Listen to recording daily; monitor distress with Subjective Units of Distress (SUDs) during Trauma Narration form.
 - Initiate at least one interpersonal situation and practice alternative relationship model(s), using Relationship Patterns Worksheet–2 to record the practice and results; include emotion regulation skills as relevant to situation.
 - Practice Focused Breathing twice a day, and other emotion regulation skills as relevant.

(continued)

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SESSION HANDOUTS

Completed copy of Handout 21.2. Memory Hierarchy

Additional copies of Handout 22.1. Subjective Units of Distress (SUDs) during Trauma Narration

At least one additional copy of Handout 22.2. Assessment of Postnarrative Emotional State

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

BOX 25.1

Theme and Curriculum for Sessions 13–17 *Narratives of Loss*

Themes of loss tend to emerge during narrative work. This emergence provides a valuable opportunity to help the client initiate the grief process. Successful engagement in this effort can result in decreased avoidance and numbing symptoms, increased self-compassion, and increased intimacy and openness in relationships. The therapist listens for ways sadness and loss are expressed in narratives (e.g., loss of protective parent figure, loss of childhood, loss of time), and describes potential long-term benefits of tolerating and processing painful trauma-related loss experiences. The therapist provides support and containment while encouraging the client to elaborate on feelings and to mourn losses. The therapist also helps the client to identify the impact of loss experiences on current relationships through relationship models, and to generate and practice alternative models that will increase positive connections with others in the present.

PLANNING AND PREPARATION

Bring therapist's copy of completed Memory Hierarchy (Handout 21.2); at least one copy of Assessment of Postnarrative Emotional State (Handout 22.2); and several copies each of Subjective Units of Distress (SUDs) during Trauma Narration (Handout 22.1) and Relationship Patterns Worksheet–2 (Handout 16.4). This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Explore reasons to discuss loss and to grieve.
- Complete narrative about loss.
- Conduct narrative analysis.
- Provide support: Share the burden of pain.
- Summarize the goals of the session.

(continued)

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- Plan skills practice:
 - Listen to recording daily; monitor stress with Subjective Units of Distress (SUDs) during Trauma Narration form.
 - Initiate at least one interpersonal situation and practice alternative relationship model(s), using Relationship Patterns Worksheet–2 to record the practice and results; include emotion regulation skills as relevant to situation.
 - Practice Focused Breathing twice a day, and other emotion regulation skills as relevant.

SESSION HANDOUTS

Completed copy of Handout 21.2. Memory Hierarchy

Additional copies of Handout 22.1. Subjective Units of Distress (SUDs) during Trauma Narration

At least one additional copy of Handout 22.2. Assessment of Postnarrative Emotional State

Additional copies of Handout 16.4. Relationship Patterns Worksheet–2

BOX 26.1

Theme and Curriculum for Session 18 *The Final Session*

The goals of the final session are to summarize the client's progress, identify any relapse risks and highlight relevant coping skills for risk management and recovery, and plan next steps for the client's ongoing recovery. Most importantly, the therapist gives recognition to the client for their specific accomplishments and shows sincere appreciation of the courage and strength that this work has involved.

PLANNING AND PREPARATION

Create a summary of the client's progress. Create list of resources for next steps and relapse recovery. Bring a copy each of Handout 26.1 and 19.3, along with copies of additional handouts as needed (see list below). This session is 60 minutes in duration.

AGENDA

- Check-in and review of skills practice.
- Identify focus of the session.
- Reflect on client's change and progress.
- Prepare and plan for client's independent skills maintenance.
- Identify plans for next steps.
- Review relapse risk and associated management/recovery strategies.
- Indicate respect for pace of change and role of ongoing self-compassion.
- Provide resources for transition and future needs.
- Present completion certificate.
- Say good-bye.

SESSION HANDOUTS

Handout 26.1. Summary of Accomplishments

Handout 19.3. STAIR Skills for Continued Practice

Individualized resource list (to be compiled by therapist)

Additional copies of Handout 11.3. Feelings Monitoring Form and/or Handout 16.4. Relationship Patterns Worksheet–2, if desired by or helpful for client

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HANDOUT 26.1

Summary of Accomplishments

Let's review all the things you've learned and accomplished during this treatment!

- We discussed how trauma affects emotion and how it affected you.

Before STAIR, how did you experience your emotions?

- We then explored skills that could change how you coped with your emotions. Later today, we'll select the skills from the three channels of emotion (body, thought, behavior) that you want to continue practicing. For now, consider:

What are ways you're experiencing your emotions differently from before starting treatment?

- We also explored how trauma affects relationships, and we identified different ways to approach and manage relationships—with flexibility, assertiveness, power, intimacy, and compassion.

What are ways you're approaching relationships differently in what you believe, feel, and do?

(continued)

Summary of Accomplishments *(page 2 of 2)*

- In the last series of sessions, we explored your traumatic memories and ways to create new meanings from them, while also exploring themes of fear, shame, and loss.

What are ways you're viewing your traumatic memories/experiences, and yourself, differently? How are these changes influencing what you believe, feel, and do?

- As you prepare to move on to the next chapter of your life and recovery, let's reflect on the progress you've made.

What are the most important lessons you've learned?

What lessons felt most helpful?

How have your thoughts, emotions, and behaviors changed?

How have you changed your relationship with your traumatic memories and experiences?

How will you continue to build on the progress you've made so far?