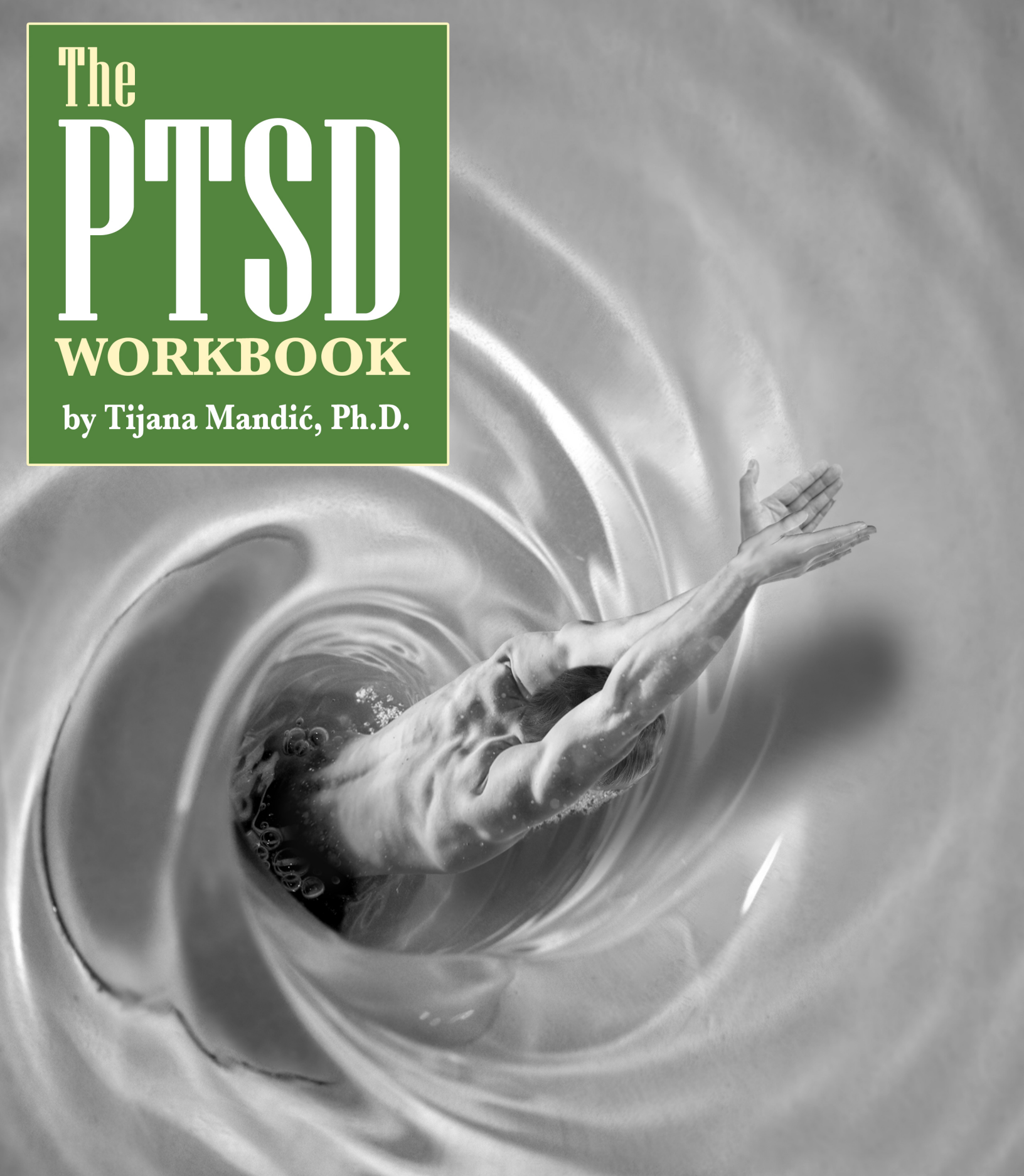


The PTSD WORKBOOK

by Tijana Mandić, Ph.D.



A Journey to Resilience and Beyond

The PTSD Workbook

A Journey to Resilience and Beyond

Between Sessions Resources
Norwalk, CT

The PTSD Workbook
A Journey to Resilience and Beyond

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Disclaimer: This book is intended to be used as an adjunct to psychotherapy. If you are experiencing serious psychological symptoms or problems in your life, you should seek the help of an experienced mental health professional.

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About the Series

The PTSD Workbook is part of a series of workbooks designed to give therapists and their clients easy access to practical evidenced-based psychotherapy tools. Each workbook represents a complete treatment program.

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Introduction

We would like to believe that civilization has led to our living in a safer and more protected environment. We have developed tools that shelter us from the elements, tools that make our daily lives easier, tools that warn us about possible threats to our physical safety. The number of these tools is growing exponentially. Yet, bad things happen! Unexpected tragedy is somehow always hanging over every human being, no matter the sophistication of tools designed to protect us or precautions we take.

Traumatic experience has become a more frequent and universal event rather than a rare and exceptional human experience. Almost every person suffers at least one mild trauma in their lifetime. No doubt this is partly because modern psychology has widened the scope of what is considered traumatic. There are many types of trauma and many ways of looking at it.

If you are traumatized, your diagnosis will depend on how many symptoms you are experiencing and how long they last. **We believe that trauma work is best done slowly and gently, taking one step at a time, and acknowledging each moment of progress toward equilibrium. Harsh confrontational methods of working with trauma, which exist in some cultures and communities, might retraumatize the person.**

What This Workbook Can Do for You

This workbook is, essentially, a guide to a journey. A difficult one. It is designed to be used as part of your treatment with a psychotherapist or counselor, or, in the case of very mild trauma, as a self-help guide. PTSD can be a complex and complicated issue; it is often accompanied by other problems, such as anxiety, depression, anger issues, and others. This book will cover the common types of PTSD. Before starting any trauma work, it is important to ask yourself this central question: Do you see yourself as a person damaged forever? If so, are you willing and open to changing this perception of yourself?

The traditional treatment for PTSD involved teaching clients specific psychological skills to get rid of the symptoms. This is no longer the case. Insights from new research have shifted our focus from “getting rid of the symptoms” to teaching trauma victims to take the path of resilience and to keep growing toward achieving their fullest potential. In the last twenty years, psychologists have started looking beyond just treating the symptoms and have focused their treatment on developing techniques that can help people find happier and more fulfilling lives.

There is no right or wrong place to start this workbook. All of the techniques in this book will be helpful. Above all, it is important to be patient with yourself and persist in using these techniques even though they may be difficult or even seem pointless at times.

We wish you the best in working to overcome your PTSD. If you are looking for additional resources, we recommend using the website of the American Psychiatric Association at <https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd>) or National Center for PTSD at <https://www.ptsd.va.gov>.

The worksheets and activities in this workbook are organized into fourteen sections:

Section One: Understand Your Trauma

You have to understand your trauma. The essence of your trauma, according to trauma specialist Bessel van der Kolk, MD, is that "it is an overwhelming, unbelievable, and unbearable" experience that exceeds your present coping skills and is significantly upsetting. It is important to be able to describe it verbally so you can make rational plans. The importance of knowing your symptoms is in becoming aware of what is happening so that you can orient yourself in a positive direction, and know how to handle the symptoms and what to expect. You will understand how and why these symptoms were a logical reaction in the trauma situation; but, when the trauma is over, they are not useful anymore. You will also learn how to grow through them. People can experience many symptoms of trauma and in different intensities. Some symptoms are deeply disturbing and some are tolerable. Every traumatized person has his/her unique combination of symptoms. You will learn how to monitor your symptoms and resolve them. You will create a safe place to do that.

Section Two: Arousal

In this section, you will learn how to understand your body. According to Peter Levine, PhD, the root of trauma is instinctive and physiological, but you can learn to regulate yourself. Again, not easy. You will become aware of your arousal and monitor it by using different techniques: grounding, breathing, calming your heart, progressive muscle relaxation, and regulating your movements. You will learn how to keep yourself in the resilience zone, so that when the "trauma vortex" (P. Levine) grabs you, you will know how to leap out of it.

Section Three: Fear of Hallucinations

Whether it is you who has experienced hallucinations or someone you are close to, you know how terrifying that experience can be. Together with arousal, perception plays a crucial part in your PTSD. Learning how to reality test and form a strong ego through rational thinking will help you grow and thrive. Your ego, or sense of self, is like a muscle—the more you exercise it, the stronger it gets; the stronger it is, the more able you are to check reality and lessen the fear. How you perceived the danger, what happened, and what you did is crucial. Having a clear vision is important for growing out of the trauma.

Section Four: Sleeping, Eating, and Sexual Issues

Being in touch with your basic needs is important. Trauma usually interferes with your sleeping, eating, and sexual needs. It interferes with other needs too, but those three stand out in importance. You will observe your everyday life and become aware of how your trauma has affected your basic needs, how your usual ways of satisfying them has changed for the worse, and make a plan for what to do. Taking care of yourself is a vital part of getting through trauma. Monitoring your cravings will help you understand your cravings and how they affect your

behavior. Moreover, there is no resilience without healthy, flexible boundaries. In this section, you will also learn how to be aware of your boundary issues and work on them.

Section Five: Memory Can Play Tricks on You

Memory can play tricks on you. This section explores one of the key symptoms of PTSD, namely, that the traumatic event is often re-experienced. You are haunted by recurrent, involuntary, intrusive, and distressing memories. Becoming aware of your memory issues, learning that they will go away, and having the patience to work through them will give you the power to move on and start reclaiming your life.

Section Six: Intrusive Thoughts

This section will help you understand your disturbing, intrusive, socially unacceptable, and unwanted thoughts, which can range from very mild to very severe. Sometimes they might appear as tormenting flashbacks of some trauma-related memory; sometimes they might seem unrelated to your trauma. It is how you cope with them that determines how much they'll rule and affect your life. Even if you're taking medication for intrusive thoughts, it is important for you to learn how to manage them. Clear, rational thinking will free you.

Section Seven: Emotions that Disturb You

The aim of this section is for you to become aware of your emotions, to understand them, learn to control them, and express them appropriately. No one most disturbing emotion exists for trauma victims. They often find themselves in the raging sea of emotions, with some emotions more pronounced than others. Some find anger, sadness, or survivor guilt to be their biggest problem. Once you describe your main ones, you can find out the beliefs, the thinking, and actions that go with them. Some emotions, such as trust, empathy, and gratitude, don't disturb you, but you might feel unable to feel them or express them as you might have before the trauma. Becoming aware of such emotions and being able to control and communicate them will enrich your life. At the same time, you will recognize other people's emotions, understand them, and learn how to react. Understanding and learning about the grieving process is an essential part of your recovery process. It is not an easy one. It could actually be one of the most difficult things you have to do in overcoming your trauma. The process of grieving will free you from the emotions that keep you stuck in the past.

Section Eight: Impulsive Behavior

Impulsive behavior is one of the core symptoms of PTSD; it is important because impulsivity might lead you to unintentionally harm others or yourself. It is important to learn to recognize it, control it, and replace it with thinking and feeling before you act. Yes, that is possible. If you have problems controlling your anger, then anger management, suicide prevention strategies, and taking control of your sexual impulses are a must in your recovery. Learning what triggers your explosive behavior will help. Researchers have found that expressive writing activities can transform raw energy by bringing it into a more symbolic level, which can make it easier to work on.

Section Nine: Communication Issues

Almost all PTSD clients have some communication problems. Learning the basic skills of talking and listening will help you feel happier and more resilient in your relationships. It is useful to be familiar with the communication knot called the “double bind,” common to many people with PTSD. If you find yourself in a situation when you feel “damned if you do, damned if you don’t,” you will recognize it and learn some creative strategies to untie that knot. How you deal with conflicts will be an important piece of knowledge and experience in this area.

Section Ten: Depersonalization

Depersonalization is a subjective experience in which you perceive yourself as unreal. It is characterized by an alteration in the perception or experience of the self so that you feel detached from yourself, as if you are an outside observer of your mind and body. In this section, you will gain a basic understanding of this aspect of your complex condition, with the aim of empowering your ego. Monitoring your depersonalization, you will learn to manage its symptoms by staying grounded, nurturing yourself, keeping your boundaries, being aware of your thoughts and emotions, and creating a strong support system.

Section Eleven: Derealization

In this section, you will learn about the other side of the coin of depersonalization—derealization. Derealization is a subjective change in the perception or experience of the external world. First you noticed that your inner world is weird (depersonalization); now you notice that the outside world is also strange and unfamiliar. You feel that the world has become vague, unfamiliar, dreamlike, less real, or lacking in significance. You might feel like there is something that separates you from the world, such as fog, a glass pane, or a veil. After checking your symptoms, you start checking the facts with your senses until you are thinking clearly and using people you trust to validate your perceptions.

Section Twelve: Trust: The Turning Point

Trust is the turning point of your journey. After what you went through, it is normal not to trust anymore. Your belief system might be shaken, your hopes destroyed, your confidence in people and your convictions lost. Can trust be restored? Yes, it can, but it requires effort. Once you learn to build good-enough trust, you are at a turning point in your journey from PTSD to post-traumatic growth. First, you regain trust in yourself and then some people around you. You are neither naïve nor paranoid. You are ready for the U-turn in your life. V. E. O'Leary, PhD, and J. R. Ickovics, PhD, wrote about four options in front of you: succumbing to adversity, surviving with diminished quality of life, resilience (returning to baseline quality of life), or thriving through further improvement in the quality of life that existed prior to the adverse event. You can grow.

Section Thirteen: R+, Resilient People

Most people have a breaking point and an innate healing system. This healing system is called resilience. It is the immune system of our personality. You might start from complete helplessness, then learn how to survive, then move to optimal coping and resilience, then move

toward growth and self-actualization. The bad news is that you have to resolve a long list of symptoms, discussed in earlier sections of this book. The good news is that it is possible. You will be able to recognize and appreciate your resilience and then feel intrinsically motivated to stretch out of your comfort zone.

Section Fourteen: Post-Traumatic Growth—PTG

The key areas of PTG are greater appreciation of life, discovering spiritual beliefs, forming better relationships with others, experiencing a greater sense of personal strength, discovering new options, and becoming more creative. The following worksheets and activities are designed to help you make this crucial transition. They include:

- Learned Optimism
- Spiritual Awareness
- Creating a Personal Mission Statement
- Six Pillars of Character
- Self-Esteem
- Getting Serious about Humor
- Finding Joy and Balance in Your Life
- Pursuing Happiness
- The “Happiness Habit”
- Developing the Habit of Gratitude
- Discovering Creativity

Summary

Healing from a trauma is not a simple process. Although some experts might tell you that they have “the answer,” experienced professionals know that the healing process is different for every person and that people relate to different techniques in different ways. This means that you might find some of the techniques in this workbook extremely helpful and others might not seem that relevant to you. This is *your* journey and you must choose the path that makes most sense to you. The workbook can be used as a map to lead you to a more fulfilling life, but it is up to you to choose the best direction to go.

I urge you not to take this journey alone. The workbook will be most effective when used with the help of a trained therapist, but even that is not enough. Researchers tell us that having an understanding and supportive community is the best way to achieve your goals.

SECTION 1. UNDERSTAND YOUR TRAUMA

“The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma.”

—Judith Lewis Herman, MD

What Is the Nature of Your Trauma?

Objective: To identify the specific nature of your trauma.

You Should Know

This book is for people who have had or are having Big Problems. Everyone has problems, but some people have Big Problems called traumas. Being sick for a long time, or having someone dear to you die, or losing your home, or witnessing/being directly involved in a terrifying event are all examples of trauma. We want you to know that even though you have had or are having a trauma, you can “fight back” and move on.

There are people who love and care for you, who want to help you find your way out of the maze of trauma. More important, you can grow from your trauma. You can become resilient and have a meaningful life. Life, your life, does not end because of a trauma. But before anything is to happen, first you have to understand your trauma; you have to face not just the traumatic event itself but its consequences, too.

The essence of trauma is that “it is an overwhelming, unbelievable, and unbearable” experience, according to Bessel van der Kolk, MD. Trauma can be a single event (e.g., an accident, a rape, a crime, or a disaster) or repeated events. It can also be a chronic condition (e.g., child abuse and neglect, combat, ongoing violence, prison camp, etc.).

Some researchers believe that any experience and/or its perception that is stressful enough to leave us feeling helpless, powerless, without control over our life, overwhelmed, or profoundly unsafe and without any control or protection is considered to be traumatic.

- Trauma is a type of damage to the body and the mind that occurs as a result of a brutally disturbing event. It is often the result of overwhelming demands on you, such that they, at that time, exceed your ability to cope or integrate different experiences into a meaningful whole. Trauma makes you struggle to cope with the Here and Now of everyday life, eventually leading to serious, long-term negative consequences. It is important to be aware when the “trauma vortex” (P. Levine) grabs you so you will learn how to leap out from it.

What to Do

In this worksheet, you will begin to discuss your own trauma history. As mentioned earlier, it would be best if you took this important step in consultation with your therapist, counselor, or another professional experienced in trauma recovery.

First, answer the following questions to remember how you were traumatized:

Were you exposed to the experience of trauma directly?

Were you a witness to the traumatic event/experience?

Were you told about it by a significant other?

Were you exposed to trauma indirectly?

Were you exposed to trauma repeatedly?

What is the nature of your trauma? Circle those that apply.

1. Physical assault (held at gunpoint, injured in a fight, attacked with a weapon, etc.)
2. Serious illness (heart attack, cancer)
3. Military combat
4. Sexual abuse
5. Accident
6. Child abuse or neglect
7. Natural disaster
8. Unemployment
9. Refugee situation
10. Job loss
11. Financial crash
12. Sudden and unexpected death of a loved one

[illegible][illegible]

What changes in your behavior have you noticed?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

How long after the trauma have you had these problems?

[illegible]

“Traumatized people chronically feel unsafe inside their bodies: The past is alive in the form of gnawing interior discomfort. Their bodies are constantly bombarded by visceral warning signs, and, in an attempt to control these processes, they often become expert at ignoring their gut feelings and in numbing awareness of what is played out inside. They learn to hide from their selves.”

—Bessel van der Kolk, MD

Know Your Symptoms

Objective: To identify your symptoms of PTSD, rate the severity of your symptoms, and name your most disturbing symptoms.

You Should Know

You might think that analyzing and thinking about your symptoms is not necessary in order to recover from trauma. However, knowing your symptoms will help you understand the complexity of your condition. Be assured that you don’t have to confront it all at once. There is nothing wrong with doing it step by step.

The importance of knowing your symptoms is in orienting yourself in a positive direction—toward knowing how to handle them and what to expect. You can describe the symptoms in your own words, and understand how and why they were logical reactions to the trauma situation (e.g., the symptom of hyperarousal). Now that the trauma is over, however, those symptoms are not useful anymore; you will learn how to grow through them.

In this book, you will analyze your trauma condition in detail and then decide which strategy to use to move from the position of being stuck to the position of growth and resilience—just as you might with any other important life project.

What to Do

Monitoring and Ranking Your Symptoms: Fill out the following chart to the best of your ability, noting your typical trauma-related symptoms, their frequency and duration (how long they typically last). There is no right or wrong answer.

Question	Yes	No	Frequency 0 = never 1 = rarely 2 = often 3 = very often 4 = all the time	Duration 1 = several seconds 2 = several minutes 3 = a few hours 4 = a day 5 = several days 6 = more than a week
Are you jumpy and easily startled?				
Do you have disturbing memories?				
Are you “super alert” or “watchful and guarded”?				
Do you have disturbing thoughts?				
Do you have difficulties concentrating?				
Do you have intense disturbing feelings?				
Are you feeling irritable or angry?				
Do you have repeated disturbing dreams?				
Do you have flashbacks?				
Do you have problems with falling and remaining asleep?				
Are you suddenly acting as if traumatic experience is happening?				
Do you feel like you don’t have a future?				
Do you feel emotionally numb?				
Do you have strong physical reactions (heart pounding, trouble				
Do you feel distant and cut off from other people?				
Are you avoiding thinking or talking about the trauma?				

Question	Yes	No	Frequency 0 = never 1 = rarely 2 = often 3 = very often 4 = all the time	Duration 1 = several seconds 2 = several minutes 3 = a few hours 4 = a day 5 = several days 6 = more than a week
Do you show loss of interest in activities that you used to enjoy?				
Do you have problems remembering important parts of the trauma?				
Are you avoiding activities or situations because they remind you of the trauma?				
Are you seeing yourself and others in more negative ways than you did before the trauma?				
Are you taking more risks or doing things that may cause you or others harm?				
Are you blaming yourself or others for the trauma?				
Are you having difficulties experiencing positive feelings?				
Have you hallucinated and are anxious you might again?				
Do you have intrusive thoughts?				
Are you having nightmares?				
Are you emotionally distressed after being exposed to traumatic reminders?				
Are you feeling isolated?				
Are you experiencing depersonalization symptoms?				
Are you experiencing derealization symptoms?				

You might feel upset filling out this questionnaire. It's okay. Take a deep breath and remember these are normal reactions to an abnormal situation (trauma) you were in. Your body and mind are trying to make sense of it.

Ten Most Disturbing Symptoms: Look at the chart above again and now choose your ten most disturbing symptoms. Copy them into the left column in the table below. Then, focusing on just these ten, rank them according to their severity, 1= least severe, 10 = most severe. Write your ranking in the center column. Take time to think about these symptoms and describe them in the right column, starting with the most severe and working your way through to the least severe.

My most disturbing symptoms	Symptom severity 1= the least severe, 10 = the most severe	Describe the symptom. How does it affect me?

“If Safety is ‘Zero Harm’ then Love must be ‘Zero Hate.’”

—Dave Collins

Safe Place

Objective: To identify places where you feel physically and emotionally safe in order to recover stability when feeling stressed.

You Should Know

Occasionally the world can be dangerous, risky, perilous, hazardous, or life-threatening, and you might feel unsafe. “Safe” can be defined as being free from harm or hurt; feeling safe means you do not anticipate either harm or hurt, emotionally or physically. The “Zero Harm” world doesn’t exist. Sometimes the world is harmless, innocent, nonthreatening and safe, but often it is not.

Safety and protection is a basic human need. In 1969, British psychoanalyst John Bowlby came up with a scientific theory called “attachment theory,” according to which keeping physical proximity with caregivers and being able to touch and hug them was the key to feeling safe. At every age, there are things and people that help us feel safe. When we are very young, it might be a pacifier, a special blanket, sucking a thumb, a stuffed toy, a loving caregiver, a kind word, a smile, a hug, the act of rocking back and forth, or even having an imaginary friend who comes when you feel unsafe and protects you.

As we get older, feelings of safety may come from a friendly voice on the telephone, a comfy pillow, a special meal, friends, clubs, a special location, spiritual beliefs, or books. We also seek safety through an overabundance of food, alcohol, or drugs—though all these give us an illusion of help, they are actually making things worse.

When trauma strikes, that sense of safety and trust is the first to suffer. Several emotions often appear during traumatic events. You feel unsafe, scared, and anxious, and your body might just freeze.

One of the keys to making the transition back to safety is to start feeling safe and comfortable in your body. Having a safe place is one of the most important things you need in order to work through your trauma. So, if you already have such a place, great! If not, you will learn how to create or find one. It might be closer than you think, or you may already be in it. It could be your room, or a particular piece of furniture in your home such as your bed, armchair, or sofa. It could be your kitchen or your study. It could be outside your home, in your friend’s house, or even some public space like a library reading room, a church/temple, a museum. Whatever you choose for your safe place, remember that it should always be accessible to you.

What to Do

Think about and create your safe place as a physical and emotional sanctuary where you can be in order to recover a sense of stability when feeling stressed.

What makes you feel safe?

Are there places where you feel safe? Describe below.

In creating your safe place, consider the following:

- Think back to the time when you didn't feel safe. What helped you regain a feeling of safety?
- Surround yourself with people who make you feel supported and safe.
- Identify the information from what you see, touch, smell, taste, and hear. Add that sensation to the ones coming from inside your body. Be aware of your somatic ego, or your personal sense of bodily sensations ("body ego").
- Keep your boundaries. For instance, in keeping your "body boundaries," you can say, "No. You cannot hurt me, hit me, nor abuse me." Keep your personality boundaries, too: "No. You cannot talk to me like that/treat me that way/do that to me."
- Look around and find out what helps other people. Observe children who have experienced trauma and find out how they get a sense of safety from things or people we might not even think about.
- Be a safe person to somebody else. Find an old person in your building and bring them soup.

- Feel gratitude; remember being grateful. Gratitude is a healthy emotion that keeps us safe. Gratitude can help us integrate negative with positive experiences.
- Get grounded and centered.
- Put on your favorite pajamas. Grab a blanket and pillow and spend a day watching your favorite TV shows.
- Allow yourself time to grieve, be sad, or cry until you can reach some level of safety.
- If you feel like escaping or running away, do it in a controlled and rational way. Respect your natural escape reaction.
- Notice if you are angry, but don't act on it. Respect your natural "fight" reaction.
- Allow yourself to be immobile. Respect your natural "freeze" response.
- Move from your external to your internal world and back. Notice when you become too self-absorbed. Then, look outside and notice the details.

The goal is to establish stability, security, and consistency in your safe place.

Briefly describe your ideal safe place. What objects are there? Any furniture? Are there any other people? Who are they?

Make a drawing of your safe place. Use a separate piece of paper.

Once you have your safe place, go there and just be. Do not do anything. Let go of every thought in your head. Simply be there. Position yourself comfortably. Relax. Close your eyes. Observe your inner sensations.

What sensations do you feel in your safe place?

With your eyes closed, pay attention to outside noise. With your inner eyes, see how this noise simply bounces off you once it reaches you in your safe place. How does that feel?

SECTION 2. AROUSAL: UNDERSTAND YOUR BODY

“Traumatized people chronically feel unsafe inside their bodies: The past is alive in the form of gnawing interior discomfort. Their bodies are constantly bombarded by visceral warning signs, and, in an attempt to control these processes, they often become expert at ignoring their gut feelings and in numbing awareness of what is played out inside. They learn to hide from their selves.”

— Bessel van der Kolk, MD

Understanding Arousal

Objective: To identify the different types of physical and emotional arousal caused by PTSD and name the triggers for your different arousal states.

You Should Know

If you are in recovery from trauma of any kind, it is important to know about what is called your “somatic ego,” which refers to the sum of your bodily sensations that you recognize as your own. According to Peter Levine, PhD, the root of trauma lies in instinctive and physiological responses in the “somatic ego.” Levine notes that symptoms that occur after trauma are basically unfinished physiological responses—they are blocked, disrupted, and dissociated from normal physiological process. The goal of recovery work is to join split parts of that process into a “normal” functional whole.

Trauma is caused by a stressful event “beyond your usual human experience and is significantly upsetting for almost everybody,” according to the *Diagnostic and Statistical Manual*, 5th edition. A threat to somebody’s life and/or physical integrity; a harm done or threatened to somebody’s child, spouse, or other close relatives or friends; sudden disruption of somebody’s home or society. The manual notes that observing somebody who is being badly hurt or killed, looking at physical and psychological violence, and dangerous natural disasters are also enough to create a trauma.

In dealing with trauma, if the process of reorienting (or recovering from) the trauma is blocked, the trauma gets fixated and becomes a problem. Levine wrote about a “trauma vortex” that grabs you, and you end up feeling helpless, as if you are drowning. The logical things you do don’t work. You have to learn how to leap from the vortex. But how do you do that? First, you need to know how your body functions.

According to Levine, “The Felt Sense is a new concept that we use to describe by use of words, language and linear thinking process something that is in its essence nonverbal, physiological and circular in nature.” For example, he says, “Sense your trousers and sense your hands on your trousers.” Here, he is not talking about feelings; he is talking about basic body sensations.

The trauma response is a body reaction to a perceived threat, with an elevated energy level that makes us move, fight, flee, or freeze. The brain becomes sharper than usual; trauma arousal increases breathing rate, blood pressure, heart rate, muscle tension, and blood sugar. The body

will work hard to find a solution. There is an optimal level of arousal for each situation. If your arousal level gets too high or too low, or if it gets stuck that way, you might have a problem. This happens often in trauma-related situations, so it's good to know what to do.

Optimal Arousal: The Resilient Zone

Figure 1, below, shows optimal arousal levels called the “Resilient Zone.” The horizontal lines indicate that the arousal line is neither too high nor too low, and you feel at your best while arousal levels are within this zone. You feel grounded, connected to your body and mind, aware of your body situation, centered and secured, as your brain and body are working in harmony. Your body, muscles, heart, lungs, and mind are prepared to function well. The two parts of the autonomic nervous system (ANS) are: the sympathetic nervous system (SNS) and the parasympathetic nervous system (PNS). The sympathetic nervous system activates the body for intense physical activity and the parasympathetic nervous system relaxes the body and inhibits or slows many high-energy functions.

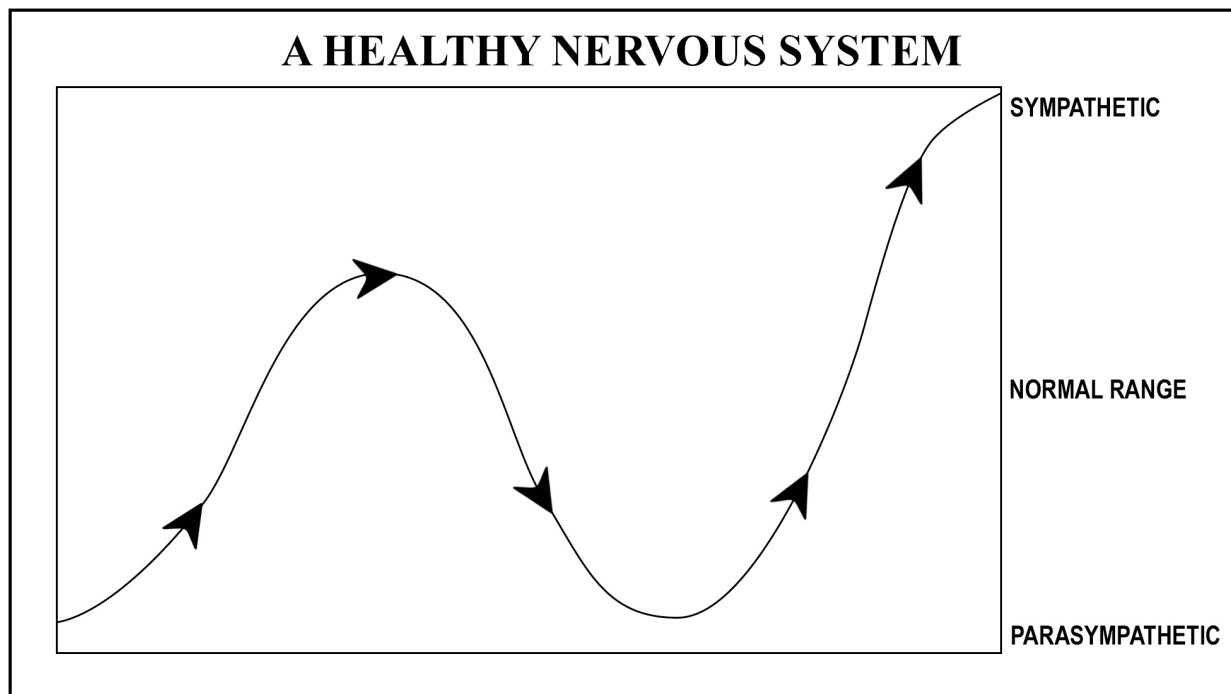


FIGURE 1

In this ideal arousal zone, the energy fluctuates smoothly and without extremes because there is a balance among the different parts of the nervous system. This reflects your optimal functioning when confronting challenges—your thinking, feeling, and behaving are at their best and socially appropriate.

Hyperarousal Zone

But what if things are not ideal and you find yourself overwhelmed by trauma? You cannot think or talk your way out of a traumatic situation as you would if you were in the Resilience Zone; instead, your brain shifts automatically to the hyperarousal, or over-arousal, zone. Within the hyperarousal zone, you might notice that your basic body functions change. You are sweating, feeling limp, or too tense. Your heart and breathing rate became fast and unstable.

The brain is concerned with survival; everything else becomes secondary. You might say that in this zone you are too wired to think and talk straight. Negative thoughts about yourself, others, and the world are common. You might go from forgetting that you even have a body to hyperfocusing on one particular organ. For instance, you feel like your heart is beating so quickly that you might have a heart attack.

Emotions such as anger, irritability, anxiety, and panic are to be expected, as well as nightmares and sleep disturbances. Still, hyperarousal has a protective function during an extreme emergency such as a traumatic event. Once the situation goes back to “normal,” the hyperarousal zone should slowly shift back to the resilience zone. However, should you remain in the hyperarousal zone, it becomes problematic.

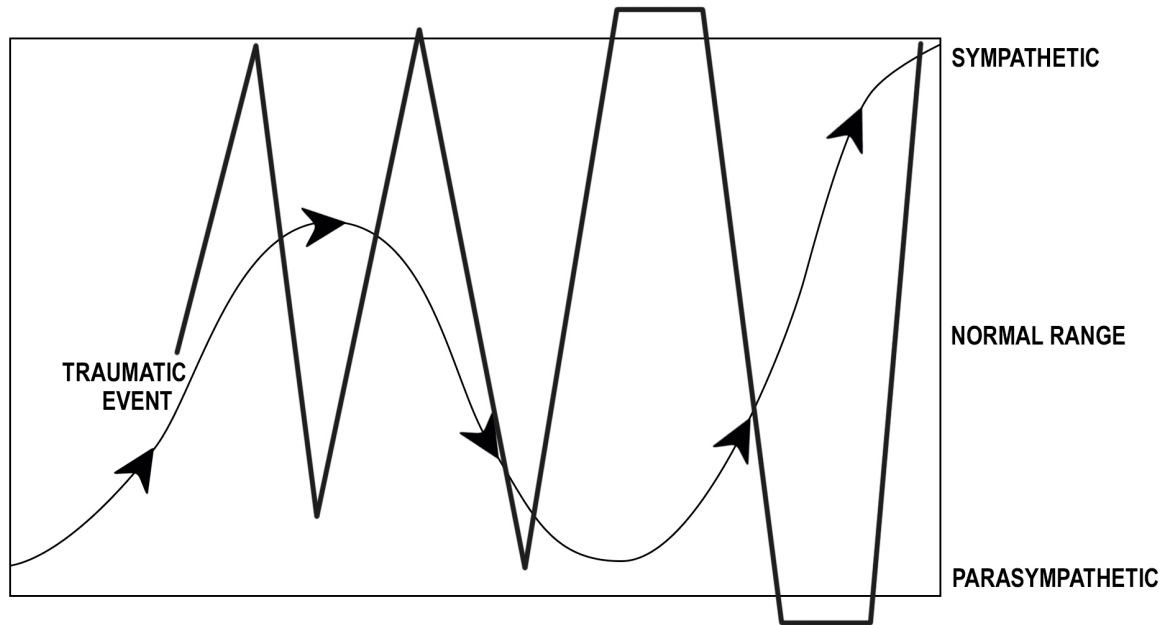
Hypoarousal Zone

When you have been in hyperarousal zone long enough, you will start feeling like you are paralyzed, worn out, or ready to drop. If your actions of fight, flight, and freeze are not taking you back to your resilience zone, your brain will shift into a hypoaroused, or under-aroused, state. As in the animal world, one of the best ways to stay alive is to pretend to be dead. That state could be described as feeling drained, ready to give up, helpless, and hopeless. You might switch between those two types of arousals, hyper and hypo. Other people, prior to moving into the hypoarousal zone, will experience a paradoxical reaction of immobilization in which the arousal is alerting the person to danger but the person is exhausted.

See Figure 2, below, for a diagram of how these different zones interact. The section labeled “Stuck on On” represents the hyperarousal zone, while the “Stuck on Off” section shows the hypoarousal zone. All the symptoms are considered to be related to a traumatic event for which the feelings have not been processed (“un-discharged”).

SYMPTOMS OF UNDISCHARGED TRAUMATIC STRESS

Stuck on ON: Anxiety, panic, hyperactivity, exaggerated startle, inability to relax, restlessness, digestive problems, hyper-vigilance, emotional flooding, chronic pain, sleeplessness, hostility/rage.



Stuck on OFF: Depression, flat affect, lethargy, deadness, exhaustion, chronic fatigue, disorientation, disconnection, disassociation, complex, pain syndrome, low blood pressure, poor digestion.

FIGURE 2

In this activity, you have the opportunity to reflect on traumatic situations and your arousal responses—too high, too low, or more resilient. Answer the following questions to the best of your ability.

Monitoring Your Arousal

Remember an incident when you experienced *hyperarousal* and describe it.

What do you think triggered it?

What were you thinking? How did you feel? What did you do?

When? Date/Occasion	Trigger(s)	Hyperarousal	Hypoarousal	During this incident I ...		
				thought...	felt ...	did ...

When? Date/Occasion	Trigger(s)	Hyperarousal	Hypoarousal	During this incident I ...		
				thought...	felt ...	did ...

Now, let's go in the opposite direction.

Remember an incident when you experienced *hypoarousal* and describe it.

What do you think triggered it?

What were you thinking? How did you feel? What did you do?

Arousal Diary

In order to better understand your trauma and how it affects you, keep an arousal diary.

Note: If you feel that you cannot handle arousal symptoms, please see a doctor, psychotherapist, or trauma counselor. Although we cannot consciously control some of our bodily functions, we can learn how to control and manage others of them.

Finding Your Resilience Zone

Objective: To learn breathing, grounding, and slow movement techniques and strategies to use when you are in the hyperarousal or hypoarousal zone.

You Should Know

When you feel a little bit more in control of your body, there are a number of things you can do to stay within the resilience zone more often than the hyper- or hypoarousal zones. At first, it might seem strange or impossible to stay in the resilience zone, but practice makes miracles.

In this section, you will learn relaxed breathing, grounding, slow movement, and calm heart techniques.

What to Do

Breathing Practices

Right at this moment, sit up straight and take a slow, easy breath. Read this paragraph through, then close your eyes. Notice what you're feeling in your body and mind. Let go of any tensions you're aware of. And breathe—a few slow, easy, deep breaths, expanding your lungs fully, hold the air in your lungs for a second or two, then exhale slowly. Notice any physical sensations, any thoughts or judgments, and let them go.

What was that like for you? Write down your responses here.

Establish a Daily Breathing Practice: Relaxation exercises typically begin and end with breathing practice. This activity describes a very simple method that can help you release tension and maintain balance.

Sit comfortably, with your back as straight as possible. Do not force yourself to sit in an uncomfortable position even if you think it's the "right" way. Keep your head up and close your eyes. Pay attention to your breathing. At first, simply observe how your breath flows. Focus on your breath as it goes in and out. Observe how spontaneous and effortless this flow is. Try to awaken the feeling of joy and gratitude for being alive in this very moment. Do not think further; just focus on breathing and think how good it is to be alive.

Think of the breath as a life force. Become aware of how the air that you breathe fills your lungs, how it expands and moves through the whole body. Now, inhale slowly. Imagine how the

life force and energy flow into your body with the air you inhale. Keep focusing on the inhale until you no longer have a problem imagining inhaling energy and vitality.

Now focus on exhaling. As you exhale, release tension, anxiety, sadness, or any other unpleasant emotion. Imagine that bad things are leaving you with the air you are exhaling.

Inhale calmness, exhale tension. Inhale vitality, exhale tiredness. Inhale anything you need at that moment, exhale whatever it is that bothers you. Use this technique whenever you feel that your arousal is disturbed.

Use the chart below to record your daily breathing practice. Make copies of this chart and keep recording the time you spend breathing until it truly comes spontaneously.

Week of: _____

Day	Time of day	Minutes	Mood before	Mood after
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Grounding

Grounding techniques are a set of tools used to help people stay in the present moment during strong, frustrating emotions. Staying in the present moment allows you to feel safe and in control by focusing on the physical world and how you experience it.

Grounding is not a difficult technique. It requires you to focus on some aspect of the physical world, rather than on your internal thoughts and feelings; to focus on the present rather than

the past. Practice your grounding techniques so that they come naturally when you are upset.

Let go of any negative feelings. Try a variety of techniques and, on the next page, rate the effectiveness of each technique in keeping you calm. Then, in times of need, use the technique that works best for you.

Here are some suggested grounding techniques; you can make up your own as well.

- Run cold water over your head.
- Grab tightly onto your chair as hard as you can.
- Touch various objects around you: a pen, keys, clothing, or a wall.
- Look around and notice things you haven't noticed before.
- Listen to sounds you haven't heard before.
- Dig your heels into the floor, literally "grounding" them. Notice how the tension centers in your heels as you are doing this. Remind yourself you are connected to the ground.
- Carry a grounding object in your pocket, such as a stone or lucky charm or soft piece of fabric, so you can touch it any time you need to.
- Focus on an object that inspires or calms you.
- Notice your body: the weight of your body in the chair; wiggle your toes in your socks; notice the feel of your chair against your back.
- Stretch.
- Focus on breathing. Try deepening it slowly.
- Walk slowly; notice each footstep, saying "left" or "right" to yourself, or counting them.
- Eat something and describe the flavors to yourself.
- Concentrate on an object or image. Focus on detail.

Now, write down five or more techniques from the list above (or your own list) that you want to practice. Practice them several times a day for five minutes or until you feel calm and in control. Record your experience in the chart below.

1. _____
2. _____
3. _____
4. _____
5. _____

For each technique, circle the number that best describes the effectiveness according to the following options:

1 = no effect, 2 = little effect, 3 = effective but took time,

4 = effective in keeping me calm and focused, 5 = immediate calming effect

Technique	Date done	Rating	Comments
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	
		1 2 3 4 5	

Slow Movement

Go to your safe place, whether it's indoors or outdoors, anywhere where you can move freely and not be disturbed. Move your arms and legs; gesture but don't speak. Breathe calmly. After each activity below, notice your "sensory ego" or "sensory self" (the parts of you that experience the senses of sight, sound, touch, taste, and smell), your emotions, and your thoughts.

1. Absence of movement

Move slowly in a relaxed manner, as if you were just strolling along and then stop. Just stop. Don't move at all. Calm your thoughts, feelings, and any other impulses, be still. Experience your body being as still as it can be.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

2. Conquest

Continue moving and try to imitate the movements you like. Observe how other people walk, run, sit at a restaurant, drink coffee, talk, and so on. Try imitating those movements.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

3. Frozen movement

Continue moving. Then stop and freeze in a position, like you are a statue. Stay like that. What does the statue represent for you?

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

4. Tension

Walk in your safe place and start tensing your body. From your feet, up your legs, tense the muscles, your abdomen, your hands, your throat, and your head. Tense the whole body and keep walking for a while.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

5. Extorted Movement

Extorted Movement is when you are forced to move in an unnatural way and you have no choice about it. See what this feels like by walking like a soldier in a parade, a fashion model, and a person with a sore foot using a cane. Then answer the questions below.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

6. Maladapted

Imagine you have a physical problem of some kind. Walk like that.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

7. Creative

If you were a free creature, without any social pressure or constraint, how would you walk?

How would you walk if you were the freest person on this earth?

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

8. Vicarious

Sit on a bench in a park and observe people walking. Imagine being them.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

9. Integrated

Now imagine you are the healthiest and happiest person in the world. How would you walk? Try walking like that.

What did you feel in your sensory self? Be specific.

What emotions did you feel? Name them.

What thoughts did you have? What were you thinking about?

What did you learn about yourself by doing this activity?

[illegible]

Calm Heart

Objective: To decrease your PTSD symptoms by practicing a physical self-calming technique.

You Should Know

When we talk about our emotions, we often use symbolic language. You must have heard expressions like: “butterflies in my belly,” “sick to my stomach,” “lump in my throat,” “pain in my neck,” and so on. Now think of the many ways we symbolically describe emotions related to the heart: “heartbroken,” “my heart skipped a beat,” “my heart is overflowing with gratitude,” and so on.

Thanks to technology, we know that calming the pace of the heart affects the rest of the body and its functions. Besides the pace, we know that the patterns of heart rhythms are important. We also know that it is possible to learn to adjust heart rate smoothly and quickly as needed. With practice, most people can achieve a calm heart in a matter of a week or two.

What to Do

Finding Your Calm Heart

Preparation: Sit quietly and comfortably in your safe place or any other place where you feel comfortable and won’t be distracted. Focus on your breathing for a few moments. Relax your muscles. Then remember a person you have loved the most in life. Think about how you love that person and how that person makes you feel. Remember other people who loved and appreciated you. Stay with this feeling for a while. Put a hand on your heart and feel the warmth. Now think about the things you love in nature—the great ocean, nice forest, beautiful mountain, or a lake that you love. Breathe calmly and relax your muscles.

Select one of the memories from above to work with, knowing that evoking the feeling of love is a very powerful way to affect your heart. If you have a problem evoking a feeling of love, then remember another positive emotion—joy, pride, hope, caring. If a positive emotion is difficult to achieve now, then simply stop. Take your time.

Next, try to remember the last time . . .

You loved someone or someone loved you

You respected someone or someone respected you

You felt joy or you made someone feel joy

You felt satisfaction or made someone feel satisfaction

You felt pride or you made someone feel proud

You felt empathy from someone or you empathized with someone

You felt happiness or you made someone feel happy

You were hopeful or made someone hopeful

You felt safe or made someone feel safe

Choose three of these situations and describe each one. Before you start writing, put your hand on your heart and, with your eyes closed, try to remember as many details as possible. Take your time. Stay in that frame of mind as long as you can.

Situation 1

Situation 2

Situation 3

Calming Technique: Focus your attention on the area of the heart. Breathe slowly and imagine that your breath is flowing in your heart. Breathe a little slower and deeper than usual. Take your time. Direct your senses toward your inner self. As you become calmer, learn to recognize a regenerative feeling slowly spreading throughout your body and mind, like a battery recharging.

The body can heal itself, but sometimes we need to help it along with our lifestyle choices. The way we feed ourselves, the way we breathe, walk, talk to others, and so on, can often be helpful in coping with and eventually getting control of our problems. Our bodies have an amazing capacity to heal because we have innate restorative capacities.

Take your time, let your breathing and heart rhythm settle. Experiencing the feeling in the heart is more important than thinking about the details of the memory. Practice these skills several times a day for several days. Eventually, you might do it before a stressful situation. Log your experience in a journal or on a separate piece of paper.

Progressive Muscle Relaxation

Objective: To lower your PTSD symptoms by progressively relaxing your muscles.

You Should Know

It is not uncommon to experience your emotions in your muscles. In a trauma with high arousal, muscle tension remains chronically high. Progressive muscle relaxation is a practice of tensing and then relaxing different muscle groups. It is important to learn and be aware of the experienced difference between tension and relaxation—that is, the pattern of tensing-noticing-relaxing-noticing.

What to Do

Lie down in a relaxed position. Start from your feet. Move your feet until you sense the tension along the other part of the leg. Notice the tension for a while and then relax. Notice the difference.

Tense the muscles of the front of your thighs. Notice the tension and then relax and notice the relaxation.

Tense the back of your legs. Sense the tension, notice, relax and notice.

Contract your pelvic muscles. Feel the tension, notice, relax, notice.

Tense your stomach muscles. Tense and notice, relax and notice.

Tense your back muscles. Notice, relax and notice.

Shrug your shoulders. Relax and notice.

Tense your hands, putting them down beside your body. Pull your relaxed hands back. Tense and notice, relax and notice.

Tighten your fists and biceps, throwing your hands to your shoulders. Relax and notice.

Rotate your chin to the right as you are looking over your right shoulder, noticing the tension along the right side of your neck. Slowly return to center and rotate to the left. Gently press your head back against the surface you are lying on. Sense tension at the base of the skull where it meets the neck. Notice the tension, relax and notice.

Lift your eyelids, sensing tension in your forehead. Notice, relax and notice.

Scrunch up your facial muscles, sensing tension on the sides of the chin and the neck. Relax. Notice the relaxation.

Clench your teeth and sense the tension from the angle of your jaw to the temple. Relax. Notice the relaxation.

Grin from ear to ear and sense the tension around the cheek bones. Relax. Notice the relaxation.

Spend a few moments just sensing your breathing and how your entire body feels. Remember that feeling.

SECTION 3. FEAR OF HALLUCINATIONS

“Not all light is good. There is negative light, that can cast bad shadows.”

—Anthony Riccione

Understanding Hallucinations

Objective: To gain a sense of mastery over your hallucinations by learning how to test reality and by recording your triggers and responses to them.

You Should Know

There might be a point in your life after a trauma when your sensory ego (the parts of yourself that experience all the senses) is confused and disoriented, as if you are driving a car while hitting the gas and brakes at the same time. You might have nightmares and appetite problems, your memory might play tricks on you, and you can't trust your perception. You can't trust nor control your feelings and you don't understand your motivation. Your communication style is ineffective and your behavior is impulsive. On top of everything, your identity is confused: Who are you? You are at a turning point.

So, you see something that other people don't see. So, you see something that doesn't exist. But, you see it. You are having a hallucination.

A hallucination is a false sensory perception occurring in the absence of external stimuli. It is distinct from an illusion, which is a misperception of an external stimulus. In either case, your mind is playing tricks on you. It can happen through any sense modality: sight, sound, smell, taste, touch; or internal stimuli, e.g., your stomach, spine, head. The crucial point is that you believe the perceptions are real though they are not.

A hallucination has the qualities of a real perception. Hallucinations are vivid, substantial, and are perceived to be located in external objective space. They are distinguishable from several related phenomena, such as dreaming, which does not involve wakefulness; pseudo-hallucinations, which do not mimic real perception, and are accurately perceived as unreal; illusion, which involves distorted or misinterpreted real perception; and imagery, which does not mimic real perception and is under voluntary control.

Hallucinations might be simple, seeing dots running around; or elaborate like a movie. They can be constructed with one sense, for example, visual, or might include various other senses.

Hallucinations can also occur in other ways: proprioceptive (perception of body position), equilibrioceptive (the sense of balance), nociceptive (the sense of pain), thermometer (perception of temperature), conceptive (perception of time), and kinesthetic (movement).

How you perceived the danger at the time of your trauma, what happened, and what you did is crucial. Whether it was you who experienced hallucinations or were close to someone who has, you might be familiar with the fear of going crazy. Fear of going crazy is the second strongest human fear. It's like the death of the personality. Hallucinations can be terrifying. Having a clear

vision of what is real or not real is important for growing out of the trauma. Learning how to form a strong ego (sense of self) and developing rational thinking will help you grow and thrive. Your ego is like a muscle—the more you exercise it, the stronger it gets; the stronger it is, the more you are able to discern what is real and what is not real, and then lessen the fear.

In this worksheet, you will do several activities related to hallucinations, including keeping a hallucination diary to record themes and triggers, and then learning how to reality test.

What to Do

- The first step in treating hallucinations is to see a doctor. Many doctors will recommend taking prescription antipsychotic medication, which can help greatly in many cases. It is also important to ensure effective collaboration with your other relevant service providers.
- Remember that you can learn to make a distinction between a hallucination and other forms of visions, such as illusions, daydreaming, sleeping, fantasizing.
- Ask for help and learn the difference among your experiences. It's not easy, but it is possible.
- Do not respond as if the hallucination is real. Do not act out. Just acknowledge.
- "Reality testing" is a concept in psychoanalytic theory in which the ego recognizes the difference between the external and internal world. In other words, it is the ability to see a situation for what it really is, rather than what one hopes or fears it might be. You can learn to distinguish your internal thoughts, feelings, and ideas from the events, which are based outside your body and mind. Find a psychotherapist to teach you. For example, you can check the reality of a hallucination by using other senses. If you are having a visual hallucination, write down on a piece of paper how you are experiencing this with your ears, your sense of touch, and your sense of smell. By writing your perceptions on a piece of paper, you can create basic data that you can check.
- You have to create a plan with goals, steps, and methods. The first step is to notice: I am hallucinating. I will ground myself. Breathe calmly. Think clearly. Control my emotions, thoughts, and behavior. Then, do the reality check activity:

Reality Check

My name is _____.

I am _____ tall.

I weigh _____.

I am _____ years old.

Today's date is _____.

I live at this address: _____.

My phone is _____.

I love eating _____.

At the moment I am at/in _____.

I am _____ (doing what).

I am with _____.

Have friends prepared to help in your reality test. Compare your reality with theirs.

I see _____, do you see it too?

I hear _____, do you hear it too?

I smell _____, do you smell it too?

I can touch _____, can you touch it too?

- Write down your hallucination and share it with the people you trust. Give it to your doctor.
- Once you feel your ego is stronger, go to your safe place, sit on a chair, and talk to your hallucination; tell it that you do not see or hear what it does. Don't argue with it. Try to understand it. It's OK to talk about your hallucinations. The presence of your therapist or counselor might help.
- Talk with other people who have experienced hallucinations; ask whether there is anything you can do to help in case they are still hallucinating occasionally. You might get some ideas.
- Help the person find ways to handle the hallucinations, such as listening to music or watching TV.
- Do not hurry yourself. Find empathy and trust that you will reorganize your perception.
- Try to understand your hallucination. It could be pure nonsense or it could have some meaning.
- Know your cultural background, myths, and legends; they might be used as symbols in your hallucination.
- Create a routine; structure your day with activities.
- Do something concrete with your hands—pottery, gardening, cooking, and so on.

Monitor Recovery/Hallucination Diary

Fill out the following chart whenever you have a hallucination. Keeping track can help you gain a sense of mastery over these unsettling experiences.

Day/Time	Trigger(s) / Occasion	Hallucination theme	My reality check / What I did	How did it help?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

SECTION 4. SLEEPING, EATING, AND SEXUAL ISSUES

"If your eyes cannot cry, then your gut will."

—*Martha Char Love*

Basic Needs

Objective: To identify how your trauma has affected your sleeping, eating, and sex life.

You Should Know

Basic needs are biological requirements for human survival like air, food, drink, shelter, clothing, warmth, and sleep. Sex is also a basic human need. Connected to those are the safety needs—protection from elements, security, order, law, stability, and freedom from fear.

Some of the more common consequences of trauma are disruptions in the “normal” way of fulfilling those needs, and especially three basic needs: sleeping, eating, and sex. You might experience a number of issues with these needs after a trauma.

It is important that you observe your everyday life and become aware of how your trauma has affected your basic needs, and how your usual ways of satisfying them has changed for the worse. Taking care of yourself is a vital part in getting through the trauma.

In approaching these subjects, first take a moment to think about how your trauma has affected your sleeping, eating, and sex life.

Basic need	Note any changes you have noticed since the trauma occurred. Be specific.
Sleeping	

Basic need	Note any changes you have noticed since the trauma occurred. Be specific.
Eating	
Sex	

Sleeping Issues

Objective: To identify your specific sleeping issues and to learn techniques for managing nightmares and their effects.

You Should Know

Healthy sleep is required for restoring functioning and vitality, promoting memory consolidation, and maintaining immune function. While many individuals experience sleep issues, people suffering from PTSD are especially prone to sleep disturbance. Untreated sleep problems increase the risk of heart disease, accidents, memory problems, depression, and impaired functioning.

Some of the more common sleep-related problems are:

Insomnia: You might experience some difficulty initiating or maintaining sleep, or having a nonrestorative sleep. You wake up feeling more tired than before sleeping. These sleep disturbances (or associated daytime fatigue) cause significant distress in important areas of your functioning.

Hypersomnia: You might experience excessive sleepiness, as evidenced by either prolonged sleep episodes or daytime sleep episodes that occur almost daily. Excessive sleepiness might cause many problems in the important areas of daily functioning.

Narcolepsy: This refers to irresistible and uncontrollable attacks of refreshing sleep that occur daily in the middle of some activity. You can experience it as brief episodes of sudden loss of muscle tone on both sides of the body, most often in association with intense emotion or as recurrent intrusions of elements of rapid eye movement (REM) sleep into the transition between sleep and wakefulness.

Breathing-Related Sleep Disorder: This is a sleep disruption that leads to excessive sleepiness or insomnia. It is judged to be due to a sleep-related breathing condition (central sleep apnea syndrome or central alveolar hypoventilation syndrome).

Circadian Rhythm Sleep Disorder (formerly Sleep-Wake Schedule Disorder): A persistent or recurrent pattern of sleep disruption leading to excessive sleepiness or insomnia that is due to a mismatch between the sleep-wake schedule required by your environment and your circadian sleep-wake pattern.

Clinically significant insomnia or hypersomnia that is attributable to environmental factors (e.g., noise, light, frequent interruptions): You become very sensitive to the things you were not before, e.g., a neighbor's TV, your kids asking you questions while you were watching a game, a light at a restaurant.

Excessive sleepiness that is attributable to ongoing sleep deprivation: You might think that sleeping is a waste of time and that you don't need to sleep. You might pull it off for a while, but

sleep deprivation is a stressful phenomenon. You might not even be aware of the consequences.

Restless Legs Syndrome: You feel uncomfortable sensations that lead to an intense urge to move your legs. Typically, the sensations begin in the evening before sleep onset and are temporarily relieved by moving the legs or walking, only to begin again when your legs are immobile.

Idiopathic periodic limb movements (“nocturnal myoclonus”) refers to repeated low-amplitude brief limb jerks, particularly in the lower extremities.

Sleep Terrors: You have recurrent episodes of abrupt awakening from sleep, usually occurring during the first third of the major sleep episode and beginning with a panicky scream. Intense fear and signs of autonomic arousal, such as tachycardia (rapid heartbeat), rapid breathing, and sweating, during each episode are typical manifestations. You are generally unresponsive to efforts of others to comfort you during the episode.

Sleepwalking: Sleepwalking consists of episodes of rising from bed during sleep and walking about, usually occurring during the first third of the major sleep episode. While sleepwalking, the person has a blank, staring face, are relatively unresponsive to the efforts of others to communicate with you, and can be awakened only with great difficulty. On awakening (either from the sleepwalking episode or the next morning), you have amnesia regarding the episode. Within several minutes after awakening from the sleepwalking episode, you have no impairment of mental activity or behavior (although you may initially have a short period of confusion or disorientation).

Nightmares: Nightmares are repeated awakenings from the major sleep period or naps with detailed recall of extended and extremely frightening dreams, usually involving threats to survival, security, or self-esteem.

The awakenings generally occur during the second half of the sleep period. On awakening from the frightening dreams, the person rapidly becomes oriented and alert (in contrast to the confusion and disorientation seen in Sleep Terror Disorder and some forms of epilepsy). The dream experience, or the sleep disturbance resulting from the awakening, causes clinically significant distress or impairment in social, occupational, or other important areas of functioning.

Recurring nightmares and other sleep problems are common in people who experienced your trauma. They can be very upsetting and frightening but you can look at them as simple signals that there are traces of memory or emotional material stuck in your mind and which the mind is trying to sort out, although it’s perhaps not the best way. Fortunately, there are steps you can take to change nightmares and diminish their negative impact on you.

If you experience nightmares, here is an activity you can try:

Normalizing Your Nightmares

Even though nightmares are disturbing, you can address them by looking directly at them. Being aware of a nightmare might mean that your ego is strong enough to understand and can process it differently. In one study, Deirdre Barrett, PhD, identified the following common nightmare themes: danger, terror, fear of death, being chased, being rescued, being trapped, powerless, helpless and confused, physical injury, sexual themes, violence.

The point is first to neutralize nightmares, so they don't disturb your life. Talk about them to the person you trust. Make a drawing. Write a story. Tell yourself they are just dreams. It also helps to bring it up to the next level—from purely physiological to psychological, where we have more options. If you cannot verbalize some things, you can draw, sing, or dance.

As you are working through your nightmare, you are also working through your trauma. Try to remember as many details as possible. Remember the sensations you felt. As you remember, write down key words. Do not worry about order, narrative flow, putting them in a sentence, or anything else. Just write down key words, that is, words that make sense to you.

My nightmare's key words (or, you can make little drawings, signs, images, whatever makes sense to you):

Choose a moment when you are feeling relaxed. Look at your nightmare's key words/drawings/signs. Imagine yourself as a detective who is trying to make sense of what happened.

My nightmare's facts:

Who are the characters?

What is the setting?

What are the different characters doing?

Are there any objects? What are they?

Can they be symbols of something? What?

What time is it?

Are you an active participant or just an observer? What are you doing?

Me in my nightmare:

How are you feeling?

What are you thinking?

What sensations are present in your body?

What other feelings do you have?

What thoughts are passing through your head?

How does the nightmare end? At what point do you wake up? What sensations do you have immediately after waking up?

Review your answers to the questions in the previous activity and consider new options:

Try and rehearse a different, calmer response. If you felt terror, try to calm yourself by hugging yourself, breathing slowly, and saying to yourself: "This is just a dream, I am safe now." Before going to sleep, rehearse the new response: "No matter what, it is only a dream. I am safe!"

Imagine you are a director and they gave you a bad script to work with. Use your imagination and:

Change the nightmare's plot

Change the characters in your dream

Change the feelings in your dream

Change the colors and the music in the dream

Change the end of your dream. Work with different options, particularly those that might give you closure.

Now, remember a bad/scary dream you have had. Use the blank space below to retell it in a drawing or a poem. Or create a piece of music or use another art form separately.

Think! What is needed to resolve the dream? Use different expressive techniques to turn your bad dream into a good dream. Compare.

Imagine the same facts of your dream organizing themselves into an opposite situation in which you are safe in every way. How would that go?

You don't need to be a psychologist or a therapist to try these techniques or process your nightmares. Working on your nightmares and bad dreams is not about producing high-quality art; it is about authentic expression of thoughts, feelings, and sensations. And, like everything else in this workbook, ask an experienced mental health professional if you think you need additional support.

Eating Issues

Objective: To identify your specific concerns related to eating and to learn strategies for managing those concerns, including a slow eating exercise.

You Should Know

Are you struggling with any of the following concerns? These eating-related symptoms can be connected to trauma and it is important to learn about them, their effects, and how you can learn to work on them to have a healthier relationship with your body and food:

Changes in Appetite

Not eating enough: You might lose your appetite. Eating might seem pointless, and you refuse, avoid, and neglect to maintain body weight at or above a minimally normal weight for your age and height.

Eating too much: You might experience recurrent episodes of binge eating. An episode of binge eating is characterized by both of the following: eating, in a discrete period of time (e.g., within any two-hour period), an amount of food that is definitely larger than most people would eat during a similar period of time under similar circumstances. You have a sense of lack of control over eating during the episode (e.g., a feeling that you cannot stop eating or control what or how much you are eating). It is considered a serious problem if your binge eating and inappropriate compensatory behaviors both occur, on average, at least twice a week for three months.

Eating odd food: You eat rotten food from the garbage; or you eat things other people in your culture don't eat; you repeatedly chew and spit it out, but you don't swallow.

What to Do

If you are not eating enough, here are some tips and strategies you can use:

- Try eating three meals and two to three snacks per day.
- Set an alarm to remind you to eat if you are not experiencing regular hunger cues or have a hard time remembering to eat.
- Try to include more nutritious and energy-dense foods such as nuts and nut butters, dried fruits, cheese, granola bars, and avocados.
- Try nutrition supplement drinks like Ensure Plus, Boost Plus, Equate Plus (Walmart brand), Carnation Instant Breakfast, or regular milkshakes.
- Make sure to eat protein with each meal and snack. Foods high in protein include eggs, milk, yogurt, cheese, meat, poultry, fish, dried peas and beans, nuts, and nut butters.
- Add gravy, cream sauces, or cheese sauces to meats or vegetables.
- Add oils or butter to cooked vegetables, grains, or protein.

- Use whole or 2% milk in place of water or skim milk in drinks, snacks, and in cooking.
- Use regular/full-fat condiments like mayonnaise, sour cream, and salad dressings in foods.
- Eat dry food in the morning, such as toast or crackers.
- Avoid taking medications on an empty stomach unless instructed to by your doctor/ pharmacist/nurse.
- Avoid hot foods or foods with significant smells/odors if you are sensitive to the smell of foods.
- Eat smaller, frequent meals and snacks every two to three hours.
- Sit up for at least thirty minutes after eating.
- Eat slowly.
- Take sips of cold, clear drinks like water, fruit juice, or sports drinks throughout the day.
- Stay on top of your bowel program to avoid constipation, which can worsen nausea.
- Avoid gas-forming foods like onions, cabbage, broccoli, or dried beans.
- Play soft music or watch TV while eating.
- Eat in a calm environment.
- Eat your energy-dense foods like meats and starches before lower-calorie foods like fruits and vegetables.
- Drink liquids one hour before or after meals (not with meals).
- Experiment with different seasonings to increase your preference for foods. For example, if foods are too sweet, try adding a little bit of salt or vinegar. If foods taste too salty, try adding some sugar.
- Eat foods cold or at room temperature.
- If you have problems consuming meats, add chopped meat to casseroles or salads or try eating meats in a sandwich.
- Cook with spices, herbs, and sauces that you like.
- If foods taste metallic, try eating with plastic silverware instead of metal silverware.

Slow Cooking and Slow Eating

- Prepare your favorite meal, or just a meal you feel like eating (something you like a lot). Arrange it nicely, set the dining table, sit comfortably, and relax. Play relaxing music in the background. Focus on your food.
- Look at all the different food colors and shapes on your plate. Observe.
- Bring your plate to the nose, or your nose to the plate, close your eyes and notice the richness of different smells your food has.
- Touch your food. Lick it. Take a bite and hear the crunching as you start chewing.
- Eat slowly, bite by bite.

Once you have finished your meal, answer the questions below.

What sensations did you have?

What did you feel?

What did you think?

If you eat too much, try these simple tips and strategies:

If you are eating unusually large amounts even in the absence of hunger, be aware that binge eating can damage health and leave you feeling guilty and ashamed.

1. **DO NOT DIET!** Studies show that fasting or eliminating certain foods from your diet may be associated with increased cravings and overeating. Focus on eating healthy foods instead of dieting or cutting out certain foods completely.
2. Avoid skipping meals by setting a regular eating schedule and sticking to it. This is one of the most effective ways to stop binge eating. Skipping meals can contribute to cravings and increase your risk of overeating. Adhering to a regular eating pattern can reduce your risk of overeating and may be associated with lower levels of ghrelin and fasting blood sugar.
3. Practice mindfulness because it involves listening to your body and bringing your attention to how you feel in the present moment. This technique can prevent overeating by helping you learn to recognize when you no longer feel hungry.
4. Stay hydrated. Drinking plenty of water throughout the day is a simple yet effective way to curb cravings and stop overeating. In fact, studies show that increasing water intake could be linked to decreased calorie consumption and less hunger.
5. Try yoga. Yoga incorporates both body and mind by using specific breathing exercises, poses, and meditation to reduce stress and enhance relaxation. Studies indicate that yoga can help encourage healthy eating habits and reduce your risk of emotional eating.
6. Eat more fiber. Fiber-rich foods move slowly through your digestive tract, keeping you feeling full longer. Some research suggests that increasing your fiber intake could cut cravings and reduce appetite and food intake. One small, two-week study found that supplementing twice daily with a type of fiber found in vegetables decreased hunger, increased fullness, and reduced calorie intake.
7. Clean out your kitchen. Having plenty of junk food in your kitchen can make it much easier to binge eat when cravings start to strike. Conversely, keeping healthy foods on hand can reduce your risk of emotional eating by limiting the number of unhealthy options. Removing unhealthy foods from your kitchen and stocking up on healthy alternatives can improve your diet quality and make it harder to binge eat.
8. Start going to the gym. Studies indicate that adding exercise to your routine could prevent binge eating. For instance, one six-month study in 77 people showed that increasing weekly exercise frequency stopped binge eating in 81% of participants.
9. Eat breakfast every day. Starting each day off with a healthy breakfast can help you stay on track and reduce your risk of binge eating later in the day. Several studies have found that maintaining a regular eating pattern is associated with less binge eating and lower levels of ghrelin, the hormone that stimulates feelings of hunger.
10. Get enough sleep. Not only does sleep impact hunger levels and appetite, but sleep

deprivation may be linked to binge eating. In fact, one study in 146 people found that those with a binge-eating disorder reported significantly greater insomnia symptoms than people without a history of this condition.

11. Keep a “food and mood” journal. A food and mood journal can be an effective tool that involves tracking what you eat and how you feel. This helps you take responsibility, identify potential triggers, and promote healthier eating habits. Keeping a food and mood journal makes it easier to look for patterns in your diet and address potential problems and triggers.
12. Find someone to talk to. Talking to a friend or peer when you feel like bingeing is a simple strategy to stop overeating. One study in 101 adolescents undergoing a procedure called a sleeve gastrectomy showed that reliable social support was associated with less binge eating. Another study in 125 obese women found that better social support was linked to decreased binge-eating severity. A good social support system is thought to reduce the impact of stress, which may help decrease your risk of unhealthy habits like emotional eating.
13. Increase your protein intake. Upping your intake of protein-rich foods can keep you feeling full and help control your appetite to stop binge eating. One study showed that increasing protein intake from 15% to 30% led to significant reductions in body weight and fat mass, as well as decreased daily calorie intake by an average of 441 calories.
14. Plan out your meals. Planning out your meals can help ensure that you have healthy ingredients on hand to prepare nutritious meals, minimizing your risk of overindulging on junk foods. The practice can also help you improve your diet quality and make it easier to fit in plenty of fiber- and protein-rich foods.
15. Seek help if needed. If you’re still struggling with binge eating even after trying some of the strategies listed above, it may be time to seek treatment.

Sexual Issues

Objective: To identify different sexual problems that people with PTSD can encounter and to identify a positive sexual experience in your life.

You Should Know

Recent studies have found that there is a strong correlation between sexual dysfunction and PTSD. A comprehensive study of 4,500 war veterans concluded that PTSD increased a male's chances of having erectile dysfunction by almost 300% compared to veterans without PTSD. Many of the most common symptoms of PTSD inhibit a person's sexual response cycle and ability to feel pleasure but they can also come up in other areas of your life, like love and attachment. For example, a person with PTSD may associate feelings of arousal with danger rather than pleasure. Additionally, depression and anxiety associated with PTSD may contribute to low sex drive.

Sex therapy is a strategy for the improvement of sexual function and treatment of sexual dysfunction. This includes sexual dysfunctions such as premature ejaculation or delayed ejaculation, erectile dysfunction, lack of sexual interest or arousal, and painful sex.

Your sexual drive is a part of your overall energy system. As traumas disturb your energy flow and discharge, it is possible your sexuality will be affected. Feelings of shame, guilt, and remorse might complicate the issue. It might seem to you that those issues are irrelevant compared to the trauma that happened, but it is very important that you became aware of, monitor, and resolve these issues.

If you did not have these problems before the trauma, you should feel more optimistic, as the problems you are experiencing now are side effects of trauma, and you will restore your sexuality. Just don't ignore it, deny it, or hide it. Don't put it on the Internet. Either go to a specialist, or sex therapist. In case of paraphilia, a condition that involves abnormal sexual desires, typically involving extreme or dangerous activities, please seek immediate help.

1. Sexual Desire Issues

- Hypoactive sexual desire is a persistently or recurrently deficiency or absence of sexual fantasies and desire for sexual activity. Age and the context of the person's life are key factors in this diagnosis. The issue causes marked distress or interpersonal difficulty.
- *Hyperactive sexual desire* includes compulsive masturbation, compulsive sexual behavior, sexual addiction, cybersex addiction, erotomania, sexual dependency, and sexual impulsivity.
- *Sexual aversion issue* is a persistent or recurrent extreme aversion to, and avoidance of, all or almost all genital sexual contact with a sexual partner.

2. Sexual Arousal Issues

- Female sexual arousal issues refer to a persistent or recurrent inability to attain, or to maintain, adequate lubrication-swelling response of sexual excitement during sexual activity.

- Male erectile issues include persistent or recurrent inability to attain, or to maintain, adequate erection during sexual activity.

3. Orgasmic Disorders refer to inability to reach completion, climax, pleasure, and relaxation during sexual activity.

- Female orgasmic issue or inhibited female orgasm refers to a persistent or recurrent delay in, or absence of, orgasm following a normal sexual excitement phase. Women exhibit wide variability in the type or intensity of stimulation that triggers orgasm. Talk to a clinician. He/she will take into account your age and other factors in addressing the issue.
- As a male, you might have persistent or temporary premature ejaculation with minimal sexual stimulation before, on, or shortly after penetration and before your partner wishes. It happens to a lot of people, especially when they are young. Delayed ejaculation is a man's inability for, or persistent difficulty in, achieving orgasm, despite typical sexual desire and sexual stimulation.

After trauma, you might experience some pain during your sexual activity. If sex is painful, stop! Don't push yourself. Seek a sex therapist.

4. Paraphilia is a clinical term for deviant sexual behavior.

You might just have a thought about it. You might have a nightmare about it. You might act on it. These are deviant behaviors:

- Exhibitionism is having frequent, intense sexually arousing fantasies, sexual urges, or behaviors involving the exposure of one's genitals to an unsuspecting stranger.
- Fetishism involves regular, intense sexually arousing fantasies, sexual urges, or behaviors involving the use of nonliving objects (e.g., female undergarments, shoes, etc.).
- Frotitism involves persistent, intense sexually arousing fantasies, sexual urges, or behaviors involving touching and rubbing against a nonconsenting person.
- Pedophilia involves repeated, intense sexually arousing fantasies, sexual urges, or behaviors involving sexual activity with a prepubescent child or children (generally age 13 years or younger).
- Sexual masochism involves recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving the act (real, not simulated) of being humiliated, beaten, bound, or otherwise made to suffer.
- Sexual sadism refers to recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving the act (real, not simulated) in which the psychological or physical suffering (including humiliation) of the victim is sexually exciting to the person inflicting the suffering.
- Transvestism is the fantasy or practice of dressing and acting in a style or manner traditionally associated in that culture with the opposite sex. If you are a heterosexual male, transvestism

involves recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving cross-dressing.

- Voyeurism refers to recurrent, intense sexually arousing fantasies, sexual urges, or behaviors involving the act of observing an unsuspecting person who is naked, in the process of disrobing, or engaging in sexual activity.
- Other paraphilia: obscene phone calls, necrophilia (corpses), partialism (exclusive focus on part of body), bestiality (animals), coprophilia (feces), klismaphilia (enemas), and urophilia (urine).

Some of the issues listed above are against the law, so consult a specialist as soon as possible if you are struggling with engaging in them.

What to Do

If your sexual problems are not prominent and clinically striking and are not illegal, start with these steps: Take your time. Go slow. Talk to your partner. In order to get to know more about yourself and your sexuality, answer the following questions:

Remember the awakening of your sexuality. What did you feel?

Remember your best sexual experience. What was special about it? What sensations did you feel in your body?

Controlling Your Urges

Objective: To identify your urges and their triggers, and to identify the positive and negative consequences of your urges.

You Should Know

Sometimes people suffering from PTSD can develop various addictive behaviors that can be difficult to manage and controlling your urges can be quite difficult. Whether you are trying to control your eating, your alcohol use, your gambling, or other self-defeating behaviors that you have adopted to cope, you already know that it is much more than a matter of willpower.

When you have an urge to do something, even if it is something that you know is self-destructive, the pleasure centers in your brain take a shortcut past the thinking part of your brain (the neocortex) and send a “do it now” signal to the parts of your brain that control your actions. This happens in a split second.

What to Do

You can control your urges and resist temptations by activating the thinking part of your brain. When you do this repeatedly, it becomes a habit, and eventually you will find that you are able to resist temptation to do things that are self-defeating and harmful.

Preparation can help. Here are a few ideas to begin to control your urges:

- Avoid situations or things that trigger your cravings.
- When you feel you are going to be overwhelmed by your urges, call or text someone.
- Remove temptations from your home.
- Get enough sleep.
- Exercise at least 30 minutes every day.
- Eat a balanced and nutritious diet.
- Practice meditation or deep breathing and relaxation techniques.

Think Before You Act

Complete this worksheet when you feel the urge to do something that you know is self-defeating or harmful.

Date: _____ Time: _____

Describe your urge.

What has triggered this urge?

What will be the negative consequences of giving in to this urge?

What will be the positive consequences of controlling your urges?

What can you do instead of giving in to your urges?

Who can you call or contact who can offer you support?

Rate your urges from 1 to 10, where 1 = My urges are gone, and
10 = My urges are still as strong as ever. _____

Monitoring Your Cravings

Objective: To identify your specific cravings and their effects by monitoring and recording their onset, duration, and frequency.

You Should Know

If you are experiencing addictive behaviors related to your PTSD, you might have both urges to do something harmful to yourself and “cravings” for specific substances or actions. By definition, your cravings make you uncomfortable and your mind and body start to react as if you can only feel better when your desires are satisfied. Your cravings may start to take over your thoughts and even your behaviors. When your cravings are strongest, you may feel that there is simply nothing more important in the world than satisfying your cravings. Your cravings might temporarily go away, and at least for a short time you feel fine. Then the cycle repeats.

Keep in mind that if you do not satisfy your cravings, they will eventually subside. You can then concentrate on the things in your life that are more meaningful. You do not have to feed your cravings to feel better. When you learn to control your cravings, you can make choices that make you feel happy and content while also feeling that you have control over your life.

The first step in understanding your cravings is learning to monitor them. There are four different aspects to cravings. The first aspect is frequency, or how often your cravings occur. Next are the situations that trigger your cravings. While sometimes cravings come “out of the blue,” most of the time there are specific situations that trigger your cravings. Then, there is the intensity of the cravings, which you can rate on a 10-point scale, where 0 = the craving is hardly noticeable to 10 = the craving cannot be denied and it is impossible to think of anything else. Finally, there is the duration of the craving, or how long it lasts. Duration can be measured in minutes or hours.

What to Do

Use this worksheet for at least one week to monitor your cravings. Cravings are not constant; rather, they come and go. After one week, you might see that your cravings are fairly predictable experiences and therefore are under your control.

Date: _____

Use this chart for one week. Make copies of this page if your cravings occur frequently.

What do you crave?	Situation	Day & Time	Duration (hours or minutes)	Intensity (0-10)

Boundaries

Objective: To identify your boundary issues and learn strategies for feeling more empowered by setting limits, protecting yourself when you are vulnerable, and taking safe risks.

You Should Know

In order to heal and grow, you should be aware of your boundary issues and work on them. There is no resilience without healthy, flexible boundaries.

Boundaries are like a semipermeable membrane of your identity. You create them around yourself as you grow up by the limits you set. You have to set limits around people and time, that is, limits around who you let into your life and limits around what activities that you let take up your attention and your time. Good boundaries mean that you spend your time and energy wisely. You say no to things and people you don't want in your life, and you say yes to the ones you do. Sometimes you might be ambivalent or confused, but having a clear yes and no are crucial. You are in charge by choosing what you let inside your life or by sharing your privacy with others. After trauma, boundaries might change some of their functions.

What to Do

Boundaries might become too loose, so everything goes in and out. You might become suggestible, feel an impulse to share private aspects of your life with everybody all the time. Are you aware of some looseness in your boundaries?

They might become too rigid, so nothing goes in or out. You might become isolated and cut off from the world. Are you aware of some rigidity in your boundaries?

They might have a lesion or wound. If suddenly in a quiet conversation you freak out, feel some strong feelings, have a flashback, or start acting out, somebody touched your lesion. Describe such an event.

Boundaries are essential for resilience. Don't go straight to creating a barrier; this is resistance not resilience. Be proactive in setting your boundaries. Boundaries exist to protect life, not to limit life. Appropriate boundaries create integrity. Healthy boundaries can be flexible when needed. They are fluid, able to adjust to change and unexpected events. Being inflexible with our own boundaries may not support us.

Here are some other tips and strategies regarding boundaries

- Learn ways to say NO.
- Learn ways to say YES.
- When it is MAYBE, perhaps take some time to consider your thoughts and feelings before you respond.
- Know how you expect to be treated.
- Learn that the timing of your responses is important.
- Say, in different ways, "You cannot treat me this way."
- Be clear about it to others.
- Be upfront with how you prefer to be treated.
- Be realistic in your expectations.
- Be respectful, thoughtful, and responsible when setting boundaries and set them.
- You don't have to be rude about it.
- You can say, "I don't want to talk about it," "I don't need your feedback," "I need time for myself," or "I would prefer not to go out after work for a drink."
- Respect other people's boundaries, even if you don't agree with them.
- If your boundaries happen to be incompatible with others you are close with, find a compromise.

SECTION 5. MEMORY CAN PLAY TRICKS ON YOU

Time and memory are true artists; they remold reality nearer to the heart's desire.

--John Dewey

Identify Your Memory Problems

Objective: To identify specific aspects of your memory problems, learn strategies for accessing memories from before your trauma, and to monitor your “memory bugs.”

You Should Know

One of the key symptoms of PTSD is that the traumatic event is re-experienced. You are haunted by recurrent, involuntary, and intrusive distressing memories. Becoming aware of your memory issues, knowing that they will go away, and having the patience to work them through will give you a great power to move on. As memory problems can lessen engagement and response to treatment, people get lost in a memory maze and chaos and give up. Not you.

The memory of the traumatic event can be even more crucial than the event itself. In dual representation theory, Chris R. Brewin, Tim Dalgleish, and Stephen Joseph argue that experiences result in two types of memory. One is concerned with the conscious and includes verbally accessible knowledge. These memories refer to sensory characteristics of the trauma and might lead to intrusions. A second type of memory refers to the unconscious and is automatically retrieved when a person is in a situation that is similar to the experienced trauma and this automatic retrieval can then result in flashbacks of the trauma.

Researchers have identified a variety of memory problems:

- *Hypermnnesia* is a vivid or almost complete recall of the past. Some people are able to remember an oddly large number of their life experiences in vivid detail. American neurobiologists Elisabeth S. Parker, Larry Cahill, and James L. McGaugh identified two characteristics of hypermnnesia: spending too much time thinking about one's past, and displaying an extraordinary ability to recall specific events from one's past. Individuals with hypermnnesia can recall much of their lives in near-perfect detail.
- *Hypomnesia*, or amnesia, refers to difficulty in remembering the past learning. *Lacunar amnesia* is the loss of memory about one specific event. It is a type of amnesia that leaves a gap in memory. Scientists believe memories are captured and stored by two separate parts of the brain: the hippocampus, the normal seat of memory, and the amygdala, one of the brain's emotional centers. Even amnesiacs, under the right circumstances, can remember their past feelings.
- *Retrograde amnesia* (RA) is a loss of memory-access to events that occurred, or information that was learned, before the trauma. It tends to negatively affect episodic, autobiographical, and verbal memory, while usually keeping procedural memory intact with no difficulty for learning new knowledge. RA depends on the severity of its cause and is usually consistent

with French psychologist Theodule Ribot's 1881 law, where subjects are more likely to lose memories closer to the traumatic incident than more remote memories. The type of information that is forgotten can be very specific, like a single event, or more general, resembling generic amnesia.

- *Anterograde amnesia* is a loss of the ability to create new memories after the event that caused amnesia. It is a partial or complete inability to recall the recent past, while long-term memories from before the event remain intact. This is in contrast to retrograde amnesia, where memories created prior to the event are lost while new memories can still be created. Both can occur together in the same person.
- *Dissociative amnesia* is generally considered the most common memory problem in dissociative processes. It involves one or more episodes of inability to recall important personal information, usually of a traumatic or stressful nature, that is too extensive to be explained by ordinary forgetfulness. As people use dissociative defenses in trauma, this type of amnesia could be present.
- *Confabulation* is a memory error defined as the production of fabricated, distorted, or misinterpreted memories without the conscious intention to deceive. People who confabulate present incorrect memories ranging from subtle alterations to bizarre fabrications. They are generally very confident about their recollections, despite contradictory evidence.
- *Allomnesia* is an illusion of memory, or distorted memories. It is a distorted account of something in the past that really happened, something that the person really perceived or experienced, but it is distorted.
- *Pseudomonas*, or hallucinations of memories, because it is something that did not happen, was never perceived or experienced. *Jamais vu, jamais vecu, jamais entendu, jamais éprouvé and déjà vu, déjà vecu, déjà entendu, déjà éprouvé* phenomena are qualitative changes of memory.
- *False memory* is a psychological phenomenon where a person recalls something that did not happen or is very different from the way it happened. Great creative imagination and dissociation are known to relate to false memory formation. Creative imagination may lead to vivid details of imagined events. High dissociation may be associated with habitual use of lax response criteria for source decisions due to frequent interruption of attention or consciousness. Social desirability is important in creating false memory.
- *Flashbacks* or involuntary recurrent memory, is a psychological phenomenon in which an individual has a sudden, usually powerful, reexperiencing of a past experience or elements of a past experience. Unwanted memories of trauma are not a sign of pathology per se. In the initial weeks after the traumatic experience, intrusive memories are common. For most trauma survivors, intrusions become less frequent and distressing over time. A central question for understanding and treating patients with PTSD is therefore working on/finding out what maintains distressing intrusive re-experiencing in these people. Three factors appear to be important: (1) memory processes responsible for the easy triggering of intrusive

memories, (2) the individual's interpretations of their trauma memories, and (3) their cognitive and behavioral responses to trauma memories. Most dramatically, in a post-traumatic flashback, researchers Anke Ehlers, Ann Hackmann, and Tanja Michael found that people lose all contact with current reality and respond as if traumas were happening at the moment.

Here is additional information about intrusive memories:

- Intrusive memories are experienced in the here and now.
- Intrusive memories lack contextual information and appear disjointed from other relevant memories.
- Current experiences or memories are matched with traumatic memories.
- Trauma survivors describe their intrusive memories as more distressing than intrusive thoughts.

What to Do

As you can see, memory has many functions, and it is vital for maintaining your identity. Memory issues as a result of trauma are often reflected in your perception of your identity. One of the things you can do is to keep reminding yourself who you are by remembering your life before the trauma.

Reclaiming Your Life

When you experience memory issues, go to your safe place and start reminding yourself of yourself. Ask yourself a series of questions like the ones below. Write down your answers in the left column. When you answer all the questions, take a break and then answer the same questions thinking of your present circumstances.

What adjectives would you use to describe yourself? Write at least ten positive or neutral adjectives.

Before the trauma	After the trauma

What activities did you enjoy? What activities didn't you enjoy?

Before the trauma	After the trauma

Where did you like going? What places did you avoid?

Before the trauma	After the trauma

What were your favorite dishes?

Before the trauma	After the trauma

How did you spend your free time?

Before the trauma	After the trauma

Whom did you spend your time with?

Before the trauma	After the trauma

Digressions

Look around your home and pick five ordinary objects (photos, pencils, mugs, books, anything). For each object, write a short account of how you got it and who gave it to you (or, maybe, you gave it to yourself). Remember the details of the occasion. Where do memories of this object take you next? And next? Do you have any other associations when you look at the object? What are they? How do your thoughts make you feel? What bodily sensations do you have?

N.B. Do this activity on a regular basis (e.g., once per week), using a different set of objects every time.

Object 1:

Object 2:

Object 3:

Object 4:

Object 5:

Stories My Friends Told Me

Choose two or three very close friends. Ask them to tell you about you, about the events you were all part of. Reflect how their accounts differ from the way you remember the same events.

[illegible]

Places from My Past

The places of our past provide generously effective cues for retrieving distant personal memories. Visiting places from earlier in our lives can help us to retrieve memories that have not been recalled for many years, vividly and in detail. With its abundance of precise retrieval cues, *place* is truly a universal, calling up long-forgotten memories. Focused perceptual experience can then lead to other associated experiences, ultimately revealing a more complete memory.

For each place you visit, make a short diary-like entry about the visit. In your entry, focus on your perceptual experiences (smells, sights, sounds, noises, colors). Compare your perception of the place now with how you remember it.

Consider a particular time in your life and concentrate on perceptual experiences.

Talk to parents, siblings, old friends, and former teachers about particular concepts and attitudes you have. What they say can reveal the specific events that led to these concepts and attitudes. Make a short diary-like entry about each one.

When you feel ready and strong, revisit the place(s) of traumatic memory. Make a short diary-like entry about the visit. When it comes into your memory, you can go home again.

“We don’t remember days, we remember moments. The richness of life lies in the memories we have forgotten.”

—Cesare Pavese, *Italian poet*

Monitoring Your Memory Bugs

A memory bug, or a memory leak, is a disturbance or glitch, a short-lived fault, in your memory. In this activity, keep a record of your memory bugs. Every time you experience a memory issue write it down on a chart like the one below. Keep doing this for at least a month. At the end of the month, review the entries and see if you can spot a pattern that causes your memory issues.

Memory glitch	Date/time	Situation	Thoughts	Emotions	Physical sensations

Complete this chart for 30 days. If you feel like your memory is full of forgotten things, don’t worry. Forgetting is an important part of our memory. Think of forgetting as a form of nature’s medicine that keeps us out of trouble. Thanks to our memory’s ability to forget, we are able to carry on in our lives.

SECTION 6. INTRUSIVE THOUGHTS

“Intrusive thoughts are thoughts that enter your consciousness, often without warning or prompting, with content that is alarming, disturbing, or just flat-out weird. They’re thoughts we all have at some point, but for some people, these thoughts get ‘stuck’ and cause great distress.” (Serif & Winston, 2018)

Understanding Intrusive Thoughts

Objective: To identify your intrusive thoughts and increase your sense of empowerment by recording the thoughts, identifying their triggers and patterns, and learning strategies for managing them.

You Should Know

Everyone needs rational thinking as a key process for a strong ego that can confront PTSD symptoms. The more you decontaminate your thinking process from prejudices, wishful thinking, delusions, and emotional blackmail, the more you can think clearly and base your decisions on rational thinking. It is important to learn to manage your intrusive thoughts, images, and impulses.

Intrusive thoughts are absolutely normal and generally harmless. We all experience disturbing, intrusive, socially unacceptable, and unwanted thoughts. While we all have them, some people are more affected. This is truer for people suffering from PTSD, who often have them as tormenting flashbacks of some trauma-related memory. The level of distress the thoughts cause depends on your reaction to them. It is how you cope with them that determines how much they’ll rule/affect your life. They can range from very mild to very severe and they can be about almost anything, but generally fall into the categories below.

- Thoughts of committing illegal or violent acts toward yourself and/or others.
- Inappropriate thoughts or images about sex.
- Fear of loss in the family.
- Fear of being killed.
- Fear that you’ve got a disease.
- Fear of saying or writing something inappropriate.
- Feeling like everyone is looking at you and laughing.
- Worrying that others see you as a burden.

Thoughts like these are often wrongly seen as absolutely necessary instructions. Those affected often look for hidden meanings, believing that they are a sign, a warning that something bad will happen and they will be held responsible. In some cases, the person becomes convinced

that the very existence of these thoughts is a sign that they actually want these things to happen:

- I cannot take the risk of this thought coming true, and I must do something about it.
- I know I should not be thinking this kind of thing, but since I am, it is a warning and I must do something about.
- I'll feel awful unless I do something about this thought.
- Since I've had this thought, I must want it to happen.
- It's wrong to ignore these thoughts.
- Because these thoughts come from my mind, I must want to have them.

Naturally, while most people will soon forget about them and carry on as usual, people with PTSD are very likely to get stuck in a circle that is partly made up of bad thoughts and partly anxious thoughts aimed at preventing their realization. The more times the circle is made, the greater the anxiety. It is when these intrusive thoughts become obsessive that your life can get more complicated and you might become dysfunctional. If you don't learn how to manage them, your process might go the obsessive-compulsive way, depressive way, addictive way, or other dysfunctional ways.

What to Do

One way to cope with intrusive thoughts is to write them down. One way to cope with intrusive thoughts is to write the down. Use the space below to write down intrusive thoughts.

Keep a Diary

Situations and Thoughts

Write down intrusive thoughts you have had in the past two weeks and the situations where you had them:

Briefly describe the situation	Intrusive thought(s)

Situation and Intrusive Thought Pairs

Review the situations you described in the previous activity, and fill out the following chart. For each of the pairs “situation - intrusive thought,” briefly describe your first reaction and how you handled yourself.

“Situation - Intrusive Thought” pair	First reaction	How you handled yourself	How successful was I in handling myself? (1 = not successful to 5 = very successful)

Triggers

Read through the situations again. Are there any similarities between the situations? What are they? (Though situations might be very different, look for the common denominator: particular sound, smell, sight, feeling, mood, words, circumstance, and so on.) These similarities are your triggers. What triggers your intrusive thoughts? Make a list.

Topics

Now look at your intrusive thoughts. Copy them in the left column of the table below. Study them. Are they all about the same topic (hurting myself, hurting others, inappropriate behavior, being hurt by objects/others, and so on)? Write the topic in the right column.

Intrusive Thought(s)	Topic

Triggers, Topics, and Reactions

Fill in the following chart to pull together the information from the above activities.

Situation	Intrusive thought(s)	Trigger(s)	Topic	First Reaction	How I handled myself	Rate of success

Situation	Intrusive thought(s)	Trigger(s)	Topic	First Reaction	How I handled myself	Rate of success

My Intrusive Thoughts Patterns

It is important that you keep this diary for at least 20 entries. You will likely see that there is a pattern in your intrusive thoughts. What are your patterns?

[illegible]

The most important thing you can do is to detoxify your mind. As soon as you become aware of your intrusive thoughts, try shifting your focus to something positive, or at least something trivial like naming objects around you, or remembering the numbers of your life (dates of birth, telephone numbers, street names, and so on). You could also do simple breathing exercises, or if the situation permits, do something physical or manual like taking a short walk, washing the dishes, anything that shifts your focus into a different plane of thought.

However, if you feel that none of this is helping you, go to a hospital or a clinic specializing in PTSD. It can be incredibly hard to function when you're plagued by intrusive thoughts every waking minute of your day. Your treatment may include: being prescribed the best medication for your condition, and different individual and group therapies. In general, these treatments will help show you how to stop intrusive thoughts from taking over your life and how to deal with intrusive thoughts functionally rather than letting them take over your world.

Manage Your Intrusive Thoughts

It's important that even if you're taking medication for intrusive thoughts that you also learn how to manage intrusive thoughts. This learned habit can be done through many therapies; the various effects that intrusive thoughts have on people mean that the treatment for intrusive thoughts varies as well.

When you allow the thoughts to run your life, you make choices that negatively affect you. How to stop depends on the severity of the problem. If you've been avoiding the problem for some time, you may also develop other symptoms and negative behaviors. Treatment can be as simple as doing specific self-help activities.

Martin N. Seif, PhD, and Sally M. Winston, PsyD, suggest taking these seven steps to change your attitude and overcome intrusive thoughts:

- Label these thoughts as “intrusive thoughts.”
- Remind yourself that these thoughts are automatic and not up to you.
- Accept and allow the thoughts into your mind. Do not try to push them away.
- Float, and practice allowing time to pass.
- Remember that less is more. Pause. Give yourself time. There is no urgency.
- Expect the thoughts to come back again
- Continue whatever you were doing prior to the intrusive thought while allowing the anxiety to be present.

You could also do some of the following:

- Engage with the thoughts
- Try to figure out what your thoughts “mean.”
- Check to see if this is working to get rid of the thoughts.
- Attend to the intrusive thoughts; accept them and allow them in, then allow them to move on.
- Don't fear the thoughts; thoughts are just that—thoughts. Don't let them become more than that.
- Take intrusive thoughts less personally, and let go of your emotional reaction to them.
- Stop changing your behaviors to align with your obsessions or compulsions; it won't help in the long run.
- Discover your core values. Understanding your own core values will help you to understand those unwanted thoughts you have.

- Attend the intrusive thoughts; that is, in the wake of an intrusive thought, be grounded, aware, and think rationally, “Is this real?”
- Do not react or act upon them.
- Accepting intrusive thoughts is the key to dealing with them. “This is just a thought. I am so much more than a thought.” There is a boundary between the thought, feeling, and behavior. What do they mean? Really? “They are irrelevant to my life now.”
- Make them small, weaken them.
- Talk yourself down and tell yourself it is fine.
- Accept that the intrusive thought is there and don’t try to resist the experience.
- It’s important not to mistake the thoughts you have for the person you are. An emotional reaction to a thought just keeps the thought alive.
- Trust in yourself. Say to yourself, if the intrusive thought concerns an alarming behavior, “I will not do that.”
- Stop changing your behaviors. When you try to change who you are based on the intrusive thoughts, you allow them to take over who you really are.

Have you ever tried any of these? Write down your experience.

Method I tried that worked for me:

Remember, intrusive thoughts latch on to things that mean a lot to you, whether it is safety, appropriateness, how others perceive you, how you perceive others; and for this reason, they cause a disturbance to your nervous system.

Some of the most common therapies are:

Struggling with the past: Take your time in exploring historical details. You need a good foundation of trust with your therapist, spiritual support perhaps through prayer/faith, and good coping skills to go that road.

Seeing with change: Write a list of situations in which you adapted very well to change. Identify the pros and cons of that change in order to highlight the benefits of the change vs. negative consequences. Some people need to see that change far outweighs the potential risks.

Seeking help and emotional support where it is not available: Speak with a therapist about a pattern of behavior in which it appears you seek out emotional support and love from those who cannot give it to you. The ultimate goal should be to reduce the desire to seek out emotional support in the wrong places and replace that desire with a healthy desire.

Clinging to toxic people: In therapy, explore why you are attracted to toxic people. You can make a list focusing on how that person makes you feel or think about yourself and share it with your therapist. Look for similarities or patterns of behavior that you want to change.

Looking for friends in all the wrong places: It may be helpful to create what is called a “trauma timeline,” which lists each event you deem traumatic, with dates or ages. For example, let’s say you were abused from ages 10 to 25 by various people in your life. You would want to document what happened (briefly) and add your age in stages until you get to your current age. Then examine your timeline for any “clues” to where you may have been looking for emotional support from the wrong people or the wrong things.

Wanting to leave therapy: Ask your therapist, if you are in therapy, to help you actively monitor your progress or lack thereof. Something called a “treatment plan” does this for both the therapist and client. But you may benefit from asking your therapist to give you a bi-weekly or monthly report on how you have grown or how you have struggled. You can also ask your therapist if you can attend therapy less often to see if that might re-charge your energy for therapy.

Struggling with incorrect expectations of therapy: Make contracts. Actively look for progress in yourself. Are you sleeping better, eating more, feeling energized, feeling hopeful, or observing any other positive signs of improvement? If so, perhaps therapy is likely to work for you. Even if you are not noticing any positives at this time, therapy may still be helpful. It is important to remember that treatment takes time.

Talk it out.

Spend one minute calming your mind of all thought.

Change the tone of your thoughts.

Be creative.

Take a walk.

Make a list of what you're grateful for.

Develop Clear, Rational Thinking

Cognitive therapist Albert Ellis offered a three-part model to track and change dysfunctional thinking. It is based on beliefs, difficulties, and consequences:

A leads to → B leads to → C

A is a challenging situation or a trauma trigger.

B is your belief system, relevant for the issue.

C is the response to **A**: emotional, cognitive, behavioral.

You might think that A leads directly to C, but it is the belief system that stands in-between that has the greatest influence. When you think that something is the case, a factual certainty, regardless of evidence, it is a belief. And beliefs, too, can be distorted, and/or contaminated.

Some psychologists refer to thoughts that are not logical nor rational as distortions. Others call them contaminated thinking. These thoughts make it difficult or even impossible for you to act rationally. Contaminated thinking is most often the result of the influence of our inner, uninformed critic, our wishful thinking, our not knowing common-sense logic, and our contaminated beliefs.

However, you can change your false beliefs by “decontaminating” them. The trick is to identify and replace them.

Thoughts	Belief	Replacement
John let me down. People always let me down.	<i>Overgeneralization</i>	I don't have to be pessimistic and distrustful. Sometimes people do come through for me.
That trauma messed up all my life.	<i>Blaming</i>	I will not believe that I am helpless. It was a difficult time and I did my best.
I am stupid and naïve, and that is why I ended up with PTSD.	<i>False cause</i>	I do not know all the factors that combined to produce my PTSD. Saying I am the cause of my PTSD will not help.
If I allow myself to be weak and cry once, I will never stop crying. Then I will become a weak person forever.	<i>Slippery slope</i>	I can cry once. I can control my feelings. Crying is not a sign of weakness but a normal human reaction to a sad event.

Thoughts	Belief	Replacement
I will only stay half an hour at the party, and that way I will not get drunk.	<i>Red herring</i>	I do not have to restrict my social interactions; I can control my alcohol.
If I buy the most expensive phone, people will respect me.	<i>Non sequitur (does not follow)</i>	I do not have to buy people's respect; I am a respectable person just as I am.
I don't need a new car. I should be satisfied with the car I have, knowing how many people do not have a car at all.	<i>Relative deprivation</i>	I will buy a new car because I deserve it; my deprivation will not help other people.
It was on TV, so it must be true.	<i>Authority as an argument</i>	Not everything I see on TV is true. I can check it somewhere else, too.
If I repeat something long enough, it will become true.	<i>Repetition as an argument</i>	Repetition does not make things more true, just more boring.
I will not take that medicine because it comes from a foreign country.	<i>Origin as an argument</i>	Just because something is foreign, it does not mean it is bad.
If I complain to my boss, s/he will fire me.	<i>Force as an argument</i>	I will not get intimidated by force; I will make my complaint politely and calmly.
My best friend doesn't understand me. Nobody does.	<i>Hasty generalization</i>	If one person does or doesn't do something, that doesn't mean that the whole world is the same. I will find somebody who understands me.
I will either be as I was, or I better kill myself.	<i>Black or white, false dilemma</i>	The world is not black or white. There are more than just two options.

Thoughts	Belief	Replacement
Nobody likes me and wants to be with me because of my PTSD. I'm not good for anything.	<i>Appeal to popularity</i>	People don't have the same opinions. Nowadays, people are more educated about PTSD. People also used to think the earth was flat.
My father will never forgive me for what I did.	<i>Mind reading</i>	Do you have facts to prove that? Have you checked it?
I refuse to sit on a plane in the 13th row, because it is bad luck.	<i>Magical thinking</i>	There is no evidence to support what I believe. I do not need magical thinking to make my choices.
I feel so guilty about what happened, I must have done something wrong.	<i>Emotional logic</i>	I feel guilty about what happened, but I did not cause the event.
We should preserve tradition and ride horses, instead of using cars.	<i>Tradition as an argument</i>	I can honor tradition in different ways than this.
I am so pitiful that everybody should believe me.	<i>Misericordiam (appeal to pity)</i>	I don't need to evoke pity to be believable. I have my integrity and my statements are true.
They told me that this dishwasher is the best one on the market. I do not believe that's true; they just want to sell it.	<i>Motive as an argument</i>	Even though their motivation is to sell the product, that does not necessarily mean they are lying.

Daily Thought Diary

Keep a daily thought record, writing down your main disturbing thought or thoughts. Tracking contaminated thoughts and the beliefs that influence them is only the first layer. Underneath are core beliefs that shape our thinking, feeling, and personality. For example:

1. I can't think straight (no mind, confused, crazy, silly).
2. I cannot feel joy (happiness is not for me; I am not lucky).
3. I am incapable (inadequate, powerless, out of control).
4. I am worthless (a mistake, bad, no value, useless).
5. I am not lovable (because I wasn't loved in the past).

Day	Trigger	Thought	Contamination	Replacement
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.

SECTION 7. EMOTIONS THAT DISTURB YOU

“If your emotional abilities aren't in hand, if you don't have self-awareness, if you are not able to manage your distressing emotions, if you can't have empathy and have effective relationships, then no matter how smart you are, you are not going to get very far.”

—Daniel Goleman, PhD

Understanding Emotions

Objective: To identify fifteen different emotions and record aspects of how you have experienced those emotions.

You Should Know

Emotions are an important part of your life, and a very important part of your PTSD condition. The goal is to become aware of your emotions, to understand them, learn to control them, and express them appropriately.

Daniel Goleman, PhD, is one of the key researchers of emotional literacy and emotional intelligence. We could describe emotional literacy as consciousness about personal feelings. You know what you feel and preferably you can express it in words. Being in touch with your emotions is being in touch with yourself. If you are aware of your emotions, you can learn to manage them better so that you can express them in functional ways. Emotions are a kind of energy that influences your motivational system. By becoming aware of your emotions, you will also be able to recognize other people's emotions and handle them appropriately. Finally, emotions are very important for the quality of your relationships.

What to Do

Identifying and Naming Fifteen Emotions

There is a wide variety of human emotions. Sometimes we do not have words or ways of identifying them. Here is a list of fifteen emotions that people frequently feel during or after a trauma:

1. *Despair and hopelessness* are the feelings that appear during tragic events and that make you feel like they are beyond you. These feelings appear when you are chronically unsatisfied; you lose a sense of groundedness in life. If you are desperate, you might stop wishing, because you cannot hope anymore and you might give up on life. You might feel that you are breaking down and nothing you believe in is right.

Describe the feeling of despair that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you? What did you do?

Do you notice when other people are desperate? What do you do?

How does despair influence your relationships with others?

2. *Sadness* is the feeling that appears when you lose something very significant. With sadness, you might become quiet and disappointed in life. Then your grieving process begins. As hard as it is, the grieving process can help you find closure with your loss. Sadness might often be accompanied by suffering, fear, and other feelings, including anger. When you finish the grieving process, you will be free to move on along your chosen path.

Describe the feeling of sadness that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are sad? What do you do?

How does sadness influence your relationship with others?

3. *Anger* is the feeling that appears in a situation when you realize you were attacked or at risk, when you believe that the world has been unfair to you, and that you are capable of changing it. It might involve strong and hostile response to a perceived threat, provocation, or hurt. Anger is connected to your feelings of power, importance, and meaning.

Describe the feeling of anger that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are angry? What do you do?

How does anger influence your relationship with others?

4. *Fear* is what you feel when you perceive danger; you might freeze in fear as a result of the traumatic event. Some researchers think that fear is biological manifestation of your will to live and self-protect, but experiencing fear is deeply affected by the cultural or historical context you live in. There is a wide range of fear emotions and there are many ways of expressing it, psychologically and physically. Fear is one of the basic human emotions, which some people find very uncomfortable but it is crucial to our process of living and growing.

Describe the feeling of fear that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are frightened? What do you do?

How does fear influence your relationship?

5. *Disappointment* is a feeling that occurs when someone does not act in association with your expectations, which makes you frustrated. Expectations that lead you to disappointment could be realistic, based on a fair and honest giving and receiving process. And they can be unrealistic, as in a situation when you expect others to fulfill all your wishes and needs. This disappointment is called *symbiotic disappointment*.

Describe the feeling of disappointment that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are disappointed? What do you do?

How does disappointment influence your relationship with others?

6. *Spite* might appear when you are dealing with unreasonable expectations of others and they have the wrong attitude toward you. You might feel malicious, mischievous, or offended. Spite motivates you to rebel against others and induces negative thoughts about you. It is a kind of hidden fight or defense against being devalued, bullied, or made fun of.

Describe the feeling of spite that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are spiteful? What do you do?

How does spite influence your relationship with others?

7. *Shame* is a feeling similar to fear; you might feel it when you perceive you made a negative impression in front of significant others. It is a self-conscious emotion associated with a negative evaluation of yourself. Psychoanalysts describe shame as a type of fear of being laughed at. You feel ashamed when you think you did something wrong. The point of shame is to increase your level of socialization. It has many functions; one of them is to keep boundaries between you and other people by keeping secrets.

Describe the feeling of shame that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are ashamed? What do you do?

How does shame influence your relationship?

8. *Guilt* is a feeling that appears in situations in which you think you did something wrong. Along with shame, guilt is called a moral feeling, because it depends on moral norms. Guilt occurs when you believe or realize (accurately or not) that you have compromised your own moral standards and have a significant responsibility for it. There is a specific kind of guilt that appears in PTSD called *survivor's guilt*. You feel as you have done something wrong by surviving while others did not survive, or you feel you did not do enough even if it was impossible.

Guilt is an irrational, powerful, and sometimes destructive emotion. If you are feeling it, it is irrational but normal, because it is difficult to assign responsibility. This guilt might give you a false sense of control. When you take on the burden of responsibility, you tell yourself that it wasn't random or inconsequential. The best strategy for working with guilt is to look into the future and make wise choices. Remember that you know how to grieve and do it. Look around and see how other people think and feel about your survival. Perhaps their perception works better than yours. Check to see if you have distorted thoughts about causes and effects.

Describe the feeling of guilt that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are guilty? What do you do?

How does guilt influence your relationships?

9. *Boredom* is a feeling in which you lack interest and have difficulty concentrating. You feel that you are left with nothing particular to do, you cannot find anything interesting in your surroundings, and your day is dull and tedious. When you are feeling bored, you feel as if the external world fails to engage you, even though you want it to. There is something that prevents it. Boredom is often a natural response to past events that are characterized by intense experiences and overwhelming emotions.

Describe the feeling of boredom that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are bored? What do you do?

How does boredom influence your relationships?

10. *Anxiety* is a type of irrational and undefined worry that appears when you think your present life situation is exceeding your possibilities. It is a state of inner turmoil, of generalized and unfocused worry. It is not the same as fear. Anxiety increases the feelings of weakness and helplessness in relation to danger. Instead of mobilizing your biopsychological potential for a constructive response to danger, as it is when you feel fear, you find yourself trapped in an unfamiliar condition that inhibits you.

Describe the feeling of anxiety that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are anxious? What do you do?

How does anxiety influence your relationships?

11. *Happiness* is a complex feeling that includes positive emotions ranging from contentment to intense joy. You can feel life satisfaction and subjective approval of yourself. It can be associated with fulfilling your wishes or hopes, for example, fulfilling the wishes or hopes of the one you love, pleasant expectation of the satisfaction in the near future, and sharing that satisfaction with others. Being a part of others' happiness reveals to you the connecting function of that emotion, because happiness connects people.

Describe the feeling of happiness that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are happy? What do you do?

How does happiness influence your relationships?

12. *Empathy* is the capacity to understand and feel what another person is feeling from their point of view. It is a feeling that includes not only noticing and understanding the feelings of another person, but includes *your* feelings and concerns, which sometimes leads to a positive action. Emotional empathy is the capacity to respond with appropriate emotion toward another. It can also be a feeling of discomfort for other people who are suffering.

Describe the feeling of empathy that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are empathic? What do you do?

How does empathy influence your relationships?

13. *Pride* is a positive emotion that results from positive self-evaluation. It is one of the self-conscious emotions, along with embarrassment and shame. Pride is a feeling that appears when you think that you or your action has met the approval of a significant person or persons in your life. It is a reaction to success in achieving some positive human goal. It is associated with feelings of accomplishment and plays a big role in positive self-esteem.

Describe the feeling of pride that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are proud? What do you do?

How does pride influence your relationships?

14. *Gratitude* is the feeling that appears in relation to others who took care of your main needs and wishes and who accept you as you are. It is connected with subjective well-being. Grateful people are happier, less depressed, less stressed, and more satisfied with their life. When you feel gratitude, you might find more positive coping strategies, your personal worldview might become more optimistic, and you might become altruistic.

Describe the feeling of gratitude that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are grateful? What do you do?

How does gratitude influence your relationships?

15. *Trust*. Underneath the feeling of trust is a belief that a person in your life will do as expected; you perceive them as good tempered, reliable, and responsible. Trust starts in a family, so when you develop a basic trust, you will grow as a healthy, self-reliant person. You will have both self-trust and the ability to trust other people. Erik Erikson thought that basic trust is the essence of positive growth in children, stemming from a healthy relationship with the mother, which, ideally, is reached during the first year of life. From that experience, children learn how to trust others.

Describe the feeling of trust that you remember.

What did you do in that situation? How did you think and act?

How did that motivate you?

Do you notice when other people are trustworthy? What do you do?

How does trust influence your relationships?

Describe feeling(s) you have experienced that are not mentioned here.

Understanding Your Emotions When You Are Upset

Objective: To identify specific situations when you have been upset in the past and practice strategies for managing your emotions during difficult situations in the future.

You Should Know

Would you say that you have a high emotional intelligence or EQ? Research on this subject has shown that people with a high degree of emotional intelligence are happier, more successful in their careers, and even healthier.

Psychologists say that we are born with a certain IQ (cognitive intelligence) and this does not really change after the age of twelve, but our EQ can be increased at any time with a little practice.

Emotional intelligence begins with learning to recognize your emotions and the effect your emotions have on your behavior, particularly when you are upset. This worksheet will help you understand how your emotions affect your behavior when you are upset and the positive things you can do in the future to feel more in control.

What to Do

Begin by thinking about the last time you were really upset. Perhaps you were angry at someone else, or perhaps you were upset about something you did and you feel guilty or regretful.

Describe the situation that made you feel upset.

Describe any external events that caused the situation.

Describe anything you did that contributed to the situation.

How did the situation make you feel both emotionally and physically? Be specific.

What did you want to do as a result of how you felt?

What did you actually do in this situation?

What did you want to say in this situation?

What did you actually say in this situation?

How did your emotions and behaviors affect you later? Were you still upset?

Did you do anything at that time to feel better?

Check any of the coping behaviors that might have helped you in this situation:

_____ I could have communicated how I felt.

_____ I could have walked away.

_____ I could have recognized my feelings, but not acted on them.

_____ I could have done some deep breathing.

_____ I could have engaged the person I was with to solve the problem.

_____ I could have sought support either before or after this situation.

_____ I could have adjusted my expectations and been more realistic about what “should” happen in this situation.

_____ I could have found some humor in this situation.

_____ I could have been more positive about myself instead of blaming myself for what happened.

_____ I could have been more assertive about my rights and needs.

_____ I could have done something positive to calm myself down when I realized I was upset.

_____ Other positive coping behaviors:

The Grieving Process

Objective: To identify ten specific phases of grief and practice strategies for coping.

You Should Know

Understanding and learning about the grieving process is an essential part of your recovery process. It is by no means an easy one. It could actually be one of the most difficult things you have to do in overcoming your trauma. Accepting grieving and going through it as a process will help you make/find closure with the past and move on. It takes real courage and bravery.

Long after Sigmund Freud and his work on sadness and Elizabeth Kübler Ross's approach to the stages of grief, many researchers worked on analyzing the grieving process in order to help people overcome difficult times and start taking risks again, live their lives as fully as possible, recover after loss, and find closure with the past. Grieving is a natural process that helps us to let go, gives us closure, and frees us to move on in our lives.

If we dare to live our life fully, there is no way to avoid loss. Even if we do not live our lives fully, there will be losses. It can be a loss of a person, a relationship, a job, a possession, a feeling, even an idea (if you believed in something deeply). The experience of loss is difficult to go through. Some people try to avoid it, deny it, repress it, and split it off from the rest of their lives. They pay a high price for that. The grieving process has its biological, psychological, and spiritual function and meaning. It helps us withdraw and detach our energy from the lost object, person, or event. It helps us end that attachment and accept our own human fragility, vulnerability, and the tough parts of our lives.

Researchers divided the grieving process into phases to make the process easier to understand and to help therapists and their clients have a common language. Rather than being rigidly divided, phases can blend into one another. Sometimes from phase 1, you can jump to phase 3, then come back to phase 1 and so on. Each individual is different. Knowing the phases can help you understand what is happening, know that it is normal, that it will pass, and that the next phase will come, no matter how illogical or irrational they might seem.

What to Do

It is good to know the normal, typical phases of grief, but it doesn't mean you need to be experiencing or sharing your grieving process all the time. You can make choices, depending on whether you feel strong or vulnerable, about who you are with and who you reveal your feelings too. It is OK to put your feelings aside sometimes. For instance, if you are with emotionally illiterate or toxic people, wait to express your grief. If you are in the middle of a dangerous situation, tell yourself: "I will control myself now. I will grieve later. Safety first." Once you are with safe people, then you can let go.

The Phases of Grief

1. Shock: The trauma happened. You might freeze, become numb or mute, and not register what happened. You might be disorganized and confused; your body might become extremely rigid or extremely limp. You might feel like you don't care. Some people might be in this phase for seconds, some for hours. Follow the advice of the people you trust. If it is a police officer or a doctor who gave you bad news, follow their instructions. Let professional people take care of you.

Remember a trauma and your shock. Describe how you felt.

2. Denial: Once confronted with a trauma, or the news about a trauma, you might not believe it. You might deny it despite all the facts. "No, no, it didn't happen. No, this is not possible, this is not the truth; it didn't happen to me." It is OK to do that. Let yourself say "NO, it didn't happen," for a while.

Remember a trauma. How did you deny it? Describe how you felt.

3. Fight/Flight/Freeze: You might feel the need to fight with the person who gave you the bad news, or with somebody you believe is responsible. Resist the urge. You might run away as far as possible and hide. That is OK. After running, sit down, breathe, and ground yourself. Or you might just faint. That doesn't mean that you are weak. It is your body that is switching you off from the trauma. You need time to absorb what happened.

Remember a trauma and the way you reacted. Describe your initial reactions.

4. Pain Strikes: Sometimes the pain comes unexpectedly; you can't imagine how much pain you would experience. You might feel like every bone in your body is hurting, every part of your personality, and your soul is aching too. Still, our bodies are made to endure it and yours will, too. The pain will stop one day.

Remember the trauma and describe the pain you felt.

5. Emotional Elaboration: You might have a panic attack, burst into tears, get angry, or feel a range of other human emotions. Your self is trying to handle the trauma. Be aware of angry or aggressive feelings or thoughts—they might look logical to you but they are not. This is still normal. For instance, you might think, how can anyone be angry at their wife who died and left them? They can; it is possible and human. Just understand and do your best to control it, and not act on it. Or talk to a therapist or a grief counselor who can understand it and help you accept it. Be aware of guilt, that is, taking everything that happened on your shoulders. Survivor's guilt is a known human phenomenon. People save lives and feel guilty they didn't save everybody. People survive and feel guilty the others died. That is normal! Once you are in your safe place, with safe people, let it all go.

Remember a trauma and describe the whole range of your feelings.

6. Rationalizations: This is a phase when you try to explain rationally what happened or make your own theory about the event. This is a normal human need. You might develop several different theories and elaborate each one of them at length. You need friends who are willing to listen all night without confronting you with their own theories. You might change your theories and facts, but what you are really doing is trying to convince others—and yourself—as a way to understand and process the trauma.

Remember a trauma and your theory/theories about it.

7. Acceptance: This phase is when you acknowledge that the trauma was beyond your control. It is sometimes very difficult for us humans to accept our limitations and boundaries, the idea that “things just happen.” You did the best you could. Accept that bad things happen. Stop fighting.

Remember a trauma and how you came to accept it.

8. Risk Taking: If you went through all of the above phases, you will likely come to understand that life is complicated, complex, and sometimes traumatic. But one morning you will wake up and feel that you don’t want to spend the rest of your life as a shell of a person. You want to live again and that means you will have to take risks. But you are wiser now. You will take a risk to live, love, and work again; adopt a new child; find new friends; or move somewhere. Your choice will be wise.

Remember a trauma and the turning point that led to your decision to move on.

9. Separation: For many people, this is the phase when you say goodbye to your traumatic experience. You might write a diary or a letter (that you will never send) saying goodbye to your loss, places, and situations where you suffered; people who hurt you; and your experiences and actions while grieving.

Remember a trauma and describe the way you said goodbye.

10. Gratitude: Then, one day you will feel grateful. Grateful that you are alive, that you have your life, and that you can go on. Yes, you were hurt, yes, you experienced loss. But you had something to lose. You will rediscover the joy in nature, people, and yourself. When that happens, you might want to help people who are going through what you went through—people who are confused, lost, or resigned.

Remember a trauma and describe how you learned to be grateful.

On the lines below, describe the trauma you experienced and your individual grieving style.

Strategies for Understanding and Coping with Grief

- Understand the phases of grieving.
- Learn how to control your behavior.
- Learn how to control your thoughts.
- Learn how to control your feelings.
- The grieving process is a private process; protect it.
- Teach the significant people in your life about the grieving process.
- Create a safety net with people you can trust and who will be understanding.
- Find a therapist or grief counselor.
- Find a grief support group.
- Be patient with yourself. Give yourself time, as much time as necessary.
- Stop punishing yourself; it will not help, nor will being self-destructive.
- Ask for help in any phase and be specific about what you need.
- Take care of yourself.
- Don't make important life decisions while grieving.
- Help others who are grieving.
- Write a grief diary.
- Congratulate yourself when you finish a phase.
- Paint, sing, or dance your process; if you choose, keep it private until you go through all the phases.
- Even when you are focused on grieving, look around at the world sometimes.
- Do some charity work. Give back.
- Think about what you liked doing before the trauma.
- Notice how other people handle trauma. You don't have to do the same, but they might be doing something useful. Give it a try.

SECTION 8. IMPULSIVE BEHAVIOR

“By constant self-discipline and self-control, you can develop greatness of character.”

—Grenville Kleise

Understanding Your Impulsivity

Objective: To identify the negative consequences of impulsive behavior for people with PTSD and to practice anger management techniques to curb impulsivity.

You Should Know

Impulsive behavior is one of the core symptoms of your PTSD, and an important one, because you might do harm to others and yourself without intending to do so. You have to learn to recognize it, control it, and replace it with thinking/feeling behavior before you act. Yes, it is possible.

People who are impulsive tend to act before thinking or feeling. They act before relevant information is gathered (“reflection impulsivity”) and aim at immediate rewards as opposed to larger but delayed or unlikely rewards (“choice impulsivity”).

“Acting out” is a psychological term meaning to perform an action on an impulse in contrast to bearing and managing the associated feelings. The acting done is usually risky; the actions that are the most worrisome are aggressive, addictive, and sexually aggressive behavior. Without thinking it through or feeling about it, a person might be destructive to self or others and this may inhibit the development of more constructive behavior.

If you are acting on the spur of the moment as a response to immediate stimuli, without having any action plan or choices, you might be acting out. If you are behaving without considering the consequences with an enormous sense of urgency and under emotional distress, you are acting out. In the process you might be harming others and yourself; you might feel you are losing self-control. You might feel disinhibited from some old constraints, but you might be on the way to really losing control. Not everyone lashes out angrily. People who tend to feel extreme anger might try to push it down or hide it from others. This can lead to self-destructive behavior, including self-harm, substance abuse, or other behaviors.

What you believe about yourself plays an important part in impulsive behavior. If you have a grandiose belief, or if you think something has the power to overwhelm you, you will behave impulsively. “When I feel anger, I cannot control myself; I have to hit somebody/something” is an example of “contaminated thinking.” The reality is that among your biological impulses, emotions, and thoughts, there is time and space where you can decide to stop, think, and feel (metabolize it), or choose; or ask for help.

Unfortunately, research has found a connection between PTSD and relationship violence. On a yearly basis, between 8 and 21% of people in serious intimate relationships take aggressive actions against their partners. If your relationship with people is affected by anger, it's wise to

learn about its association with violence. People who are aggressive toward others more often than not will try to push down or hide their anger. This can be effective in the short-term, but in the long-term, it can build up the anger until it's out of control.

What to Do

If you have PTSD, you may find that the anger you experience is very intense and, as a result, it may be very difficult to manage. It is very important to learn healthy ways of releasing tension that accompanies intense anger. Specific emotion regulation strategies for intense anger are described below. These anger management techniques are likely going to be helpful in dealing with other emotions as well. Considering this, they can be put to use in all areas of your life.

Anger Management

- Sit in your safe place.
- Think of a safe way to release your anger, or bring on a state of relaxation and peace.
- Try crying or expressing another emotion. Am I feeling anything else, besides anger?
- Do something physical like exercise and dancing.
- Reorganize your desk, closet, bookshelf.
- Practice grounding, breathing, and relaxation.
- Connect with a supportive person who can help you soften the impact of this emotion.
- Call a friend when you're feeling out of sorts, or have a talk with an empathetic family member.
- Create artwork about your anger. Write, draw, paint, compose.
- Hit a punching bag.
- Scream into a pillow.
- Learn quiet verbal confrontation.
- Take a shower.
- Go to an anger management class.

Your anger does not come out of nowhere. Most of it lies dormant inside of you and you are unaware of its silent existence. However, when it is awakened, it shows itself in all its destructive might and glory. It is important for you to recognize the situations that awaken your anger and drive you to act impulsively.

Keep the following Anger Triggers Diary for two weeks. Over the course of the two weeks, try applying different anger management techniques from the list above.

Anger Triggers Diary

Day/ Time	Situation/Trigger	Angry Thought	What did you feel?	How did you control your impulse to act?	What was the result?

Which anger management technique was most successful for you?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Suicide Control

Objective: To identify your suicidal thoughts and behaviors and learn strategies for what to do when you feel suicidal.

You Should Know

During your experience of PTSD, you might have suicidal thoughts, feelings, and behaviors. It happens to people. The important part is to stop your impulse to act on the thoughts and feelings (impulse control).

The tenth leading cause of death in America is suicide. Assessing a suicide risk remains a challenge because almost everybody in their life thinks about suicide at least once. People who only *think* about suicide are very different from those who actually do it. So, if you've ever thought about suicide, it doesn't mean you were going to go ahead and act on those thoughts.

Suicide Ideation (from hopelessness to helplessness): Suicide ideation means that you are thinking about, considering, or planning suicide. Passive suicide ideation happens when you wish you were dead or don't exist, but you don't act on it. Active suicide ideation is when you plan how to execute it, sometimes to the last detail. You might have those thoughts when you feel helpless and out of control.

What to Do

IMPORTANT: Research shows that 70% of those who commit suicide tell someone about it in advance. If you are thinking about suicide, even if it is only once in a while, call the National Suicide Prevention Lifeline immediately. Their counselors are available 24/7/365 with confidential help. They will connect you to a network of services across the country. Call 1-800-273-8255 or visit their website www.suicidepreventionlifeline.org

Exploring Your Suicidal Thoughts and Behaviors

What are your opinions about suicide?

Have you ever thought about or were tempted to kill yourself? Describe below.

Have you talked with someone about suicide? When? Whom?

Date	Trigger	Rating	Thoughts	Actions

Date	Trigger	Rating	Thoughts	Actions

Have you ever thought about suicide, but you were not really wanting to die? For instance, “I will kill myself and they will be sorry for treating me this way.” Describe below.

Here are some common suicidal thoughts. Which ones sound familiar to you and your situation? Describe below. Seek professional help to process these thoughts and concerns.

- My life is not worth living.
- My family will be better off without me.
- Next time, I will take enough drugs to do the job right.
- Take my valuables, I do not need them anymore.
- I will not be around to deal with that.
- You will be sorry when I am gone.
- I will be out of your way soon.
- I just can't deal with anything; life is too hard.
- There is nothing I can do to make it better.
- I will be better off dead.
- I feel there is no way out.
- I feel depressed.
- I sleep too much and have problems with appetite.
- I lost interest in life's pleasures.
- I withdrew from family and friends.
- I constantly feel tired and lack of energy.
- I cannot concentrate, think, or act.
- I feel worthless.
- I blame myself and feel guilty.
- I have a lot of thoughts of death.
- Nobody understands me; nobody feels the way I do.

Here are some things you can do to deal with suicidal thoughts:

- Get professional help immediately.
- Follow up with treatment.
- If for any reason you are unsure or uncomfortable about taking action, call a suicide prevention hotline immediately.
- Be sure to control your actions.
- Be aware of your thoughts and feelings.
- Do take it seriously.
- Be willing to talk to somebody you trust.
- Be concerned.
- Find somebody who cares and understands.
- Do not assume that the situation will take care of itself.
- Do not be alone.
- Do not keep it as a secret.
- Do not drink or take drugs. They do not help.
- Do not be shocked and surprised with yourself.
- Do not challenge or dare.
- Do not argue or debate moral issues with toxic people.

Sexual Behavior Management

Objective: To identify sexual thoughts and behaviors that are resulting in negative consequences and learn strategies for avoiding those consequences.

You Should Know

You might have sexual thoughts and feelings, and that's OK. You don't have to act on them. You can control yourself. Become aware of the thoughts and feelings you have. If you are uncertain if you have a problem with sexual impulse control, here are some indications that you might:

- If you have recurrent and intense sexual fantasies, urges, and behaviors that take up a lot of your time and feel as if they're beyond your control.
- If you feel driven to do certain sexual behaviors, feel a release of the tension afterward, but also feel guilt or remorse.
- If you've tried unsuccessfully to reduce or control your sexual fantasies, urges, or behavior, and you use compulsive sexual behavior as an escape.
- If your sexual behavior has serious consequences, such as sexually transmitted infection, loss of important relationships, trouble at work, financial strain, or legal problems.
- Due to your sexual behavior, you have trouble establishing and maintaining healthy and stable relationships.
- If you lose your focus or engage in sexual activity or search internet pornography at work, risking your job and everything that is important to you.

What to Do

If you recognize your behaviors in many or all of the above statements, there is help available. The best strategy is to prevent the behavior from escalating further. Here are some tips and strategies:

- Get help early. Find a sex therapist.
- Know your body.
- Look beyond the sexual behavior itself. It may be a cover for depression or anxiety.
- Avoid risky situations.
- Learn to say stop to yourself in the second person, that is, addressing yourself: "Stop doing that, stop saying that. Stop. Stop. Start an action and then stop it. You can do it. Stop."
- Set boundaries for yourself.
- When you get the impulse—wait! Shift your focus to something else like counting, naming objects around you, remembering phone numbers and street addresses.

- Go slow.
- Learn to say no to yourself and to others.
- Anticipate your behavior if aroused.
- Learn from your feelings of guilt, shame, and low self-esteem.
- Take care of your other issues such as depression, suicide, distress, and anxiety.

What Triggers Your Explosive Behavior?

Objective: To identify and record the emotions and events that precede angry feelings and explosive outbursts.

You Should Know

If you have difficulty controlling your anger, there might be specific things that trigger angry outbursts. Sometimes these triggers are obvious, but other times triggers are not as obvious because emotions have built up over time, and they suddenly erupt without a clear reason.

What to Do

This worksheet is designed to help you track strong emotions and the events that precede angry feelings and explosive outbursts. This chart can help you identify what triggers your anger and how you react.

Every time you get angry, write down what happened in the chart.

- In the 'Trigger' column, write what might have set off your anger.
- In the 'Rating' column, rate your angry feelings from 1 = just a little angry to 10 = ready to explode.
- In the 'Thoughts' column, write down what you were thinking as you became angry.
- In the 'Actions' column, write down how you expressed your anger.

Date	Trigger	Rating	Thoughts	Actions

Date	Trigger	Rating	Thoughts	Actions

"What it [expressive writing] helps you do is externalize things, give a shape to it. And that's what Denise Levertov kept telling me is that, 'Look, you control it now. It doesn't control you anymore. You own it now.'"

—Bruce Weigl, poet and veteran

Expressive Writing

Objective: To identify types of expressive writing and how they can help you access feelings or memories to help your PTSD healing process.

You Should Know

Expressive writing is an activity aimed at becoming aware of, understanding, empowering, and improving yourself. It is personal, emotional, and free in terms of form or respect to writing conventions, like spelling, punctuation, and verb agreement. It is important to know that nobody has to know what you have written. If you keep a journal or collect your activities, you can decide to destroy them. It is up to you. You might decide to keep some and share but not while you are writing.

Verbalizing complex and intricate psychological processes is not easy. Sometimes it seems impossible altogether. It is a very important contribution to your growth process because it is coming out of your core. Some thoughts are nonverbal and some are preverbal, like in your dreams. The point is not to translate your processes to verbal ones but to add a technique to your growth. Sometimes it is easier to deal with something outside yourself, on paper, rather than within complex interior experiences.

The most common types of expressive writing are a diary, letters you will never send (to selected individuals, alive or dead, followed by imagined replies from the recipient), and letters to your future self (writing to yourself imagined at some point in the future). Some more radical forms include writing to parts of your body, or writing a dialogue with a bottle of alcohol, if you are a recovering alcoholic. There are no limits!

Research suggests that written disclosure may reduce the physiological stress on the body caused by inhibition. Writing about whatever is bothering you brings about clarity, order, relief, and has an overall disinhibiting effect (you free yourself of things you might not say in a face-to-face communication). It is a powerful break; you wrote it on paper, it is there, you don't have to think it anymore.

What to Do

When engaging yourself in expressive writing, consider and try to apply the following guidelines:

- Let go of your inner critic as much as you can.
- Be honest as much as you can. There is nowhere and nothing to hide.
- You don't have to please anybody. No restraints, no considerations.
- The focus of the writing is on yourself. It might be difficult at first. With time, you will get better.
- Use first-person pronouns: I, me, my, we, etc.
- Express your feelings, ideas, or opinions and sensations.
- Write about your personal values.
- Include personal experiences of a social event.
- Write about your tastes in music, film, literature, food, outdoor activities, friends, and so on.
- Define or label yourself: "I am a quick walking, quick talking, quick thinking person."
- Turn off your grammar and spelling police.
- If you are writing a letter, never send it. Never.
- Give yourself a name and imagine yourself as a character whose life story you are documenting (not inventing!).
- Do not ever think about the possibility of someone else reading what you have written.
- Do not imagine a reader.
- Keep your writing safe. Do not go back to it. There is plenty of time in the future for you to read it. The later the better. In fact, you may never want to read it again. The point is to get it out of you, for you to know that it is out, that you got rid of it.

There are no prescribed topics to write about. Writer Charles Bukowski is known for saying that he saw a poem in everything from a speck of dust on furniture to standing on top of a hill to complex emotions deep inside of him. Though often denied a place in American literature, he is one of the greatest American poets. Bukowski never cared for recognition. He wrote and wrote and wrote.

Write, Write, Write

Use separate paper, a notebook, or your computer to write. Here are some suggested topics you might consider starting with, but not strictly adhere to (in fact, allow yourself to digress). Close your eyes. When you open them, start writing about any of the following topics.

- Early memory
- Family lunch
- First love
- Trip to a place you have visited for the first and last time
- Your biggest life challenge (so far)
- Someone you saw in a shop/street/restaurant/park
- An instruction how to make you happy
- The story of a film about your life you would like someone to make
- Your neighborhood

Writing might help you relieve tension and emotion, establish self-control and understand the situation better after the words are put on paper. Here is another activity for you to try:

Write a letter you will never send. It can be a letter to a real or imaginary person in your life, to your mother or father, family member(s), business colleague(s), etc. You can write to historical persons or people you admire or who you would like to be friends with if you were contemporaries. You can also write to fictional characters (from novels and films).

But it can also be a letter to a concept: love, hate, health, death, beauty, justice, etc. It can be a letter to objects that are somehow significant to you, such as your favorite mug, book, pen, pair of shoes, an object of your desire, etc. Really, no limits. Once you write your letter, fold it, put it in the envelope, address it, and put in a box. Do not open the letters. Treat them as sent.

Another expressive writing technique was developed by James Pennebaker, PhD. In his landmark research project, writing about emotional upheaval was shown to have potential health benefits.

Over the next four days, write down your deepest emotions and thoughts about an emotional challenge that has been affecting your life. In your writing, really let go and explore the event and how it has affected you. You might tie this experience to your childhood, your relationship with your parents, people you have loved or love now, or even your career. Write continuously for 20 minutes. Optional final step: After the week of writing, try writing from the perspectives of other people involved in the event or situation.

Useful Tips:

- Find a time and place where you won't be disturbed.
- Write for a minimum of 20 minutes per day for a week.
- Topic: What you choose to write about should be extremely personal and important to you.

- Deal only with events or situations you can handle now. That is, don't write about a trauma too soon after it has happened if it feels too overwhelming.
- Write continuously. Do not worry about punctuation, spelling, and grammar. If you run out of things to say, draw a line or repeat what you have already written. Keep pen on paper.
- Write only for yourself. You may plan to destroy or hide what you are writing. Do not turn this activity into a letter that you will send to someone. This activity is for your eyes only.
- Observe the "Flip-Out Rule": If you get into the writing, and you feel that you cannot write about a certain event because it will push you over the edge, STOP writing!
- Expect strong feelings. Many people briefly feel a bit saddened or down after expressive writing, especially on the first day or so. Usually this feeling goes away completely in an hour or two.

Afterward, reflect on what you have written. Try just reflecting from the memory of what you have written. Read it only if you have to. Be compassionate with yourself. Keep your writing hidden in your safe place.

Or you might want to keep your writing in sight or readily available. It helps to know that when certain feelings overwhelm you, you feel more confident because you have been there and have done that and there it is in that box/notebook/envelope/folder over there. In this way, writing your feelings can gradually ease feelings of emotional trauma.

SECTION 9. COMMUNICATION ISSUES

“The single biggest problem in communication is the illusion that it has taken place.”

– *George Bernard Shaw*

Understanding Your Communication

Objective: To identify communication strategies related to improving the art of listening and talking, and to identify how to change negative communications into positive ones.

You Should Know

Part of your complex condition is encountering communication problems. You feel that people don’t understand you, you might start avoiding them, or you feel they are too intrusive with their questions about your experiences.

Feel free to express yourself but be aware of the context, where you are having this conversation, with whom you are having it, and why. Be aware if your mind is under pressure because even the simplest exchange may turn into a nightmare.

What to Do

The tips, strategies, and activities in this section are designed to help you learn about your communication problems and practice new ways to improve them.

The Art of Talking

1. Be aware that your perceptions, judgments, and beliefs are communicated as perceptions, judgments, and beliefs—not as facts.
2. Have that same awareness of others; realize that their perceptions, thoughts, and judgments are not facts. Even if they communicate them as facts, bear in mind that they are not facts.
3. Your communication with someone else should address the relevant issue or part of the dialogue. Try to separate what is relevant from what is irrelevant.
4. Your conversation should be as specific as you can make it. Make your points in observable terms. Unclear concepts might bring misunderstanding. Be concrete; avoid generalizations and vagueness.
5. If you can explain your core values, it will make it easier for people to understand the context of your communication.
6. If you are discussing somebody’s behavior, you might say what you believe is good or bad, like or dislike, but don’t judge the core of somebody’s personality.
7. When you are communicating about a problem or a situation, always allow some possible alternatives. Ask for other’s opinion on the topic.

8. If you comment on some aspect of somebody's behavior, be sure that the person has control over it and can make a change. For example, a person can attempt to be more punctual. However, no one can change their eye color.
9. If you evoke an emotional reaction during your conversation, don't avoid it, deny it, give more information, or persuade. Handle the emotions. Don't hit and run. Stay with the person.
10. Communicate from a position of respect, acknowledging the right to be different and feel and think differently.

The Art of Listening

1. Learn to say no, respectfully. Don't let yourself be pushed into a conversation you don't want. You can say, "Yes, I would like to talk about this issue when it is calmer, when I have time, and I believe that you are really listening to me—not now."
2. Take your time to hear attentively. You don't have to respond immediately. Breathe and check if you are grounded. "I heard what you said I will think about it."
3. Don't take everything personally; be aware of any defenses you are using because what you heard upset you in some way. Then repeat what you heard by paraphrasing, "If I understand you correctly, you . . ."
4. If you are not clear about something, ask for an example. "Give me an example; could you clarify that so I can understand you better?"
5. Validate what you heard internally (what you think and feel about it) and externally with people you trust.
6. Ask for additional information if you need it to have the whole picture.
7. Control yourself, even if some impulses come out. You can always stop the conversation and leave. The space between thoughts, emotions, motives, and actions has boundaries that you can control.
8. Don't be afraid to say, "I don't like what I heard; I'm going to end this conversation; I need time to process."
9. If you are not clear about why this person is telling you something, simply ask, "Why are you telling me this? Do you expect me to do/feel/think like I agree?"

Damned if You Do, Damned if You Don't

You might also consider adding new communication skills to your repertoire if you often find yourself in what is called a "double-bind" situation. "Double bind" is a communication trap in which you might find yourself feeling "damned if you do and damned if you don't." It feels like there is no answer and that you are stuck, trapped.

You might become aware of the internal double bind in your trauma core (communication traps within your internal dialogue) and you might find those with other people. There are six messages that can internally or externally create the double-bind trap. They might be defined as follows:

1. *Survive the best you can: fight, flight, or faint, or whatever helps.* (This message is sent openly, verbally, and for all to hear.)
2. *You are doomed, whatever you do.* You are a survival failure and a damaged person. (This message is sent nonverbally; it is irrational and hidden.)
3. *Don't think about this and don't be aware of the paradox.* You don't have the time to think; thinking doesn't help anyway. Nobody will understand you anyway. (The message is sent nonverbally; it is irrational and hidden.)
4. *Follow my instructions; you should be strong and tough.* If that doesn't help, it is your responsibility, not mine. (The message is verbal, open, and can be public.)
5. *Don't believe there are any recipes; this is life, tough luck.* (The message is verbal, open, and can be private.)
6. *Don't leave the situation; run away as a coward; act now.* Solve the problem now, and if not, you will be punished. (The message is verbal, open, and can be public.)

Your head might be spinning as a result of these double-bind messages. If you are confused and perplexed, you are caught in a communication trap. The toxic people who are doing it are not aware, either.

You are receiving all of these messages at once and you find yourself in a situation where you have to make a move but because of the conflicting messages all echoing inside your head, you “know” it will be a wrong move, and you don't want to be wrong. This pattern can go on forever. Listen carefully! Become aware of the communication you are trapped in. Bear in mind that messages 2 and 3 are not open, overt, conscious, nor verbal. Remember, the person sending those messages might not be aware what she or he is doing.

A Zen story is a good illustration of the double bind and also of a unique solution.

A Zen master says to his pupils: "If you say this stick is real, I will beat you. If you say this stick is not real, I will beat you. If you say nothing, I will beat you." There seems to be no way out. One pupil, however, found a solution by changing the level of communication. He walked up to the teacher, grabbed the stick, and broke it.

By breaking the stick, the pupil changed the flow of communication; he took it to the next level. He took control over it. In more practical terms, he applied flexible thinking, ability to see beyond the obvious, and the willingness to refuse “either-or” limitations.

The very worst thing you can do in situations such as these is to succumb to the obvious. The trick is to give yourself a chance, follow your own true instinct, and see what happens. Whatever happens, you will deal with it. Think clearly and take time to respond.

When you find yourself in double-bind situations, ask yourself:

“What is it that I am not seeing?”

“How can I break this?”

“What does my instinct say?”

“What if I do neither, but something totally out of the box?”

“What is my body telling me?”

As a person recovering from PTSD, you have already done the most important thing: you survived. You are alive and living. The fact that you are dealing with your PTSD-related problems is the proof of your journey to recovery.

Imagine a stage where a traumatized body and soul are trying to survive; the person keeps living with other people and continues to express themselves in this way. Not easy, but possible.

Think about messages 2 through 6. How would you break them? Then, afterward, look at some examples of how to break those messages.

Message	Break
You will remain alive only if you die. You failed in fighting, you failed in running away, and you failed in fainting. You are a survival failure.	
Don't think about this and don't be aware of the paradox. You don't have the time to think; thinking doesn't help anyway. Nobody will understand you anyway.	
Follow my instructions; you should be strong and tough. If that doesn't help, it is your responsibility; shame on you.	
Don't believe there are any recipes. This is life; tough luck. You are a coward.	
Don't leave the situation until you find a solution. Solve the problem now, and if you don't, you will be punished.	

Here are some solutions. Remember, these are just examples.

Message	Break
You will remain alive only if you die. You failed in fighting, you failed in running away, and you failed in fainting. You are a survival failure.	But I am not dead. I don't want to be dead. I survived. I am very much alive and I will go on living.
Don't think about this and don't be aware of the paradox. You don't have the time to think, thinking doesn't help anyway. Nobody will understand you anyway.	It doesn't matter if no one understands me! I have all the time in the world to think. After all, this is about me, not someone else. Eventually, the solution will present itself.
Follow my instructions; you should be strong and tough. If that doesn't help, it is your responsibility; shame on you.	Your instructions are yours, not mine. They are true for you, not me. I have my own instructions. If I don't, I'll make them up along the way.
Don't believe there are any recipes. This is life; tough luck. You are a coward.	Yes, I am afraid. What does it mean to be a coward, anyway? Sure, there are no recipes. So, I'll make my own. I'll try A, then B, and so on. Eventually, I'll find a way.
Don't leave the situation until you find a solution. Solve the problem now, and if you don't, you will be punished.	What if it is not up to me to find the solution? So, go ahead and punish me! What if I am making this my problem, and it really isn't my problem?

How Do You Deal with Conflicts?

Objective: To identify your most prominent communication style by completing a questionnaire.

You Should Know

The short questionnaire below gives you an opportunity to identify your behaviors and attitudes as assertive, aggressive, passive, or passive-aggressive, and provides some information about conflict strategies. We all use each of these strategies from time to time, and in different situations. The goal of this activity is to identify the strategies you use most often. Improving your assertiveness skills will help you manage conflict more effectively.

What to Do

If you agree with a statement, circle its number. Ignore the coding in parenthesis for now. They'll be explained on the next page.

- I usually keep quiet when someone does something I don't like. (P)
- When I am angry, I tend to "blow up" at others. (AG)
- It's hard for me to give compliments to people. (P)
- If I am treated unfairly, I speak up in a controlled way. (A)
- If someone does something I don't like, I keep quiet and get back at them later. (PA)
- I try to be fair and consider other people's points of view. (A)
- When I am in a leadership role, I insist that people do things my way. (AG)
- I think it is better just to let things slide rather than upset others. (P)
- I often raise my voice to get other people to do what I want. (AG)
- If I don't want to do something, I agree and then just "forget" to do it. (PA)
- People who love each other shouldn't argue. (P)
- I believe I deserve to be treated with respect, and I should respect others. (A)
- Children should be punished as harshly as necessary to get them to obey. (AG)
- I often tell "white lies" to avoid a hassle or hurting someone's feelings. (PA)
- I usually feel comfortable when other people give me compliments. (A)
- I don't mind hurting someone if they have hurt me first, even if it is someone I care about. (AG)
- I tell people what they want to hear and then do what I want to. (PA)

Count the number of answers you circled in each category (A, P, AG, or PA):

Category	A	P	AG	PA
Number of Answers				

A = Assertive. You speak up for yourself firmly and directly, but you respect other people as well when you use assertive strategies.

P = Passive. You avoid conflict and try to be “nice at any price” when you use passive strategies.

AG = Aggressive. Your anger takes the lead and you may not act respectfully toward others when you use aggressive strategies.

PA = Passive-Aggressive. You avoid direct confrontation but are focused on punishing others when you use passive-aggressive strategies.

What style was most prominent for you?

What style was the least prominent?

What did you learn about your communication style during conflicts?

What action(s) can you take to begin communicating in a more assertive way?

SECTION 10. DEPERSONALIZATION

“Louise often feels like part of her is "acting." At the same time , "there is another part 'inside' that is not connecting with the me that is talking to you," she says. When the depersonalization is at its most intense, she feels like she just doesn't exist. These experiences leave her confused about who she really is, and quite often, she feels like an "actress" or simply, "a fake.”

— Daphne Simeon, *Feeling Unreal: Depersonalization Disorder and the Loss of the Self*

Understanding Depersonalization

Objective: To define the term depersonalization and to identify how it affects you and what to do to manage it.

You Should Know

Depersonalization is a subjective experience in which one perceives one’s self as unreal. It is the third most common psychological symptom, preceded by feelings of anxiety and feelings of depression. Depersonalization can happen to anyone who is or has been subjected to temporary anxiety or stress. Chronic depersonalization is more related to individuals who have experienced a severe trauma or have been exposed to prolonged stress/anxiety. However, it can also be a symptom in a number of other disorders. It is characterized by an alteration in the perception or experience of the self so that one feels detached from, and as if one is an outside observer of, one’s mental processes or body (e.g., feeling as if one is in a dream).

It seems likely that depersonalization and derealization are the two aspects of the same type of process, two simultaneous mechanisms which inhibit emotional processing and heighten one’s state of alertness (i.e., akin to vigilant attention). Emotional numbing or lack of emotional coloring of various perceptions, thoughts, and images would result from the emotional processing inhibition. Feelings of “mind emptiness,” increased perceptual acuity, and feelings of lack of agency would result from the heightened alertness. Though often considered together, for your better orientation, we will consider depersonalization and derealization separately.

If you have ever experienced intense stress or witnessed a traumatic event such as war, abuse, serious accident, disasters, or extreme violence, you might have experienced one or more of the following:

- A split between your mind and body: sensations, feelings, emotions, behaviors, etc., feel like they are not your own.
- Feeling stiff, like a robot or a machine; or feeling waxy and disoriented in space and time.
- A detachment within your personality, as if different parts of yourself don’t fit with each other.
- You might feel like a detached observer of yourself, like you are watching your life being lived without you taking any part.
- You might feel that you have changed so much that this new person is not you.

- You might find your name strange, not belonging to you when somebody calls you.
- You might feel that you are entirely defined by one role in your life, such as soldier, truck driver, housewife, and son.
- You don't understand your symptoms; they don't make a logical story.

What to Do

Depersonalization Questionnaire

Read through the 30 statements. As you go through, mark each statement with either Yes if it is true for you, or No if it is not true for you. Then, for each statement you marked Yes, insert the appropriate number in the Frequency and Duration columns.

	Statement	Yes	No	Frequency 0 = never 1 = rarely 2 = often 3 = very often 4 = all the time	Duration 1 = several seconds 2 = several minutes 3 = few hours 4 = a day 5 = several days 6 = more than a week
1	I feel hollow and empty inside.				
2	I feel like I have lost my sense of myself.				
3	I feel like I am observing myself from the outside, looking inside.				
4	I feel like an automaton.				
5	My head feels empty, without thoughts.				
6	I stopped laughing, crying, and feeling pain as I used to.				
7	My body feels very light.				
8	I don't feel anything in dangerous situations.				
9	I am paying a lot of attention to my bodily sensations and/or my thoughts.				
10	My body and mind seem disconnected.				
11	I don't enjoy anything, have no favorite meal, music, or sport.				
12	Parts of my body are not mine.				

	Statement	Yes	No	Frequency 0 = never 1 = rarely 2 = often 3 = very often 4 = all the time	Duration 1 = several seconds 2 = several minutes 3 = few hours 4 = a day 5 = several days 6 = more than a week
13	Suddenly, I feel strange and detached.				
14	I feel flat and lifeless.				
15	My belly is tight.				
16	Familiar voices feel unreal.				
17	I feel parts of my body getting larger or smaller.				
18	I hallucinate.				
19	I feel suicidal.				
20	I feel like hurting other people and being revengeful.				
21	When I look at my reflection in the mirror, I see another person.				
22	My perceptions of time and space have changed.				
23	I have sleeping problems and/or nightmares.				
24	I fear I might be going crazy.				
25	I don't feel any affection toward my family and friends.				
26	I feel like I am outside my body.				
27	I have to touch myself to feel real.				
28	I feel I have a physical illness that is not treated.				
29	I don't understand myself.				
30	I am so alert, like I have overdosed on coffee.				

Interpreting Your Answers

If you answered YES to statements 2, 3, 6, 10, 13, 16, 22, 25, 26, and 28, give yourself 10 points for each answer.

If you answered YES to statements 1, 4, 5, 7, 9, 11, 14, 15, 29, and 30, give yourself 20 points for each answer.

If you answered YES to statements 8, 12, 17, 18, 19, 20, 21, 23, 24, and 27, give yourself 30 points for each answer.

Add your score.

Now, for each frequency and duration marking, add as many points to the score as the number you put down in frequency and duration columns.

For example, if you answered YES to statement 25, that is 10 points, you marked frequency as 3, and duration as 2. In total that is $10+3+2=15$ points for statement 25. Do this for all 30 statements.

If your score is equal to or less than 200, then your trauma may be classified as MILD.

If your score is between 200 and 300, then your trauma may be classified as MEDIUM.

If your score is higher than 300, then your trauma may be classified as SEVERE.

Please note that this questionnaire is neither the only one nor the best. Please consult other questionnaires.

Treatment for Depersonalization

Treatment depends on the underlying cause(s), and whether your depersonalization symptoms are predominantly organic or psychological in origin. If depersonalization is a symptom of neurological disease, then diagnosis and treatment of the specific disease is the first approach. Contact your physician. Also, if your score indicates your trauma as severe, please contact your physician or seek help from a mental health professional as soon as possible. If your depersonalization is mild to medium, you could try some of the following strategies and activities:

Stay Grounded No Matter What!: During depersonalization, you might experience a wide range of thoughts and feelings. Some paradoxical, some familiar—connected to the events of your daily life; some will be less familiar, upsetting and strange to you. Mastering them, containing, controlling, and communicating in an appropriate way might take time and learning, but once mastery is acquired, you will feel empowered and no longer lost in the moment.

Strategies: Some people react impulsively to a situation without thinking about it, believing that impulsiveness is good for them. But it is not. It is much better and useful to:

1. **Learn to nurture yourself.** Learn about your physical and psychological needs. If it gets difficult, imagine you are taking care of somebody else, somebody important. Eat, sleep, exercise, and fulfil all of your authentic needs and wishes. Spiritual practice (this may be religious, but not necessarily) helps to sustain you on a daily basis.
2. **Keep your boundaries.** You know by now how important boundaries are for your personal integrity. You probably already know that you have the right to say “No” when somebody or something is crossing those boundaries. There are things you don’t want to do, experience, or communicate at that moment and at that place and time. Respectfully and kindly say a firm “No.” Other people might invade your space with the best of intentions. But you don’t have to take that in. It is you who dictates how big the space around you should be and what goes in and out of that space. You might say, “Thank you for your offer, but I don’t need it”; “Nice that you want to share your thoughts, but this is not a good moment for me, so, please don’t”; or, “It isn’t good for me to listen to your feelings right now. Let’s share some other time.” Once you’ve done that, you can actually deal with different people and different situations more effectively, feeling that you have more power and control over that issue.
3. **Be aware of your thoughts and emotions.** Learn how your sensory self is responding to different situations. Give those experiences a name, even if it is not a scientific or a common name. Remember your past experiences with each emotion. Know what triggers them. Understand other people who react that way. Does it apply to you? Are you satisfied with those reactions and experiences? Are you frustrated that you can’t adequately express yourself? What else do you need to learn?
4. **Create a strong support system.** These are the people who know you, encourage, and nurture you. They like you for who you are, and are willing to help you become your best self—people you can turn to just to listen and be there for you. They are the opposite of toxic people, who put you down, discourage you, manipulate you, and emphasize that you should be impulsive, revengeful, and hopeless.
5. **Create a psychological “toolbox.”** Create a place where you can keep your “coping skills.” It can be a box with pictures, drawings, poems, inspirational messages, or special memories. A storage place for your life management tools, strategies you have developed and used effectively to cope with challenges in your life. Be patient, and over time your personal “toolbox” will contain a lot. In challenging times, however, people may feel that they need to seek help to gain a broader perspective, and perhaps add more strategies in order to better deal with a certain situation. Anything that helps you grow and become more grounded is always a welcome addition to your toolbox.

Selfie Diary

Here is another activity you can do to help with depersonalization. Make a selfie of yourself every day for at least ten consecutive days.

Selfie day	Date/Time	Where were you?	What were the circumstances? (Describe the situation in which you took the selfie.)	When I took the selfie I thought and felt...
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

If at all possible, print out your selfies and paste them on the following pages in the order in which they were taken.

My selfies page

Paste selfie day 1 here.

Paste selfie day 2 here.

Paste selfie day 3 here.

Paste selfie day 4 here.

Paste selfie day 5 here.

Paste selfie day 6 here.

Paste selfie day 7 here.

Paste selfie day 8 here.

Paste selfie day 9 here.

Paste selfie day 10 here.

Now, look at your selfies. Choose the one you like the most and describe it.

I took this selfie on _____ while I was _____.

It was a _____ morning/day/evening/night, and I remember feeling _____ . Looking at this selfie, I see myself as _____ and I feel _____ .

I choose this selfie as my favorite because _____ .

Now, choose the one you like the least and describe it.

I took this selfie on _____ while I was _____.

It was a _____ morning/day/evening/night, and I remember feeling _____ . Looking at this selfie, I see myself as _____ and I feel _____ .

I choose this selfie as my least favorite because _____ .

Advice: Keep taking selfies, one a day. Copy the table on page XX and fill in the information about each selfie. Also, copy the paste sheet, print the selfies out, and paste them. On every tenth day, write two short descriptive paragraphs, one for your favorite selfie and one for your least favorite. Follow the model provided above.

Vigorous Physical Activity

Another approach to dealing with depersonalization is engaging in any sort of vigorous physical activity for which you are medically fit. Do this every other day for at least ten days or until you have done five such activities. It is important to keep regularity in the rhythm of your activities. It does not have to be the same activity each time, though it can. After completing each activity, describe the sensations in your muscles and your body. Describe how your mind and body feel after completing the activity.

Activity day	Type of activity/ How long	After completing the activity, my body and my muscles feel . . .	After completing the activity, I think and I feel . . .
1			
2			
3			

Activity day	Type of activity/ How long	After completing the activity, my body and my muscles feel . . .	After completing the activity, I think and I feel . . .
4			
5			
6			
7			

Now, answer the following questions:

Which type of activity made you feel most yourself?

Which type of activity made you feel like a stranger?

Is there any particular sensation that you felt during this activity?

Did you do the activity on your own or you were with someone?

If you had company, how did the presence of the other person(s) make you feel?

Which of the activities you did would you consider doing on a regular basis? Why?

If you did the same activity every time, why?

What other activities would you consider doing?

Bathroom Exercise

In order to work with symptoms of depersonalization, experts suggest that you take a shower/bath every day for at least ten consecutive days. While doing so, pay attention to your thoughts and feelings before and after taking the shower. Every time you towel yourself dry, report to yourself (out loud) which part of your body you are towel-drying, for example, "I am towel-drying my left leg." Pay attention to sensations of your body as you are doing this. Describe the sensations, what you are thinking and feeling. Write this down in the shower/bath diary.

	Before taking the shower/bath			After taking the shower/bath		
	Bodily	Thoughts	Feelings	Bodily	Thoughts	Feelings
Day 1						
Day 2						
Day 3						
Day 4						
Day 5						
Day 6						
Day 7						
Day 8						
Day 9						
Day 10						

SECTION 11. DEREALIZATION

“The belief that one's own view of reality is the only reality is the most dangerous of all delusions.”

— *Paul Watzlawick*

Understanding Derealization

Objective: To define the term derealization and to identify how it affects you and what to do to manage it.

You Should Know

Some researchers treat depersonalization and derealization as two aspects of the same phenomenon. For reasons of clarity, we separated them, but you can use what you learn from one to understand and handle the other process. After you have worked hard on the depersonalization worksheets, this will be more familiar and easier to cope with.

Derealization is a subjective change in your perception or experience of the external world. First you noticed that your inner world is weird; now you are noticing that the outside world is also strange and unfamiliar.

In short, the outside world seems unreal, lacking in spontaneity, vividness, emotional coloring, and depth. It could be a dissociative symptom of many conditions. You feel that the world has become vague, unfamiliar, dreamlike, less real, or lacking in significance. You might feel like there is something that separates you from the world, such as a fog, glass pane, or veil.

This change in perception is accompanied by a reduced emotional response. Familiar places may look alien, bizarre, and surreal. You feel unable to recognize them and take part in them. With a form of memory change called the “blocking effect,” you might not even be sure whether what you perceive is reality or not.

Here are some typical symptoms and signs of derealization:

1. Perceptual changes can affect all your senses, like hearing, taste, touch, and smell. Familiar places may look alien, bizarre, and surreal. You may not even be sure whether what you perceive is in fact reality or a dream.
2. Memory problems. When you block this identifying memory foundation, this “blocking effect” creates a discrepancy of correlation between your perception and recall.
3. Hypo-emotionality (suppression of emotion) and a disruption of the process by which perception becomes emotionally colored occurs. This qualitative change in the experiencing of perception may lead to your feeling that anything you view is unreal or detached from you.

4. Try to determine whether you are in a context of constant worrying, increasing anxiety, and intrusive thoughts. This worsens derealization.
 - You will find out that two simultaneous mechanisms are at work: 1) an inhibition of emotional processing called emotional numbing. You might appear cruel and ruthless because of the repressed empathy. However, try to remember what used to touch you in the past. Emotional numbing and lack of emotional coloring of various perceptions and thoughts would result from the inhibition; and, 2) a heightened state of alertness. Feelings of “mind emptiness,” increased perceptual acuity, and feelings of lack of agency would result from a state of heightened awareness.
5. You might experience difficulties in learning processes and start thinking that you are slow or stupid. If you are seeing events as if you are separated from them, you cannot properly process information and learn as you did before the trauma.
6. “Indirect living” is when you experience a feeling that you are viewing the world through a TV screen.
7. Sensations of alienation and distance between you and others can lead to avoidant behavior.
8. Feeling of being an “observer” on the planet, an unwanted guest or an “alien.”
9. You might experience *dissociative fugue*, which involves unplanned impulsive travel or wandering, sometimes accompanied by the establishment of a new identity. It is followed by reversible amnesia. The state can last for days, months, or longer. After recovery from a fugue state, previous memories usually return intact, and further treatment is unnecessary.

It is often difficult to accept that these disturbing symptoms are simply a result of anxiety and intrusive thoughts. This can, in turn, cause more anxiety and worsen the derealization symptoms or cause panic, which can be mild, medium, or severe, and is similar to the depersonalization process.

What to Do

Describe Your Derealization Experiences

Think about your derealization experience(s). Describe them below.

Check the Facts with Different Senses

Choose a fact! For example, weather conditions, atmosphere in a restaurant, street, office, at home, at your safe place, and note below what your senses perceive and experience.

Fact	My eyes see	My ears hear	My skin feels	My nose	My tongue
Crowded bar					
Busy street					
Park on a nice day					
Rainy day					
Driving in a car					

If these situations are not relevant to you, think of your own situations.

Have a fact checker among your friends. Whom do you check facts with? Name at least three friends.

Friend I check facts with	Why this friend?	How did you prepare this friend to help you check the facts?	What is your routine for checking facts with this friend?
1			
2			
3			

Use several sources to check your facts. Name as many different ways you can use to check the facts of your immediate reality:

In a restaurant:

On the street:

At the workplace:

At home:

In the gym:

In traffic:

Fact	My eyes see	My ears hear	My skin feels	My nose	My tongue

Use your phone/camera and make a short film (five minutes) of your immediate surroundings/ environment. The filming should be done in one shot, without pauses. For example, go into a restaurant and make the film, or film as you are slowly walking down the street. Watch your film at a later time. Use the space below to retell the events in the film down to the smallest possible detail.

[illegible]

Now, show the film to a fact-checker friend and ask him/her to watch the film and retell it also to the smallest possible detail. Compare your retellings of the film.

How many of the same details did you and your friend notice?

In how many details do you differ?

What details did you miss and your friend didn't?

What details did you notice and your friend didn't?

Did you write down something that wasn't in the film? And your friend? What?

REMEMBER: Depersonalization and derealization are closely related. We separated them, but you can use what you learned from one to understand and handle the other process. Most often, one does not exist without the other. They come together and/or in a mix of symptoms. After you have worked hard on the depersonalization and derealization worksheets, reality will start being more familiar and easier to cope with. Do the activities. Be persistent. Make the effort.

TRUST: THE TURNING POINT

“Love all, trust a few, do wrong to none.”

—William Shakespeare

Understanding Trust

Objective: To identify how the issue of trusting others or yourself has affected you, how to rebuild inner trust, and how to apply the “U-Turn” strategy in your daily life.

You Should Know

After what you went through, it is normal not to trust anymore, but once you learn to build good-enough trust, you will find yourself at a turning point—from PTSD to PTG: post-traumatic growth. First, you learn to regain trust in yourself and then some of the people around you. You are neither naïve nor paranoid. You are ready for a U-turn in your life.

Underneath trust is a belief that a person will do as expected; you see them as good-tempered, reliable, and responsible. Ideally, trust grows in your family of origin, as a child. When you develop basic trust, you can grow as a healthy, self-reliant person with good self-esteem. You will have self-trust and you will trust others.

Psychologist Erik Erikson thought that trust forms the basis of good child growth; it comes from a healthy connection with the mother or primary caregiver during the first year of life. From that experience, you learn how to trust others. The development of trust can be attributed to relationships between people. It can be demonstrated that humans have a natural disposition to trust and to judge trustworthiness. Naturally, over the course of our lives, people hurt us, stab us in the back, take advantage of us, and do other harmful things, all of which can lead us to stop trusting them and develop disbelief, distrust, doubt, cynicism, and skepticism. These are normal reactions but difficult to live with as you try to maintain healthy, productive relationships. In order to rebuild trust, first you need to bring into awareness how you stopped trusting.

What to Do

Thinking about Trust

Be aware of what happened to you in your past. Think about situations with people that influenced your mistrust.

Put a check next to the items below that apply to you:

Actions after which I stopped trusting:

☐ Hurt and attacked me (physical and/or emotionally)

☐ Stabbed me in the back when I least expected it

- ☐ Abandoned me in a dangerous situation
- ☐ Took advantage of me
- ☐ Cheated on me
- ☐ Was disloyal by showing an absence of allegiance, devotion, obligation, or faith
- ☐ Stole important things from me
- ☐ Was deceitful by deliberately misleading me
- ☐ Took credit for my achievements
- ☐ Lied to me
- ☐ Was unfaithful to me in different situations
- ☐ Was dishonest by breaking the rules to gain an unfair advantage in a competitive situation
- ☐ Failed to help me when I needed it
- ☐ Made mistakes
- ☐ Continually disappointed me
- ☐ Made promises they didn't keep
- ☐ Showed a lack of concern for my feelings and needs
- ☐ Forgot things that are important to me (like an anniversary or birthday)
- ☐ Kept secrets from me

Add any situations below that happened to you that are not in the list above. Choose three and describe them.

What did you think while it was happening?

What did you feel when it was happening?

What did you do when it was happening?

What would you do now?

As trust is not a black-and-white phenomenon, learn to think how to check your trust. Fill in the phrase below as many times as necessary, naming the people in your life with whom you have concerns about trust and would like to work on it.

On a scale from 1 to 10, how much do I feel I can trust _____. Why?

Rebuilding Your Inner Trust

Learn how to trust yourself: Even if you are completely doubtful about other people, cynical and skeptical about life, the way to regain good-enough trust is to start with yourself.

Learn how to trust others: What happened in your past provides an opportunity for all the people involved in the event to look within in order to understand why it resulted in broken trust. The underlying causes for the event need to be identified, examined, and worked on. When you are looking at yourself, come clean; if you engage with another person about what happened, expect an emotional reaction. Apologize if you share some of the responsibility. Forgive yourself if you made a mistake. Vent if you need to and be patient.

Assess the situation; listen carefully to the person explaining why he or she did something. Trust your gut feelings. Before you rebuild trust in someone, you should first ask yourself if the relationship is one you want to save. If the answer is no, forget that person. Let them go, just accept that that is the way they are. With trusting others, the only certainty is that there is no certainty. Move on to find someone trustworthy.

Choose a situation when somebody important to you hurt you. Describe it.

Express how you felt.

Let the person know how deeply you were hurt with their action. Let the person know what you need, so that you start trusting them again. Write about your experience below.

How will you let go of your anger? Make a plan of how will you achieve that.

Is this the first time that this happened or did something similar happen in the past? Describe.

Am I able to forgive? Write down why or why not.

Will I honestly be able to trust this person again? Write your thoughts and feelings about this question.

How can I know if this is a one-time mistake or a pattern of behavior? Write down your ideas.

Does the other person seem genuinely sorry for hurting me or just sorry he or she got caught?

What are some ways that I can test them?

After testing them, do I notice signs of trustworthiness?

How can I spot human deception?

Can I find ways to give and receive positive feelings despite what happened? How?

Do I know how to forgive myself? Some people think if they were more clever or wiser, this would not have happened to them. Is this true for me?

Can I ever forgive the other person? If not, how can I close the story in my head? What trustworthy person can I share that story with?

Go to your safe place and rethink the whole situation. Would you do something differently?

Did You U-Turn?

What was it like to fill out the above questionnaire? What did you learn? Did you make a U-turn about your trust issues?

Is there someone (or more than one person) in your life who is motivated to help you grow out of the trauma? Why? Describe below.

Who is toxic for you? Even if they wish the best for you, are they sabotaging you in some way?

What is your position regarding the problem (are you victim, persecutor, rescuer)?

Where are you stuck in your growth? Thinking, feeling, communication, action? Describe below.

How will you know that you have shifted or changed your feelings and behaviors regarding trust? Describe it in observable details.

What have you done so far to get unstuck?

What is the main theme of your attempted solution, for example, "I am trying to be understood."

What solutions are you avoiding?

What could be a different perspective that could shift you into a more positive relationship?

Which direction would be a significant departure from an attempted solution?

What can others do to support you as you move in a new direction—toward trust, away from trauma?

SECTION 13. R+, RESILIENT PEOPLE

“The brain-disease model overlooks four fundamental truths: (1) our capacity to destroy one another is matched by our capacity to heal one another. Restoring relationships and community is central to restoring well-being; (2) language gives us the power to change ourselves and others by communicating our experiences, helping us to define what we know, and finding a common sense of meaning; (3) we have the ability to regulate our own physiology, including some of the so-called involuntary functions of the body and brain, through such basic activities as breathing, moving, and touching; and (4) we can change social conditions to create environments in which children and adults can feel safe and where they can thrive. When we ignore these quintessential dimensions of humanity, we deprive people of ways to heal from trauma and restore their autonomy. Being a patient, rather than a participant in one’s healing process, separates suffering people from their community and alienates them from an inner sense of self.”

—Bessel van der Kolk, MD

Understanding Resilience

Objective: To identify common ways of expressing and experiencing resilience in your recovery from PTSD, and to rate how those strategies are working for you.

You Should Know

Most people have a breaking point, and most people have an innate healing system. This healing system is called *resilience*. It is the immune system of our psyche. Ordinary people in extraordinary situations (according to Glenn R. Schiraldi, PhD, from the University of Maryland, and Emmy Werner, PhD, and Ruth Smith, PhD, from the University of California) have achieved degrees of autonomy, optimism, meaning, and purpose. They have found intrinsic faith, humor, and altruism (learned helpfulness), together with self-esteem. They have developed good health habits, found their balance, integrity, and moral strength. They have learned to be emotionally aware, curious, and socially competent. Above all, they have become flexible to changes and learned how to keep their calm and remain rational under pressure.

Two groups of factors affect a person’s resilience:

- individual: physiological and psychological traits, and potentials
- external: environmental factors (supportive systems, people and procedures)

And, there is luck! Researchers don’t like to mention it as there is no scientific method of studying it, but as everyone knows luck does matter. And for luck, one has to have faith first. Having faith is one of the characteristics of resilience. However, just having faith and waiting for something good to happen is not enough.

Psychologists Norman Garmezy and Emmy Werner researched resilience in children. They found that resilient children tended to “meet the world on their own terms,” have a “positive social

orientation,” and have an “internal locus of control.” Most important, they found that resilience can be learned. In addition, neuroscientist Kevin Ochsner has shown that teaching people to think of stimuli in different ways—to reframe them—is possible and necessary.

Psychologist George Bonanno, PhD, offered a theory of resilience stating that we possess the same fundamental defense system, which has evolved over millions of years. So, why do some people use the system more frequently and effectively than others? The central element of resilience, Bonanno has found, is perception. His question is: “Do you conceptualize an event as traumatic, or as an opportunity to learn and grow?” Does it have a perceived meaning to you? Does it lead to a greater awareness or to closer ties with the community?

Ronald C. Kessler, PhD, and colleagues assume that most people have resilience potential within them. It is important to start with this belief: “I have it in me, and I have to learn how to grow it.” You might start from a feeling of complete helplessness, then learn how to survive, then move to optimal coping and resilience, going toward growth and self-actualization.

Remember, resilience is innate. With conscious practice, you can only become better at it. Also, resilience is about perception! Do you see traumatic events as a conspiracy against you, or as events that, though traumatic, empower you to move on to the next level of your inner core?

Yes, it does sound “easier said than done,” but it is doable. Whatever the event, it is not a conspiracy against you, it is an event. Here is a challenge: When good things happen to you, do you think about them as a result of some dark conspiracy? Or, do you take the gifts of life and move on? Bad, tragic, traumatic events happen, just as good, lucky ones. Each, on their own terms, is an opportunity to grow as a person.

What to Do

Resilience Potential

The benefits of being resilient are many and vital. Trauma makes us more vulnerable, and resilience is its counterpart. You might find it difficult to achieve, but it is certainly worthwhile. No matter how strange this sounds, resilience reaches down through the deepest levels and goes up to our highest part of being. You can learn to do it. It is a process. Start by working on resilience projects one at a time.

In the table below are some common ways of expressing resilience in difficult situations. Review, then fill in the column on the right.

Ways of expressing resilience	Mark each statement on the left with any of the following (more than one is OK): I do this. / I don't do this. / I could try this. / I don't know how to do this. / I do this but I'm not very successful. / I do this very well.
Using one's ability to bounce back.	
Knowing how to help the healing process.	
Using one's ability to recover faster and more completely.	
Functioning at a higher level than before trauma.	
Going through trauma and maintaining balance.	
Retaining your integrity.	
Absorbing trauma and learning new skills from it.	
Optimizing inner and outer functioning.	
Dealing with high-risk situations without losing control.	
Changing and becoming more flexible.	
Rethinking your basic values and life philosophy.	
Experiencing a situation where you will be pushed to grow and progress.	

Nurturing your resilience skills and widening their scope will help you become calmer, more productive, and enjoy life more. Which resilience techniques are you good at? Write them down.

Are there any that weren't mentioned in the chart? What are they?

Great! You are good at applying the above skills. How about the ones you rated yourself as not good at? Think about them. Make a priority list of resilience attributes you think you need to start working on. For each one, write a short explanation how you would do this.

Resilience Checkup

Please rate from 0 to 7 how much you believe each of the following statements is true, where 0 = you don't believe it at all and 7 = you believe it is completely true.

Statements	Rating
1. I have learned to accept that something is beyond my control.	
2. I am healing.	
3. I have learned how to manage my emotions.	
4. I feel at peace with myself and my past.	
5. I am good at protecting myself from toxic people.	
6. I mostly feel capable of solving my problems.	
7. I am usually flexible; I have choices.	
8. I'm involved in activities that I enjoy.	
9. I think well of myself and like who I am.	
10. I stay focused and think rationally under pressure.	
11. I have learned when to seek help and where to find it.	
12. Trauma doesn't influence the way I see myself.	
13. When I get traumatized, I usually bounce back.	
14. I am not perfect; I make mistakes.	
15. I function well in my job, at school, in relationships, and at play.	
16. I have learned to reach out and connect with people.	
17. I have goals and I am mostly optimistic about my future.	
18. I have learned how to support my healing process.	
19. I believe that if I do my best, things might turn out well.	
20. I don't engage in self-destructive behavior.	
21. I've grown resilient from what I've experienced.	
22. I have become a resilient person.	

Total score (add the scores from statements 1-22) _____

Low-rated qualities:

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and extend across the width of the page. There are no margins, text, or other markings on the paper.[illegible]

Now, choose five people close to you (friends, family, colleagues, etc.) and whom you know well. Think about their resilience techniques and how well they have overcome their difficult situations. Place yourself in the position of an objective, observing stranger. Then, think whether you can adapt their strategies to your specific situation. How would you do this? Be specific.

Person 1:

Person 2:

Person 3:

Person 4:

Person 5:

What skills do you think you need to develop/master in order to improve your own resilience?
Write them down.

Write down a step-by-step plan for improving your resilience.

Four Strategies

Psychologist Martin Seligman found that applying the following strategies benefits one's resilience as it relates to trauma recovery.

- Changing your interpretation style from internal to external: look at the facts, listen to other people explaining the event, create a big picture of what happened to you.
- Changing from global to specific: this is not the end of the world but a specific event that can be described in words and expressed in numbers.
- Changing from permanent to temporary: rather than assuming that everything is fixed and final, think about the possibilities of change.
- Check your locus of control. Internal locus of control refers to the degree to which you believe that you have control over your life—as opposed to external locus of control, where you believe the external forces are beyond your control, that they control your life. People with a strong external locus tend to praise or blame external factors. People with a strong internal locus tend to praise or blame themselves for everything that happened. Find a middle ground because this is the point at which your resilience resides.

Think about a difficult time in your life—one that you went through and then moved on from. Using Martin Seligman’s advice above, describe the event.

Read your description of the event and compare that with how you actually dealt with it. Are there differences? What are they? Which sounds more reasonable to you?

The Road to R+

Ironically, learning to become resilient can go both ways—from positive to negative, or what is called (R+) to (R-). It all depends on your perceptions. So, if perception is key to resilience, think about the following.

Do you tend toward an (R-) orientation? (R-) can include the following.

- Do you succumb, surrender, renounce, yield, give way, give in, give up, abandon, quit, prevent?
- Do you focus on your vulnerabilities?
- Do you always see adversity?

Or are you more of an (R+) person? Here are some examples.

- Do you surmount, prevail, overcome, get through, accept, embrace, enable, empower, make possible, and facilitate (R+) reasoning?
- Do you think about your strengths?
- Do you see challenges?

Remember it is not a black-or-white phenomenon. Between (R+) and (R-), there is a lot of space for different experiences. Describe how it is for you.

Now, think of one situation in your life when you started from an (R-) position and then *somehow* found your way to (R+). Describe how the *somehow* was everything but—actions, thoughts, feelings, and events led you from one to the other. Be specific.

Recognize and Appreciate Your Resilience

Objective: To identify situations and experiences in which you have been resilient and to gain confidence by learning to recognize and appreciate your capacity for resilience.

You Should Know

Solution-based therapy is an approach that appreciates personal resilience. This approach recognizes that everyone has some knowledge of what would make their life better, as well as the ability to create solutions. Sometimes people who are in the midst of working through challenges just need to be reminded of how strong they are.

This approach focuses on your strengths instead of your weaknesses by reminding you to think of and appreciate how you cope with your difficulties, by asking questions like, “How have I managed to carry on?” or “How have I managed to prevent things from becoming worse?”

Resilience is the capacity to recover quickly from difficulties. It is a particular inner strength that characterizes many people who persevere under the most difficult circumstances.

What to Do

This activity will help you recognize and appreciate your resilience.

1. Using the chart that follows, write down things you have been able to accomplish or ordeals or problems you have overcome.
2. Reflect on what personal strengths were required for you to achieve each. This achievement might take determination and resolve. For ideas, you can use the list of strengths that follows.
3. Include how you felt—every small piece of satisfaction or happiness at your achievement.
4. If you like, share your chart with someone who is supporting you along your journey. You could ask them to think of an accomplishment you have not included, perhaps because you forgot about it or didn’t even think of it as an accomplishment.
5. Make a copy of the chart, and keep it with you to look at whenever you are feeling despondent or need to remember what your goals are and how committed you are.
6. Add to the chart every chance you can.

Ambitious	Caring	Confident
Analytical	Charming	Considerate
Appreciative	Clever	Courageous
Artistic	Communicative	Creative
Authentic	Compassionate	Dedicated

Determined	Industrious	Prudent
Disciplined	Ingenious	Respectful
Educated	Integrity	Responsible
Empathetic	Intelligent	Self-assured
Energetic	Kind	Self-controlled
Enthusiastic	Knowledgeable	Serious
Fair	Leadership	Socially intelligent
Flexible	Lively	Spiritual
Focused	Modest	Spontaneous
Forceful	Motivated	Straightforward
Generous	Observant	Strategic
Grateful	Patient	Tactful
Helpful	Persevering	Team oriented
Honest	Persistent	Thoughtful
Hopeful	Persuasive	Thrifty
Humble	Practical	Versatile
Humorous	Precise	Warm
Idealistic	Problem solving	

Your Resilience Record

Accomplishments	Strengths	How you felt

How did it feel to focus on what you are successful at rather than what is wrong in your life?

In what ways were you surprised to learn how resilient you actually are in the face of adversity?

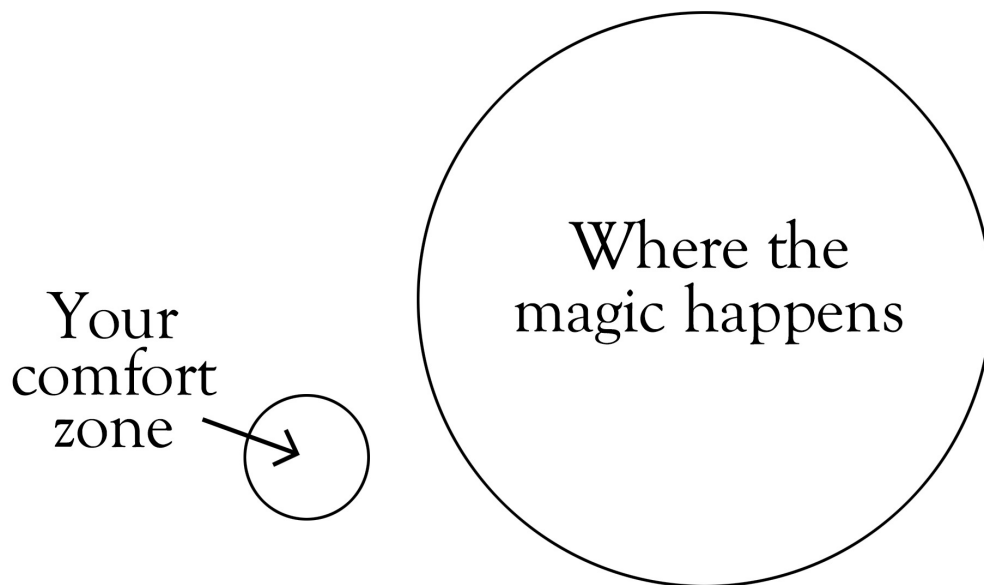
Stretching Out of Your Comfort Zone

Objective: To identify the components of your personal comfort zone and practice taking steps toward moving beyond it safely.

You Should Know

If you are recovering from PTSD, changing habits can be hard. Many of us find safety in our habits. And many of us do not go marching forward in our lives from one stage to the next in one straight line. Instead, it is often three steps forward, one step back, or even cycling round and round, as you face natural resistance to—and, often, fear of—change.

You have a comfort zone—the things and objects, people, activities, and habits that keep you feeling safe. But here’s the catch. Changing habits in a big way inevitably involves some discomfort.



In this image, the MAGIC circle is a lot bigger than the COMFORT ZONE circle. That’s encouraging! But see that empty space between the circles? That space represents the UNKNOWN, which can be both exciting and scary. To get from one circle to the other, you will have to navigate some unknown territory. Have you ever heard the saying “Leap, and the net will appear”? It is the same idea. With good planning and good support, you can succeed. But there are no guarantees.

What to Do

In this activity, you will identify the components of your personal comfort zone. Next, you will imagine “where the magic happens” for you. Then, you will identify some concrete steps to take to guide you along your journey.

What are the components of your comfort zone? What helps you feel safe but might be interfering with your moving forward? Be as detailed as you can.

Things/Objects

People

Activities

Habits

What are your thoughts and feelings about the unknown (that blank space between the circles)?
What has helped in the past when you succeeded in moving out of your comfort zone and into the unknown in your life?

What items in your list represent “where the magic happens” for you?

What steps are you willing to take to get closer to “where the magic happens” for you? Be detailed.
Be optimistic while still being realistic.

Today

Tomorrow

In the next week

In the next month

In the next year

SECTION 14. POST-TRAUMATIC GROWTH (PTG)

“Not everybody ends up with learned helplessness but some come out of it with learned optimism.”

–Martin Seligman, PhD

Understanding PTG

Objective: To define the term “Post-Traumatic Growth” (PTG) and to complete an inventory identifying aspects of your own PTG.

You Should Know

At the turning point in your healing process, you have choices. V.E. O’Leary, PhD, and J. R. Ickovics, PhD, wrote about four: succumbing to adversity, surviving with diminished quality of life, resilience, and thriving.

The concept of thriving in positive psychology definitely aims to promote growth beyond survival, Post-Traumatic Growth (PTG). Yes, as strange as it sounds, you can continue your growing process. Some researchers call this *adversarial growth*.

The idea is not new. Positive changes following trauma have long been recognized in religion, philosophy, and culture. Through this process of struggling with trauma, changes may arise that move the individual to a higher level of functioning.

Psychologists write about positive change items: enhanced self-efficacy, increased community closeness, increased spirituality, increased compassion, increased faith in people, lifestyle changes, enhanced family closeness, and, even, material gain.

It is important to repeat that it is the characteristics of the subjective experience of the event, rather than the event itself, that influence post traumatic growth.

As it is not a black-or-white phenomenon, your work on the trauma and your personal growth often coexist. Post-Traumatic Growth is a process of undergoing significant personality shifts in thinking, feeling, behaving, and relating to the world. It is not about returning to the “same old you” that you had prior to the traumatic suffering. You will experience many changes after the trauma, and, surprisingly, many of them might be highly positive. You might find out a better way of understanding the world and your place in it. This idea could be surprising, but it is not a new phenomenon. In fact, human history, philosophy, and culture are full of examples in which the transformative power of human suffering has led to something better, something stronger, something good.

Growth does not occur as a direct result of trauma; rather, it is the individual's struggle with the new reality in the aftermath of trauma that is crucial in determining the extent to which post-traumatic growth occurs. Trauma becomes the catalyst for change.

Key Areas of PTG

1. Greater ***appreciation for life***. Trauma confronts you with your mortality and, as such, can lead you to appreciate and even treasure moments of peace or connection you may have been taking for granted. Researchers found that the most important change is a renewed sense of priorities in your life, and the way you look at and understand the world you live in. You have more optimism and improved capacity to focus attention and resources on the most important matters. You disengage from uncontrollable or unsolvable problems. You are aware of your values and you prioritize them. You have more appreciation for your life and the lives of others.
2. ***Discovering spiritual beliefs*** might be a result of trauma exposure. You might find faith or get a better understanding of spiritual matters. Social support, belonging to a group, being close, sharing and communicating can help you consider other people's values. Spiritual coping can be particularly helpful in a religious community or organized group. The social support received from others who share similar beliefs is quite helpful in the face of trauma. Spiritual beliefs can also help you restructure your worldview in a way that makes sense to you.
3. ***Better relationships with others***. After a trauma, you might become warmer, more intimate, and closer to some people. Social support, belonging to a group, being close, sharing and communicating will open new horizons. You might feel more empathetic and willing to invest more energy into your relationships. You are not alone; traumas happen to a lot of people. Supportive people in your life can help you by shaping narratives and offering new perspectives about what happened to you. These narratives might help you confront questions of meaning and how to reconstruct the answers to those questions.
4. You will achieve a greater sense of ***personal strength***. Learning new skills will help you find new possibilities and raise your level of confidence. You will master adaptive coping skills, and this can change your perception of events. The ability to accept situations that cannot be changed will open you to new experiences. The ability to grieve and gradually accept trauma could also increase the possibility of growth. The ability to forgive and be grateful will free you for new relationships. The opportunity for emotional disclosure can lead to post-traumatic growth and a new sense of coherence of your identity.
5. ***Finding new options***. One of the benefits of trauma is a shift in perspective. Armed with new skills and options, you can find the determination to go on—looking at the world as not black and white, knowing that human suffering has meaning. Learning and adaptive problem-solving help you to face new possibilities. You will be amazed at the richness of possibilities and power of learning. You left some things behind and, now, new possibilities are pulling you forward.
6. ***You might become more creative. Now that you are less*** anxious and better able to be curious, even to daydream more, you might find it easier to try new, creative ways of doing things. You can become more playful and learn to appreciate different art forms. Creativity makes life more fun and less boring. You might write letters, keep a diary, draw, or sing. This shift is referred to as sublimation, where the energy created by the trauma is turned into something creative. Post-traumatic growth can provide virtually anyone with a creative inspiration that might not have existed previously.

Post-Traumatic Growth Inventory

For each of the statements, specify below the degree to which this change has occurred in your life. Mark the statements on the scale of 1 = minimal/not important to 7 = maximum/very important.

Statements	Rating
1. I have found new interests in my life.	
2. I am more optimistic than before.	
3. I have learned how to change what needed to be changed.	
4. My priorities in life have changed.	
5. I appreciate my own life.	
6. I can achieve closeness and intimacy with people.	
7. I have become more spiritual.	
8. I feel more compassion and more empathy toward others.	
9. I have learned to see opportunities in my life.	
10. I know that I am stronger than I was.	
11. I have new meaning and purpose in my life.	
12. I have become creative in things I do.	
13. I know I can count on some people for help.	
14. I have discovered my strengths and passions.	
15. I have found new values in my life.	
16. I am more aware of my worth.	
17. There are some really good people on this earth.	
18. I feel more playful.	
19. Other people have noticed that I am changing for the better.	
20. I know what is important in life and what is not.	

Statements	Rating
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21. I have more faith than before.	
22. I trust my curiosity to lead me.	
23. I am more lighthearted than before.	
24. I have become a spiritual person—caring about people, animals, and the planet.	
25. I use my imagination much more than before.	
26. I don't see the world as black and white; I see options.	
27. I put more energy into my relationships with people.	
28. I want more meaning and less "stuff" in my life.	
29. I see much more potential in my life.	
30. I have become a realistic dreamer.	

Total: _____

The questions above refer to the six key categories of PTG. Add your score for each key area:

PTG area	Questions	Points by topics
Appreciation of life	2; 4; 15; 20; 23	
Spirituality	7; 11; 21; 24; 28	
Other people	6; 8; 13; 17; 27	
Myself	5; 10; 14; 16; 19	
Possibilities	1; 3; 9; 26; 29	
Creativity	12; 18; 22; 25; 30	

In which area did you score the highest?	
In what other areas do you have high scores?	
In which areas did you score the lowest?	
In what other areas do you have low scores?	

Growing: Copy the statements you marked with less than 4 in the left column of the table below. In the right column, write what you could do to improve your score. We have done one as an example.

High-score statements	Changed my life
<i>I learned to see opportunities in my life. (6)</i>	<i>In face of hardships, I let myself be miserable a little, but then I would always say to myself “This must be good for something.” I then would try to think of all the opportunities (unrealistic and realistic, alike) that were under the surface. Eventually, what seemed unrealistic usually turned out to be very much doable.</i>

Growth is never constant! Rather, it is cyclical. It has its ups and downs. Keep yourself grounded, watered, and nurtured—and, yes, you will grow.

Learned Optimism

“The defining characteristic of pessimists is that they tend to believe that bad events will last a long time, will undermine everything they do, and are their own fault. The optimists, who are confronted with the same hard knocks of this world, think about misfortune in the opposite way. They tend to believe that defeat is just a temporary setback or a challenge, that its causes are just confined to this one case.”

—*Martin Seligman, PhD*

Objective: To define the term “Learned Optimism” and practice strategies for becoming more optimistic, including applying Seligman’s “ABCDE” Model.

You Should Know

Optimism is one of the core components of your new growth. Some people believe that after trauma, optimism is impossible. That is not true. Also, it is a false belief that optimism is inherited. It is not! Optimism is a way of looking at the world, a frame through which you see the big picture of yourself, your life, and the events in your life. It can be learned, so it is important that you check your belief system about optimism. And start learning.

Optimism is the belief, faith, and self-assurance that more good things will happen in a person’s life than bad things. It is a psychological attitude, a belief and hope that life events will be positive, fortunate, and encouraging. If their life turns out not to be positive, optimists are not disillusioned; rather they accept the existence of adversity and choose to identify both resources and skills that can help them cope.

Relationships between optimism and trauma have been examined in diverse groups of individuals who have encountered adversity. Research has demonstrated that individuals who perceive that they are able to cope, have a positive outlook on life, and expect good things to happen feel that they can influence their environments. Positive mood and good morale lead to perseverance, effective problem solving, and coping, all of which might lead to more optimism.

People who are generally optimistic often explain and interpret causes of events that happen to them and use these explanations as stepping-stones in making informed decisions. Optimistic people strive to achieve the best physical health and quality of life possible. Research participants who report higher optimism, despite their traumatic experiences, will report higher PTG scores than those who report lower optimism.

Learned optimism was defined by Martin Seligman as the optimism that grew from pessimism. The differences in explanatory styles are:

- Optimists have a different view of failure and success. This view can be summarized as “What happened was an unlucky situation, just a setback.” Pessimists tend to see everything, and especially bad events, as a conspiracy against them personally. While an optimist will always think of at least one positive reason why he/she should do something, no matter how silly, difficult, or unrealistic it is, a pessimist will always think of at least ten reasons against doing it.

- **Permanence:** Optimistic people believe bad events to be temporary rather than permanent. They bounce back more or less quickly from failure; pessimists may take longer periods to recover or may never recover. Optimists focus on specific temporary causes for negative events; pessimists point to permanent causes; they make more generalizations.
- **Pervasiveness:** Optimistic people know how to handle helplessness; pessimistic people believe that a problem in one area of life means their whole life will be bad. Optimistic people also allow good events to generalize to other areas of their lives.
- **Personalization:** Optimists don't blame anybody; they think critically and wonder what could be done for the better and how could things improve; whereas pessimists blame themselves for events that occur and resort to feelings of helplessness. Optimists are therefore generally more confident as they quickly internalize positive events while pessimists externalize them.
- A shift toward healthy optimism is a shift away from depression and PTSD.

What to Do

1. **Create a "movie" of your life.** Create an imaginary movie of your good life, including specific details: How you look, how you feel, how you behave, where you live, what you're doing. Set aside some time at your safe place every day to play this movie in your mind. This simple mental training exercise might boost your mood and influence the way you think and feel about yourself, your possibilities, and your future.
2. **Self-nurture with the Inner Advocate. As your Inner Critic starts his/her monologue, let out your Inner Advocate. This is a powerful ally who believes in you, is promoting you, supporting, protecting, and empowering you. Above all, he or she is a good advocate.** Many of us are more confident and perform better when someone is supporting and reinforcing us. Remember, you can be good to yourself. Talk to yourself in the second person. "You can do this. You are a good person. You can make friends," etc. If necessary, you might recall a role model who inspired you and ask yourself, "What would So-and-So do and say?" Import it and adjust it to your needs.
3. **Write down your daily "done wells."** Get in the habit of recognizing "done wells." And congratulate yourself. Take a few moments every day to write down, "What have I done well today?" Then celebrate. It can be something small like taking a coffee break while you are working under a close deadline, but get in the habit of rewarding yourself. This simple gesture reinforces optimism on a daily basis. The answers accumulate and eventually help you develop self-confidence, which is extremely important for your progress. Every day, reward yourself with a minute of silence for yourself. It doesn't matter if you are in a crowd or alone. Just take a minute of silence and in this silence, just keep congratulating yourself for something you have done, perceived, or experienced.
4. **Nurture a healthy body.** A healthy body helps you live at ease. Optimism is easier when you feel good. Factors that interfere include: lack of sleep, poor eating habits, self-destructive lifestyle, too little exercise, too many stressors. If you know your priorities and goals, "train" for it like a professional athlete. Be disciplined. But do remember that even professional athletes have rest

days! In fact, it is the rest days that most contribute to their stamina. A word of warning: do not confuse “rest” with “pessimism” or “laziness.”

5. **Be optimistic in a bad situation.** One way to practice optimism is looking for any improvement in the current situation no matter how small. For example, running around the block may seem small when your goal is running a marathon, but it's a step in the right direction. Go step by step. Let's say you take up cycling. Between you and that fantastic view on top, there is an uphill that you believe is unsurmountable. It is not. It is only a hill. The first time you do this, it will be hard. The second also. And third and fourth. But do it every other day and it will get easier. As it gets easier, you will start noticing other things on your way to the top.
6. **Minimize difficulties to progress.** First be aware of what kinds of obstacles you could encounter on your path. Sort them into categories: internal/external, people/situations, and so on. Do not deny your obstacles; look at them from a different perspective. Make them smaller, less relevant. Create a different strategy from the one you had before. Find what you need from the inside and from the outside of your personality to surmount them.
7. **Focus on resolutions, not on difficulties.** If you find that you are obsessing about a problem, stop. Take a break. Do the U-turn. Think about different ideas. Be fluent about them. Replacing problem-focused thinking with solution-focused thinking will give you a sense of hope and possible progress. Adopting a different belief system is one of the foundations of optimism.

Seligman's Method of Learning Optimism: ABCDE Model

According to Martin Seligman, anyone can learn optimism. He developed a simple method to learn a new way of responding to adversity. It begins with the Ellis ABC model of “adversity, belief, and consequence” developed by Albert Ellis, PhD. To the ABC model, Seligman adds “D” (disputation) and E (energization). Adversity is the event that happens, Belief is how that adversity is interpreted, Consequences are the feelings and actions that result from the beliefs.

Example:

ADVERSITY

Someone takes your parking spot.

BELIEF

"I can't believe that somebody was so rude!"

CONSEQUENCES

You are overcome with anxiety, sadness, and say to yourself: “I can’t even park. I am good for nothing.”

You start with

- understanding your current reaction and interpretation of adversity.
- keep a journal for two days in which you note small adverse events and the beliefs and consequences that followed.
- You return to the journal to highlight pessimism so you can dispute it.
- You dispute your interpretation. Create counterevidence to the negative beliefs in general, the causes of the event, or the implications. Disputation for the above example might look like this: "I am overreacting. I don't know what situation she is in. Maybe she is late for an important meeting and might get fired. So I should really know what was happening to her. See, I am understanding it differently, I can think rationally."
- Your successful disputation usually leads to energization. You are energized, then can actively celebrate. "I can do that and feel good about it." Disputation and energization are the keys to Seligman's method. You are decontaminating your thought process and reinforcing yourself.

ABCDE Journal

Think of an adverse situation you were in or experienced recently.

ADVERSITY

Describe the situation. Be specific and stick to the facts.

BELIEFS

What were the very first words you said to yourself? What did you think?

CONSEQUENCES

How did it all make you feel? What did you do? Be truthful.

PAUSE!

Match the consequences with the beliefs. Ask yourself: Do they match?

DISPUTE 1

There must be at least one piece of evidence that is in contradiction with my beliefs. What is it? Write it/them down.

DISPUTE 2

Consider the adverse event from a different angle. What is the description from this angle? Are there discrepancies with your first description?

ENERGIZE YOURSELF

What positive effects did disputing have on you? Make a list.

What will you do the next time you find yourself in a similar situation?

Spiritual Awareness

Objective: To identify different types of spiritual practices and identify the potential positive and negative aspects of those practices for you.

You Should Know

Broadly speaking, spirituality is the meaning that you seek in your life through connection with a higher power. While formal religion can certainly provide a sense of spirituality, you might seek to bring spirituality into your life outside of religion.

Research tells us that becoming more spiritual may be particularly helpful if you have experienced trauma, helping you deal with challenges. This makes sense because spirituality emphasizes the importance of a positive outlook, reflection on your goals and purpose, and seeking inner strength and peace in the context of living a value-based life.

This worksheet is designed to help you identify spiritual practices to help you through difficult times and also to enrich your day-to-day life. Although you may feel better from the very first time you try one of these practices, it is worth noting that bringing spirituality into your life is a long-term commitment and you will see the most important changes to your emotional well-being over time.

What to Do

Look at the list of spiritual practices below and check off the ones you think would be most helpful. Then answer the questions for each of the practices you have checked to help you commit to one or more of these practices. Add other practices you would like to try.

_____ Spending time appreciating nature (e.g., taking a walk in the woods or by the beach)

_____ Meditation

_____ Prayer

_____ Community service

_____ Keeping a journal

_____ Reading books about spirituality

_____ Yoga

_____ Other spiritual practices: _____

Spiritual Practice #1 _____

Specifically, how would you do this?

Write down the names of people you know who have a similar interest in this practice.

Write down any times in the past you have found this practice helpful.

Write down things that might get in the way of doing this practice on a regular basis.

Spiritual Practice #2 _____

Specifically, how would you do this?

Write down the names of people you know who have a similar interest in this practice.

Write down any times in the past you have found this practice helpful.

Write down things that might get in the way of doing this practice on a regular basis.

Spiritual Practice #3 _____

Specifically, how would you do this?

Write down the names of people you know who have a similar interest in this practice.

Write down any times in the past you have found this practice helpful.

Write down things that might get in the way of doing this practice on a regular basis.

Spiritual Practice #4 _____

Specifically, how would you do this?

Write down the names of people you know who have a similar interest in this practice.

Write down any times in the past you have found this practice helpful.

Write down things that might get in the way of doing this practice on a regular basis.

Creating a Personal Mission Statement

Objective: To define what a “Personal Mission Statement” is and to write yours.

You Should Know

If you want to live each day to the fullest, you will need to think about what you really want out of your life and the principles and values that will guide your day-to-day decisions. This worksheet is designed to help you create a personal mission statement (sometimes called a purpose statement), which can be a simple road map to help you live a happy and fulfilling life. A personal mission statement provides clarity and gives you a sense of purpose. It defines who you are and how you will live.

A personal mission statement is different than goal-setting. In fact, it is what your goals are based on. A personal mission statement includes your values, beliefs, and priorities in just a sentence or two. A personal mission statement will not only show you the path to make your decisions each day, it will also give you permission to say no to the things that are distractions.

It is important to note that a personal mission statement is not written in stone, but rather it will change over time as you change with your life experiences. Your personal mission statement is focused on self-discovery as well as purpose.

Here are some personal mission statements from some people you may know:

"To be a teacher. And to be known for inspiring my students to be more than they thought they could be."

—*Oprah Winfrey*

"To have fun in [my] journey through life and learn from [my] mistakes."

—*Sir Richard Branson*

"My mission in life is not merely to survive, but to thrive; and to do so with some passion, some compassion, some humor, and some style."

—*Maya Angelou*

What to Do

Use this worksheet to help you develop your personal mission statement.

1. Think about people you admire and the traits they have that you think are important.

Three people you admire:

Traits these people have that you admire.

Name five values that define you.

Think about the roles you play in the lives of others—friends, family, co-workers. Write down all the important roles you have in your life.

Write down the most important things you want to accomplish in your life.

Imagine who you want to become in this world, what you want to be known for, and how you want to be remembered. Write it down below.

Write down some things that you are really good at.

Your Personal Mission Statement

Write down your personal mission statement in a sentence or two, incorporating your values, your aspirations, your positive abilities, and what you see as your purpose in life.

Write down three ways you can incorporate your mission statement into your daily life.

Six Pillars of Character

Objective: To identify six specific character traits, apply them to yourself, and take actions to express those character traits.

You Should Know

As you become more and more familiar with what it means to recover from PTSD and build resilience in your life, learning about the Six Pillars of Character can help you develop an expanded repertoire of experiences and behaviors that can benefit you and the world.

What to Do

Review the following chart and become familiar with the descriptions of six different character traits or “colors.” Then fill out the second chart as instructed.

Character	Color	Description
Trustworthiness	Blue: Think True Blue	Be honest • Don’t deceive, cheat, or steal • Be reliable — do what you say you’ll do • Have the courage to do the right thing • Build a good reputation • Be loyal — stand by your family, friends, and country
Respect	Yellow/Gold: The Golden Rule	Treat others with respect; follow the Golden Rule • Be tolerant and accepting of differences • Use good manners, not bad language • Be considerate of the feelings of others • Don’t threaten, hit, or hurt anyone • Deal peacefully with anger, insults, and disagreements
Responsibility	Green: Think being responsible for a garden of finances, or as in being solid and reliable like an oak	Do what you are supposed to do • Plan ahead • Persevere: keep on trying! • Always do your best • Use self-control • Be self-disciplined • Think before you act — consider the consequences • Be accountable for your words, actions, and attitudes • Set a good example for others
Fairness	Orange: Think of dividing an orange into equal sections to share fairly with friends	Play by the rules • Take turns and share • Be open-minded; listen to others • Don’t take advantage of others • Don’t blame others carelessly • Treat all people fairly

Character	Color	Description
Caring	Red: Think of a heart	Be kind • Be compassionate and show you care • Express gratitude • Forgive others • Help people in need
Citizenship	Purple: Think regal purple as representing the state	Do your share to make your school and community better • Cooperate • Get involved in community affairs • Stay informed; vote • Be a good neighbor • Obey laws and rules • Respect authority • Protect the environment • Volunteer

Write down examples of how you demonstrate each one of these character traits. See if you can do one thing in each category this week.

Character	Color	Examples
Trustworthiness	Blue	
Respect	Yellow/Gold	
Responsibility	Green	
Fairness	Orange	
Caring	Red	
Citizenship	Purple	

Relying On Your Character Strengths

Objective: To identify what your character strengths are and how they may help you solve problems.

You Should Know

When you are going through difficult times in your recovery from PTSD, you may forget about the personal strengths you can bring to the problems in your life. Remembering your strengths can help you be more resilient and can guide you toward solutions to your problems that you might have missed.

What to Do

Read the list of adjectives below and circle the personality or character strengths that best describe you. Then go back and look at the strengths you have circled and see if there is one strength that will help you solve a problem you are currently having.

Accepting	Flexible	Persistent
Adaptable	Focused	Practical
Adventurous	Friendly	Proactive
Agreeable	Fun	Rational
Aware	Generous	Reliable
Balanced	Honest	Responsible
Calm	Humble	Self-Confident
Caring	Humorous	Sociable
Centered	Imaginative	Spiritual
Charismatic	Inquisitive	Spontaneous
Considerate	Insightful	Sympathetic
Courageous	Intuitive	Thoughtful
Creative	Kind	Trustworthy
Curious	Loving	Versatile
Dedicated	Loyal	Warmhearted
Diligent	Open-minded	Wise
Energetic	Optimistic	Witty
Enthusiastic	Passionate	
Fair-minded	Patient	

One strength that will help you solve a problem you are currently having: _____

How can this one strength help you solve the main problem you are facing?

How can other strengths be used to help you solve your problems and lead a happier and more fulfilling life?

Understanding Your Signature Strengths

Objective: To identify the different types of signature strengths and rate yourself on each item.

You Should Know

According to research, the way to obtain greater happiness is to understand and practice your signature strengths. In this worksheet, you will have an opportunity to learn about different kinds of strengths and assess how much you exhibit those strengths. This knowledge can help you in your recovery from PTSD and begin building your resilience.

What to Do

Review the list of strengths below, and rate each strength on the following scale, where 0 = This doesn't describe me at all, 1 = I exhibit this strength occasionally, 2 = I exhibit this strength often, 3 = I exhibit this strength every day.

Wisdom and Knowledge

Signature Strength	What it means	Rate your strengths
Curiosity and Interest in the World	You're open to new experiences and like to take a flexible approach to most things. You don't just tolerate ambiguity; you're intrigued by it. Your curiosity involves a wide-eyed approach to the world and a desire to actively engage in novelty.	
Love of Learning	You love learning new things. You love being an expert and/or being in a position where your knowledge is valued by others.	
Judgment, Critical Thinking, Open-Mindedness	It's important to you to think things through and to examine issues from all angles. You don't quickly jump to conclusions but instead carefully weigh evidence to make decisions. If the facts suggest you've been wrong in the past, you'll easily change your mind.	
Ingenuity, Originality, Practical Intelligence	You excel in finding new and different ways to approach problems and/or to achieve your goals. You rarely settle for simply doing things the conventional way, more often looking to find better and more effective approaches.	

Signature Strength	What it means	Rate your strengths
Social and Emotional Intelligence	You have a good understanding of yourself and of others. You are aware of your own moods and how to manage them. You're also very good at judging the moods of others and responding appropriately to their needs.	
Perspective	This strength is a form of wisdom. Others seek you out to draw on your ability to effectively solve problems and gain perspective. You have a way of looking at the world that makes sense and is helpful to yourself and to others.	

Courage

Signature Strength	What it means	Rate your strengths
Valor, Bravery	You're prepared to take on challenges and deal with difficult situations even if unpopular or dangerous. You have the courage to overcome fear as well as the ability to take a moral stance under stressful circumstances.	
Perseverance, Diligence, Industry	You finish what you start. You're industrious and prepared to take on difficult projects (and you finish them). You do what you say and sometimes you even do more.	
Integrity, Honesty	You're honest, speaking the truth as well as living your life in a genuine and authentic way. You're down-to-earth and without pretense.	

Humanity and Love

Signature Strength	What it means	Rate your strengths
Kindness, Generosity	You are kind and generous to others, and never too busy to do a favor. You gain pleasure and joy from doing good deeds for others. In fact, your actions are often guided by other people's best interests. At the core of this particular strength is an acknowledgment of the worth of others.	
Loving, Being Loved	You place a high value on close and intimate relationships with others. More than just loving and caring for others, they feel the same way about you and you allow yourself to be loved.	

Justice

Signature Strength	What it means	Rate your strengths
Citizenship, Loyalty, Teamwork	You're a great team player, excelling as a member of a group. You are loyal and dedicated to your colleagues, always contributing your share and working hard for the good and success of the group.	
Fairness, Equity	You do not allow your own personal feelings to bias your decisions about other people. Instead, you give everyone a fair go and are guided by your larger principles of morality.	
Leadership	You're a good organizer and you're good at making sure things happen. You ensure work is completed and also maintain good relationships among group members.	

Temperance

Signature Strength	What it means	Rate your strengths
Self-Control	You can easily keep your desires, needs, and impulses in check when necessary or appropriate. As well as knowing what's correct, you're able to put this knowledge into action.	
Discretion, Caution, Prudence	You are a careful person. You look before you leap. You rarely, if ever, say or do things you later regret. You typically wait until all options have been fully considered before embarking on any course of action. You look ahead and deliberate carefully, making sure long-term success takes precedence over shorter-term goals.	
Modesty, Humility	You do not seek or want the spotlight. You're happy for your accomplishments to speak for themselves but you don't ever seek to be the center of attention. You don't necessarily see yourself as being special; and others often comment on, and respect, your modesty.	

Transcendence

Signature Strength	What it means	Rate your strengths
Appreciation of Beauty and Excellence	You're one of those people who stops to smell the roses. You appreciate beauty, excellence, and skill.	
Gratitude	You are highly aware of all the good things that happen to you and you never take them for granted. Further, you take time to express your thanks and you appreciate the goodness in others.	
Hope, Optimism	You expect the best for the future and you plan and work to achieve it. Your focus is on the future and on a positive future. You know that if you set goals and work hard, good things will happen.	

Signature Strength	What it means	Rate your strengths
Spirituality, Faith, Sense of Purpose	You have strong and coherent beliefs about the higher purpose and meaning of the world. You're also aware of your position in this world and in the larger scheme of things. This awareness shapes your beliefs, which shape your daily actions; this is a strong source of comfort to you.	
Forgiveness, Mercy	If you're wronged, you can forgive. You allow people a second chance. You're guided more by mercy than revenge.	
Playfulness, Humor	You like to laugh and to make others laugh and smile. You enjoy and are good at play. You easily see the light side of life.	
Passion, Enthusiasm	You're energetic, spirited, and passionate. You wake up and look forward to most days. You throw yourself, body and soul, into all activities you undertake.	

“The worst loneliness is to not be comfortable with yourself.”

—Mark Twain

Self-esteem

Objective: To assess statements that indicate low self-esteem and identify replacement statements in order to boost confidence, to rate your own self-esteem and assess your progress.

You Should Know

Your inner core worth already exists at birth, because you are a human and have an instinct of self-preservation, instinct to survive. It is a unique blend of your capacities, strengths and weaknesses. That’s who you are.

However, your social worth might come from what you have and the persona you created: a kind of mask you have created to protect your true nature if needed, and to exert your influence on and adapt to others in your culture.

Our true self had a major challenge in growing: the fear of failure. If we dared to achieve something and then failed, if we have loved and lost, in this very competitive world, that might have changed our relationship with the world, and our attitude toward ourselves. Self-esteem is vulnerable, and it can be said that it stands almost naked in front of failure.

Fortunate people are loved and appreciated for who they are. They do not crumble under somebody’s critical thinking; they are not depressed if somebody points out their weaknesses. They are ready to grow and improve despite the heavy social pressure of our time. At least, this is what the world sees. It is probably true, but behind fortune there are scaffolds of one’s work on one’s self, of one’s growth, of failures lived through.

Unfortunate ones, those without love and respect, are narcissistically wounded and have learned to compensate or overcompensate. They have to pretend they are somebody else, they have to pretend that they are perfect, invincible, and are always pleasing others in order to be loved and appreciated. Those people learn very early on how to fit in such an irrational surrounding, and their self-esteem, no matter how well they create it, becomes extremely conditional, fragile, and vulnerable. They have yet to build the scaffolds that will support them.

What to Do

Laying Down Your Scaffolding: Part 1

Read the following statements carefully. Rephrase them so that the person saying them strikes you as brimming with self-esteem. When you finish the activities, read the suggestions. Compare your answers with the examples.

1. When I think about myself, it doesn't feel good. There are many things about me that I struggle to accept.

2. I know I am not perfect, but I have to keep trying to be perfect. No matter what I do, I am always too fat, too sad, too depressive.

3. I have a problem accepting others' progress and achievements. Why should I? Others don't respect my achievements, nor me. In fact, I'm sure they don't care either way.

4. I always have to play a role in order to earn trust and respect. My relationships are just an endless, pointless role-play.

5. Whatever I do is never good enough. Every new challenge is like a trap designed for me to fail.

6. I mustn't show my weaknesses. The moment I do, someone will take advantage of me. I have to keep myself composed at all times.

7. I can't make anyone happy. Why try in the first place?

8. I mustn't stand out from the crowd. No one likes people who stand out.

9. How will I ever know where I am if I don't compare myself to others?

Remember a pet you had and loved very much. Find a picture, or make one, or draw one. Find a photo of a pet on the Internet. Paste the picture of that pet here. Concentrate on the pet's eyes. See that love.



Now, imagine that you can see yourself through those eyes—your pet’s eyes that look at you with love.

What did you experience?

What did you feel?

What did you think?

Repeat this activity several times a week. Carry the photo of that pet with you. Whenever you feel lack of self-esteem, take out the picture of your pet and just see yourself through your pet’s eyes.

Rate Your Self-Esteem

Rate yourself on the list of personality characteristics, using the scale from 0 to 7; for which 0 means complete and total absence of the characteristic, and 7 means that characteristic is completely developed.

Characteristics	0	1	2	3	4	5	6	7
1. Moral fiber								
2. Integrity								
3. Problem solving								
4. Respect								
5. Critical thinking								
6. Kindness								

Characteristics	0	1	2	3	4	5	6	7
7. Capacity for love								
8. Trustworthiness								
9. Ability to love yourself								
10. Ability to grow								
11. Knowing how to change								
12. Truthfulness								
13. Courage								
14. Friendliness								
15. Gratitude								
16. Dignity								
17. Sincerity								
18. Cleverness								
19. Compassion								

Read the list again and add some characteristics you think contribute to your self-esteem.

Which characteristics do you think are the most important for your self-esteem?

If you look at your grading, which characteristics are you the proudest of?

If you look at the lowest graded characteristics, which ones do you wish you had more of?

How would you achieve that?

Laying Down Your Scaffolding: Part 2

Go back to Part 1 of this activity. Compare your answers with these examples.

- If I think about myself now, it generally feels good. I am able to accept myself as I am.
- I am not perfect nor trying to be. I learned that it is a trap. I know that healthy criticism helps me grow, and it is not always easy to hear it. I learned to accept the realistic positive feedback from well-intentioned people.
- I enjoy the achievements and progress of certain other people. I expect others to like and respect me and if they don't, I don't suffer over it.
- I can usually earn people's trust through sincere and respectful behavior. I generally show rational judgment in my relationships.

- I learned to appreciate new challenges. The work I do is generally of good quality. I am aware of my strengths and respect them.
- I am aware of my weaknesses. I can laugh at some silly things I do. I am not as vulnerable anymore.
- I enjoy making other people happy if I can.
- I am glad that I learned that it is OK to feel unique sometimes, and at other times I feel like everybody else.
- I don't have to compare myself to others anymore. Now I feel stable and secure because I know my core worth.

Where is the overlap for you? Where are the gaps? What can you do to close the gaps? Write down your answers on a separate piece of paper. Think of a strategy. Do it!

“A day without laughter is a day wasted.”

—Charles Chaplin

Getting Serious about Humor

Objective: To assess the role of humor in your life and to identify ways to laugh more as a tool for recovery and healing.

You Should Know

Humor is positively related to your well-being and resilience. Before your experience of trauma, you had a life, and in that life you laughed. Just remember it. Then the trauma happened and you have, maybe, stopped laughing altogether; or what used to be worth a laugh is not any longer. Laughter and laughing are human qualities that will never die—you just might have to remember how.

Humor exists in all cultures and at all ages. It is an essential, fundamental human behavior connecting us to people and helping us find the meaning in life. Gratitude, hope, spirituality, and a sense of humor belong to the personal strengths some psychologists call *transcendence*. Combined with wisdom, love for learning, increasing emotion of well-being, and optimism, these strengths help you make a choice to look at life from another perspective. Humor is the inclination to amuse and be amused, an ability to see the comical and find pleasure in many aspects of life.

It is not just making a joke; it is a way of looking at life in a new light, with acceptance and optimism even in bad situations. You feel amused, filled with inner peace and hope. It gives your mind the flexibility it needs to find other perspectives and other interpretations. Humor can be seen as a movement between literal and fictional. Researchers generally agree that it is a vital aspect of resilient people. Humor brings pleasure to life's moments, which increases feelings of happiness. Happiness in turn helps us see more ways to cope with adversity and brighten up both the bad and good times. Thus, the upward spiral continues. Humor comes in many forms; find the ones you prefer. In addition, like cholesterol, humor can be healthy (benign) or hostile.

Healthy Humor (benign): Healthy humor lifts your spirits up and puts you at ease. It uses critical thinking in a positive way. It offers a warm feeling and brings us together. Healthy humor doesn't put anyone down. People who use humor in positive ways tend to look at their past from a positive perspective. Some clinical psychologists are using humor as a treatment intervention to increase clients' subjective well-being.

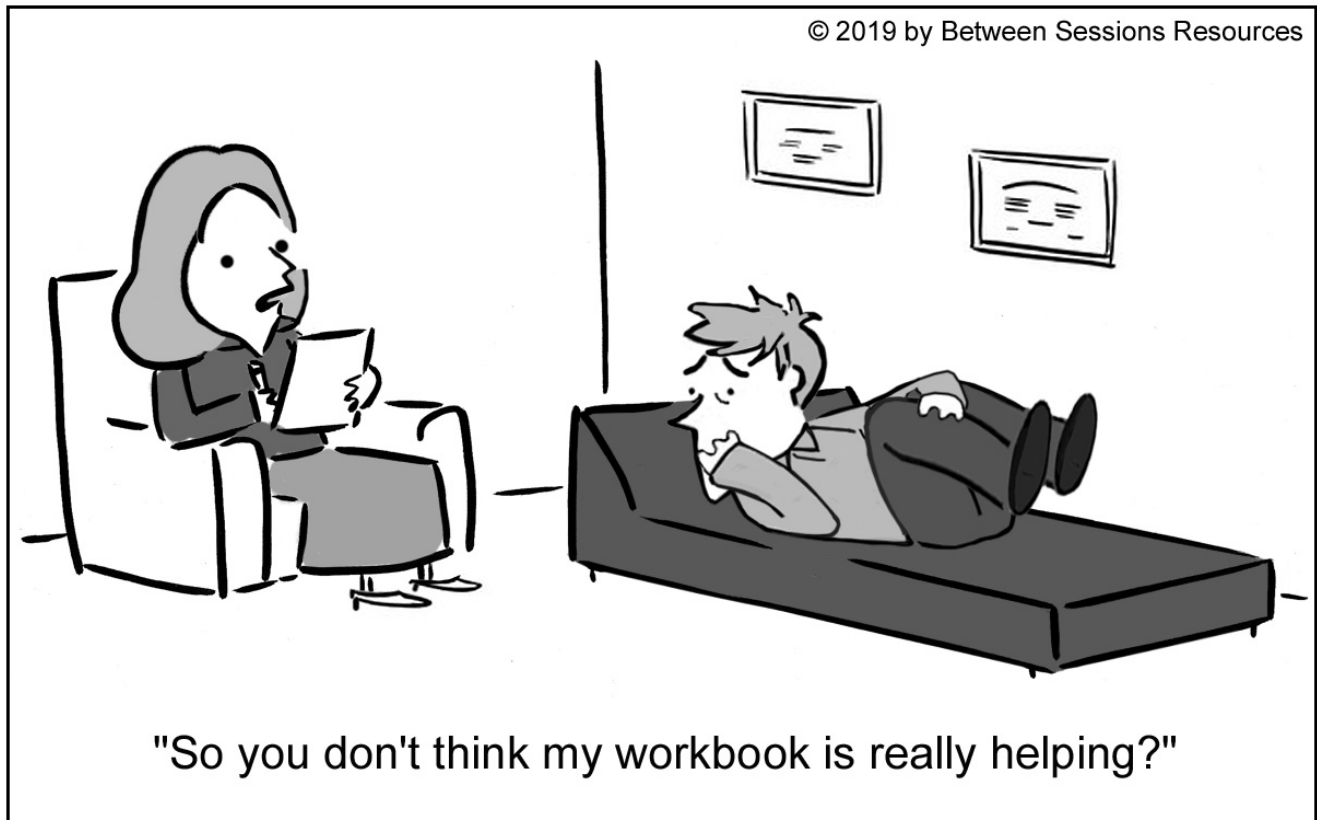
Hostile Humor: This form of humor uses critical thinking in a negative way. It might be sarcasm, put-downs, teasing, or a derisive telling of an embarrassing story about someone in order to exclude them from a group. It can include blaming and fault finding wrapped in a “joke.” If you have to say “just kidding” when challenged by others, you might be using aggressive humor. Worse, you might be aware of it and do it on purpose anyway. Even if it is aimed at yourself, it is malicious and you should stop. Learn how to laugh with people not at people.

Here are some jokes about psychotherapists:

* How many psychologists does it take to change a light bulb? Just one, but the bulb has to want to change. Or, none, the light bulb will change itself when it's ready.

* At a job interview for a new receptionist: "I see you used to be employed by a psychologist. Why did you leave?"

"Well, I just couldn't win. If I came on time, I was obsessive compulsive; if I was late, I was narcissistic; if I came early, I was an anxious person. And If I didn't show at all, I was a psychopath."



What to Do

Assess Your Humor

Answer the following questions:

Could I laugh more?

Could I be more playful?

How do people play at my age?

Do I watch comedies?

Do people say that I am more serious than I need to be?

Are there ways to spend more time with people who enjoy life?

Do I know people who have fun?

Might I have more fun in life with people?

Could I look and find more fun moments in life?

Could I make others smile more and laugh?

Could I make my moments with others more enjoyable?

Your answers to these questions tell you a lot about your sense of humor. Review your answers, and for each one think about how you could do that.

Tell a joke

Everyone can tell a joke! It's your turn. Tell yourself a joke. Write it down here.

What do you think about your joke? Why do you think it is funny?

How did you feel while telling a joke?

What do you need to be able to tell jokes to friends?

Learn to respect laughter. The healthy kind of laughter. Laughter researcher Robert Province said: "Laughter is a mechanism everyone has; laughter is a part of universal human vocabulary. There are thousands of languages, hundreds of thousands of dialects, but everyone speaks laughter in pretty much the same way." Babies have the ability to laugh before they ever speak. Children who are born blind and deaf still retain the ability to laugh. Province argues that "laughter is primitive, an unconscious vocalization. A kind of language."

Here are some ideas about how to bring laughter into your life:

- Go to laughter therapy (<https://laughteryoga.org>). It is a type of therapy that uses humor to help relieve pain and stress and improve a person's sense of well-being. It may be used to help people cope with a serious disease, such as cancer. Humor therapy may include laughter exercises, clowns, comedy movies, books, games, and puzzles.
- Laughter can lower anxiety, release tension, and improve mood. Of course, laughter also enriches social experiences by strengthening relationships, helping to defuse conflict, and allowing people to successfully operate as a team. The benefits of laughter, for both bodies and minds, show that contagious convulsions are anything but frivolous.
- With more than 400 laughter clubs across the United States and 6,000 groups worldwide, laughter yoga is growing in popularity. Besides being easy to do, laughter yoga can help reduce stress, encourage a more positive outlook, and help you feel more refreshed and energetic. Laughter yoga can be practiced alone or with a group. You can also join a laughter yoga club or class in your area to practice it with a large group of people. Laughter yoga was created by Madan Kataria, MD, "The Laughter Guru." Benefits of doing laughter yoga include better emotional intelligence, an increased sense of joyfulness, and a better grip on disturbing emotions. Why is it important to do every day? It will boost your immune system. In order to get better at laughing, you need to achieve childlike playfulness and openness.

How to start practicing laughter yoga: you might want to practice laughter yoga alone or in a group.

If you are starting alone, here is what to do:

- Exercise at your safe place, so you are sure nobody makes fun of you.
- Warm up by clapping your hands to stimulate and increase your energy level. Continue to clap with a rhythm, moving your hands up and down and swinging them from side to side as you clap. When you are ready try your first round of laughter, in rhythm with your hands, say “ho-ho, ha-ha-ha,” breathing from your belly with deep inhales and exhalations. You can continue clapping and chanting as you move around the room. Make sure you are breathing from your diaphragm with deep inhales and exhales as you clap and chant. It might look silly to you, but just do it.
- Do a vowel laughter exercise: move your right leg and say the letter “A” by drawing out the vowel. Then, pretend to toss the letter “A” aside. Continue with the letter “E,” moving your right leg and drawing out the vowel. Then, pretend to toss the letter “E” aside. Do this for “I,” “O,” and “U.”
- Do the applause exercise, where you clap quietly and make quiet humming noises signaling approval. Let the humming get louder until you are laughing and clapping faster and more wildly.
- Learn lion laughter: stick your tongue out fully and open your mouth. Stretch your hands out like the lion paws and roar; then laugh from your belly. You will feel a nice stretch in your facial muscles, your tongue, and your throat. Improvise.
- Exercise deep breathing to help you release big belly laughs. Activate your breath in your diaphragm. Place your hands on it and focus on inhaling and exhaling through your nose. Inhale deeply and then exhale through your nose. As you exhale, release a belly laugh. Deepen your breath, with laughter at the end of every exhale. Improvise playful exercises to encourage laughter and joy. The idea is to motivate yourself to laugh for no reason other than out of joy and fun. Sing a playful song that goes “Every little cell in my body is happy/ Every little cell in my body is well/ Feel so good feels so swell.” As you do this, tap your head, shoulders, knees, and toes.
- Try the electric shock laughter exercise by pretending every surface and object you touch gives you a shock of static electricity. Not a huge one, but just enough for you to jump back every time you touch something, smiling and laughing as you do this.
- Confront a strong emotion. Choose one emotion that is bothering you. Inhale deeply and release belly laughs on the exhale. Feel your tongue, throat, and facial muscles stretch. These laughter exercises are made to help you practice laughing and deriving positive feelings from certain emotions or situations. You are not making your emotion. Emotions are energy you are learning to channel differently.
- Make an embarrassment laughter exercise. Think of an embarrassing incident from your past and retell it out loud in gibberish, laughing as you are telling it. You may raise your hands and clap as you do this, focusing on speaking only gibberish and laughing as you “tell” the embarrassing story. If it bothers you, stop.

- Create an apology and forgiveness exercise, where you think of a person you would like to apologize to and say “I’m sorry,” or think of a person you would like to forgive and say, “I forgive you.” You can then laugh after you show forgiveness or accept an apology. Don’t do this in real life.

If you decide to join a laughter group, introduce yourself in gibberish, using made-up words instead of real words and maintain a sense of childlike playfulness and openness when practicing this form of yoga. Here, the mind and body are together.

There are many physical benefits associated with laughter, especially with laughter done on a consistent basis for thirty minutes a day, such as:

- A higher release of endorphins - Improved circulation to your lymphatic system, a stronger immune system.
- A healthier cardiovascular system - A form of catharsis and stress relief for depression or anger. Laughter can function as a nonviolent way to release disturbing emotions you may be carrying and which could be detrimental to your health.

Remember:

- Be yourself, be authentic.
- Be aware of other people’s moods and situations.
- Know where and when not to be funny.
- Be aware of the context you are in.
- Start noticing the joyful aspect of life.
- Remember some funny times.
- Watch a funny movie or a play.
- Learn from people who know how to laugh.
- Find people you can play with.
- Go and watch a stand-up comedian.
- Find humor in adversity.
- Play with language.
- Learn gibberish.
- Ask friends what’s funny to them.
- It’s OK to be introverted and have a calm happiness.
- Notice the incongruent, comical, ironic, or absurd around you.

- Move from a kind and affectional position.
- Laugh at your own self.
- Laugh with people and not at people.
- Check if you are angry before starting.
- Allow yourself to be spontaneous.
- Be more aware of people who make you smile and notice their humor styles.
- Start off the day laughing while brushing your teeth.
- Write a funny story.

Finding Joy and Balance in Your Life

Objective: To define and practice the G.L.A.D. Technique, which is aimed at bringing more joy and positivity into your life.

You Should Know

The G.L.A.D. Technique

The G.L.A.D. Technique was developed by mindfulness expert Donald Altman, MA, as a particularly useful approach to developing a positive attitude toward life (see *The Mindfulness Tool Box*, New Harbinger Publications). It is designed to help you pay attention to positive things that are around you all of the time, but that frequently go unnoticed. “G” stands for grateful; “L” stands for something you learned; “A” stands for something you accomplished; “D” stands for something that brings you a sense of delight.

What to Do

While you may want to fill in the G.L.A.D. worksheet throughout the day, it is most practical to fill it out at the end of the day. Make copies of this worksheet so that you can practice the technique every day for at least three weeks. After three weeks, your “positive mindfulness” will become a habit. After three weeks, you might want to use the worksheet just once a week, but you should still do it on a regular schedule (for example, every Sunday night). Developing “positive mindfulness” is particularly important for you if you are stressed and depressed, but it should also be considered a resilience tool that can help you find daily happiness in your life.

You may also want to share the positive experiences you write down on your worksheet with others. Sharing your positive thoughts and feelings makes them even more significant.

Learning to Be G.L.A.D.

Today’s Date _____

G - Something you were *grateful* for today. It could be something as simple as the sunlight or the nourishing food you eat. Write it below.

Now think of something truly important in your life like a meaningful relationship, kids, friends, or your health. Write it below.

L - Something you *learned* today. Write down something positive you learned about yourself today. It might be something you already knew, but it came into focus today.

Write down something you learned about another person today. Again, it might be something you were already aware of, but you were more aware of this quality today.

Write down a fact you learned today that made you curious or more aware of the world around you.

Write down something you learned today and how it changed your perspective of yourself or the world around you in a positive way.

A - One small *accomplishment* you experienced today. You might think that accomplishments have to be big or important tasks, but it is the little things that make a difference in your life. Perhaps you are working on a goal like exercising more or eating healthier or finding a new job. Small steps toward your goal are important accomplishments.

Write down something you accomplished today.

D - Something that brought you *delight* today.

What made you laugh or smile?

What small thing of beauty did you see today?

What did you hear today that lifted your spirits? A song? A child's voice? A joke?

Now close your eyes and think of your day and what you wrote. Breathe deeply for a few minutes and visualize a positive image from the day. Write down something important from this activity that you want to remember.

"We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty and the pursuit of Happiness."

—from the Declaration of Independence

Pursuing Happiness

Objective: To identify characteristics of happy people, assess your own happiness, and expand your experiences of happiness.

You Should Know

Happiness is an important goal, and it might hold high value for you. You might think that happiness is something that just happens. Well, it doesn't. Happiness is something that you learn and create throughout the course of your life. Once you experience happiness, it is important to preserve it.

Happiness is a very complex subjective experience. The French would say "*chacun à son goût*" or "to each his own taste." People from different cultures describe, define, and value happiness differently. In a small country called Bhutan, they even have a Ministry of Happiness, and they value the well-being of their society by how happy the people are.

Think about the society and culture you live in. Is it described more like a marathon than a sprint? Where does it stand in relation to other values in the society?

Researchers agree that achieving happiness requires a long-term commitment to growth, serious engagement in the process, meaningful relationships with significant others, and vitality. According to psychologist Daniel Gilbert, PhD, happiness is the ultimate goal of virtually all the decisions we make in life, even of the ones we find difficult to connect to our own feelings of happiness.

Learning, being curious, trying out new things, making mistakes along the way, and prosocial activities are the core of that pursuit.

What to Do

Characteristics of Happy People

Neil Eddington, PhD, wrote about the characteristics of happy people. According to him, happy people achieved the following:

1. **Personal Integration** – indicates psychological maturity and resolution of some developmental issues. The person is a whole being without crucial splitting.
2. **Autonomy** – indicates that the person resolved symbiotic issues, enabling her/him to be independent of and close to others. One of the important capacities of happy people is the capacity to make an informed decision.
3. **Accurate Perception** – Indicates the realistic and informed view of the self and the world around

her/him.

4. **Environmental Mastery** – Indicates the use of learned skills to be able to shape and achieve goals in accordance with one’s values.

5. **Self-acceptance** – Indicates the awareness and satisfaction with one’s strengths and weaknesses.

6. **Self-actualization** – Indicates the need to grow, to be fully alive, and to look for meaning in life.

Is happiness the main goal in life? Is it your goal? If you are motivated to go on the path of pursuing happiness, be clear that to achieve happiness:

- You believe in the power of learning. If you believe that happiness is inherited or just pure luck, you might be passive and always waiting, instead of engaging in proactive behavior to achieve it.
- You are aware of your cultural context. It might support or sabotage you. That’s why it is important to be able to understand people around you.
- You have achieved a good-enough level of well-being and you are ready for growth.
- You surround yourself with people you can share your experiences with.
- You are aware of your model of happiness: some people look for moderation and some are looking for ecstasy.
- You should be motivated and make an effort.
- You grow deep and trusting relationships.
- You look for meaning in life.
- You have a purpose.
- You stand by your core values.

Imagine that a Martian lands in front of you, steps out of the spaceship, approaches you in the friendliest of manners, and asks you to define happiness. What would you say? Remember, it is a Martian you are answering, so make it short, simple, and to the point.

Then, the Martian asks you if you are anywhere near that. In all honesty, you say:

Depending on your answer, is there anything missing in your life for you to be happy? If yes, what is it? If not, are you happy?

Focus on what you think you are missing to be happy. Think again! Is that really what will make you happy? How can you achieve that?

According to the *Foresight Report* (Jody Aked, M. Phil, and colleagues), there are five factors that affect well-being.

1. Connecting with people and having high-quality connections. Empathy is essential for achieving that quality.
2. Being active and relaxed.
3. Being aware when you are happy. Notice your body sensations, your thoughts, feelings, and actions.
4. Keep learning. Love of learning is a character strength that can benefit people in all areas of life.
5. Prosocial behavior, acts of kindness, and giving have multiple benefits. One of them is the marked increase in neurochemicals like oxytocin and dopamine, the body's base for happiness.

Here are a few characteristics that most happy people share. Check off the ones you have.

- | | |
|-------------------------|--|
| _____ hopeful | _____ authentic |
| _____ optimistic | _____ present, but planning for the future |
| _____ kind | _____ adaptable |
| _____ positive feelings | _____ tangible values |
| _____ zest for life | _____ compassionate |
| _____ express gratitude | _____ cooperative |
| _____ curious | _____ able to love and receive love |
| _____ self-confidence | _____ resilient thinking |

Describe yourself using the positive characteristics that you have.

Write about the characteristics you don't have but would like to have. Why would you like to have them?

How will you learn how to develop those characteristics? What do you need to learn?

Here are some things you can do to increase happiness in your life:

- Spend more time socializing.
- Open yourself to spirituality.
- Cherish your curiosity.
- Strengthen your closest relationships.
- Develop a prosocial personality.
- Be a little more vulnerable by allowing others to see you as you are.
- Pet animals.
- Get up and dance.
- Question your expectations and aspirations. Enjoy small things as if they were the big ones.
- Develop positive, optimistic thinking.
- Value happiness.
- Become involved in meaningful work.
- Get organized better and plan things out.
- Present yourself well to the world.
- Stop worrying.
- Discover your strengths and weaknesses.
- Learn to meditate.
- Spend time in nature.
- Find calm friends.
- Listen to music.
- Play an instrument.
- Visualize your best possible self.
- Write letters of gratitude.
- Practice self-compassion.

Happiness means that you can reach a natural, productive, high experience.

In relationships, by improving your communication and contacts with people. Compassion increases chances for positive interactions with others. Learning how to be close and intimate opens the doors for new relationships based on trust and empathy. Not hiding your vulnerability and appreciation of other people’s vulnerability is the vital quality in this area.

Think about what you can do to improve the quality of your relationships.

In finding meaning by participating in meaningful activities. If you look for and find meaning in your work, it will bring happiness. And not only work—your hobbies and interests might be even more fulfilling. Think about what you can do to improve looking for the meaning in your life.

In self-perception, by perceiving yourself as somebody who is contributing to the world. It is the perspective of a person connected to her/his environment.

Think about what you can do to find the best perspective of looking at yourself.

In achievement, by having independent goals and not obsessing and comparing yourself to others. This releases you from what Tal Ben-Shahar, PhD, calls the “rat race.” You create your own flow.

Think about what you can do to achieve your goals.

In kindness, by caring for others and thinking about them, respecting their feelings and sharing activities with them. Make soup and give it to an elderly or disabled person in your neighborhood. Think about how you can care for the ones you choose.

In vitality, by caring about your health. Being able to self-regulate and commit to your health goals will allow you to live in a heightened and energized state. Being vital will energize the rest of your thoughts, feelings, and behavior. Think about what you can do about your vitality.

The “Happiness Habit”

Objective: To identify and rate activities that are designed to increase your happiness.

You Should Know

Research indicates that certain activities increase happiness. These activities, like exercise, meditation, deep breathing, helping others, and reading inspirational stories, stimulate certain biochemicals in the brain that elevate your mood. If you are looking to create more happiness in your life, you can do any of these activities, *but* you have to do them on a daily basis for at least ten to twenty minutes. In other words, you have to make happiness a habit.

The good news is that it typically takes just twenty-one days to create a positive habit, so three weeks from the day you start, you should find it easier to do the kind of activities that will automatically make you happier.

What to Do

Use this form to record your daily happiness activities. You can do the same activity every day, or you can vary the activities as you like. After each activity, rate your mood from 1 to 10, with 1 = Feeling Down to 10 = Feeling Great.

Day	Date	Time	Activity	Mood Before	Mood After
1					
2					
3					
4					
5					
6					
7					

Day	Date	Time	Activity	Mood Before	Mood After
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					

Fostering Closeness in Your Relationships

Objective: To identify enjoyable activities and choose six to try in order to bring more joy into your life.

You Should Know

In relationships, you might feel closest with your significant others when you do things together. It is not just the activity itself, but closeness also comes from planning the activity, strengthening shared interests, and sharing memories. Use this worksheet to think about activities you can do with people close to you. Then, come up with a list of activities to try.

A Few Suggestions

1. Try saying “No” to outside activities that take too much time and energy away from your significant relationships. Even if they are activities you enjoy, try to limit the amount of time you put into them.
2. Try community service or volunteer activities together.
3. Explore activity groups in your area using sites like Meetup.com.
4. Take a class together.
5. Introduce your significant others to your favorite hobby.

Things You’d Like to Try

Write down six activities you think would be enjoyable.

Developing the Habit of Gratitude

Objective: To identify things you are grateful for and record how practicing gratitude affects your mood.

You Should Know

Research suggests that an “attitude of gratitude” will contribute to your happiness. As Sonya Lyubomirsky, PhD, notes in her book *The How of Happiness*, “It is important to understand why and how expressing gratitude works to make you happier.” She explains that expressing gratitude encourages you to savor life’s positive experiences, bolsters your self-worth, helps you cope with stress and trauma, and helps you build social bonds with others. Dr. Lyubomirsky also notes that “the practice of gratitude is incompatible with negative emotions and may actually diminish or deter such feelings as anger, bitterness, and greed.”

Expressing your gratitude in a rote and unthinking way, however, will not really add much to your emotional health or your feelings of well-being. To keep your gratitude meaningful, it is recommended that you try different activities to express your gratitude rather than doing the same thing over and over again. You do not have to do something every day. Completing a gratitude activity just once or twice a week will help you integrate these feelings into your everyday life.

What to Do

Here are some suggestions of things you can do:

- Write down your feelings of gratitude in a journal.
- Write a note or email to someone who has gone out of their way for you.
- Make a call to someone who has made a difference in your life.
- Give a donation to a charity to honor something you appreciate.
- Meditate on something that has made you feel particularly grateful.

Other ideas:

Now, write down what you were grateful for, what you did, and how it affected your mood or behavior.

Use this chart once or twice a week to keep track of your gratitude practice.

What You Were Grateful For	What You Did	How It Affected You

“Every child is an artist; the problem is how to remain an artist when we grow up.”

—Pablo Picasso

Discovering Creativity

Objective: To identify different types of creativity and practice strategies designed to bring more creativity into your life.

You Should Know

Using creativity and creative strategies is a powerful way to resolve PTSD problems. Every creative process results in something relatively new, of value, and of meaningful applicability.

You know by now that successful recovery might lead to post-traumatic growth and that post-traumatic growth can occur in different ways. You might experience heightened spirituality, have another perspective of looking at your life, improved personal relationships, increased self-esteem and inner strengths, discover new possibilities and appreciation of joy. You might also discover creativity.

Tobi Zausner, PhD, LCSW, writes about how post-traumatic growth can provide virtually anyone with a creative inspiration that may not have existed previously. Inspired by the biographies of many creative people whose lives were marked with tragedy (Frida Kahlo, Johann Sebastian Bach, Robert Louis Stevenson, just to name a few), researchers studied the link between tragedy and creation. Their conclusions suggest creativity as a key coping strategy for dealing with hardship.

Marie Forgeard, PhD, and Michaly Csikszentmihalyi, PhD, writes about the positive “orphanhood effect” on some creative people. Forgeard suggests that people in emotional distress may use creative activities to heal and move on with their lives. Physical and psychological illness can be literally life-changing for many people.

Along with intrusive thoughts, deliberate thinking about trauma lets people explore their experiences in an effort to make sense of what happened. Studying the link between PTSD and creativity, Laura K. Kerr, PhD, says, “Given that PTSD is also characterized by flashbacks, nightmares, and intrusive imagery—all symbolic representations of actual events—the results of the study seem to support what is known about the experience of PTSD: it increases the psyche’s likelihood of generating and interacting with symbolic representations.” Art therapy, and especially expressive art therapy, is used to foster human growth, development, and healing. Expressive arts therapy is the practice of using, in an integrated way, painting, writing, storytelling, visual arts, dance, singing, music, drama, poetry, movement, and dream work.

Creativity is not a black or white phenomenon. The 4-C Model developed by James Kaufman, PhD, and Ronald Beghetto, PhD, shows creative development from:

- Mini-C (personal creativity) refers to the new and useful awareness and interpretations involved in learning. Unlike other levels of creativity, mini-c creativity is personally meaningful and does not rely on external judgment. Each time you learn something, you spark your creativity.
- Little-C (everyday creativity) is day-to-day creativity: a song created to encourage children to clean their rooms; or an original, student-developed project to demonstrate their knowledge, understanding, or subject skills, which can be found in nearly all people; creative actions in which the non-expert may participate. This level of creativity illustrates creative potential as widely distributed.
- Pro-C (expert creativity) is creativity exhibited in a creative profession like a head chef who creates a menu of new recipes.
- Big-C (genius creativity) is associated with the extraordinarily gifted and celebrated artists or scientists.

What to Do

Here are some ideas and strategies for how to bring more creativity into your life.

1. You have to believe that you have this creative spark in yourself. Give yourself permission to be creative.
2. You have to protect this creative spark from toxic people. Give yourself protection from them.
3. You have to learn how to stimulate your creativity. Give yourself the power to create.
4. You have to find people who will understand and support you. Use external stimulation for your creativity.
5. Join a class of expressive writing, painting, dancing, swimming, pottery, and so on.
6. Find a group or class where you can learn expressive arts therapy or psychodrama.

Stimulating Creativity: Stimulating External Factors

The six factors listed below were identified by Teresa Amabile, PhD, as ones that stimulate creative processes. The seventh one was researched by Tijana Mandić, PhD, and Irena Ristic, PhD.

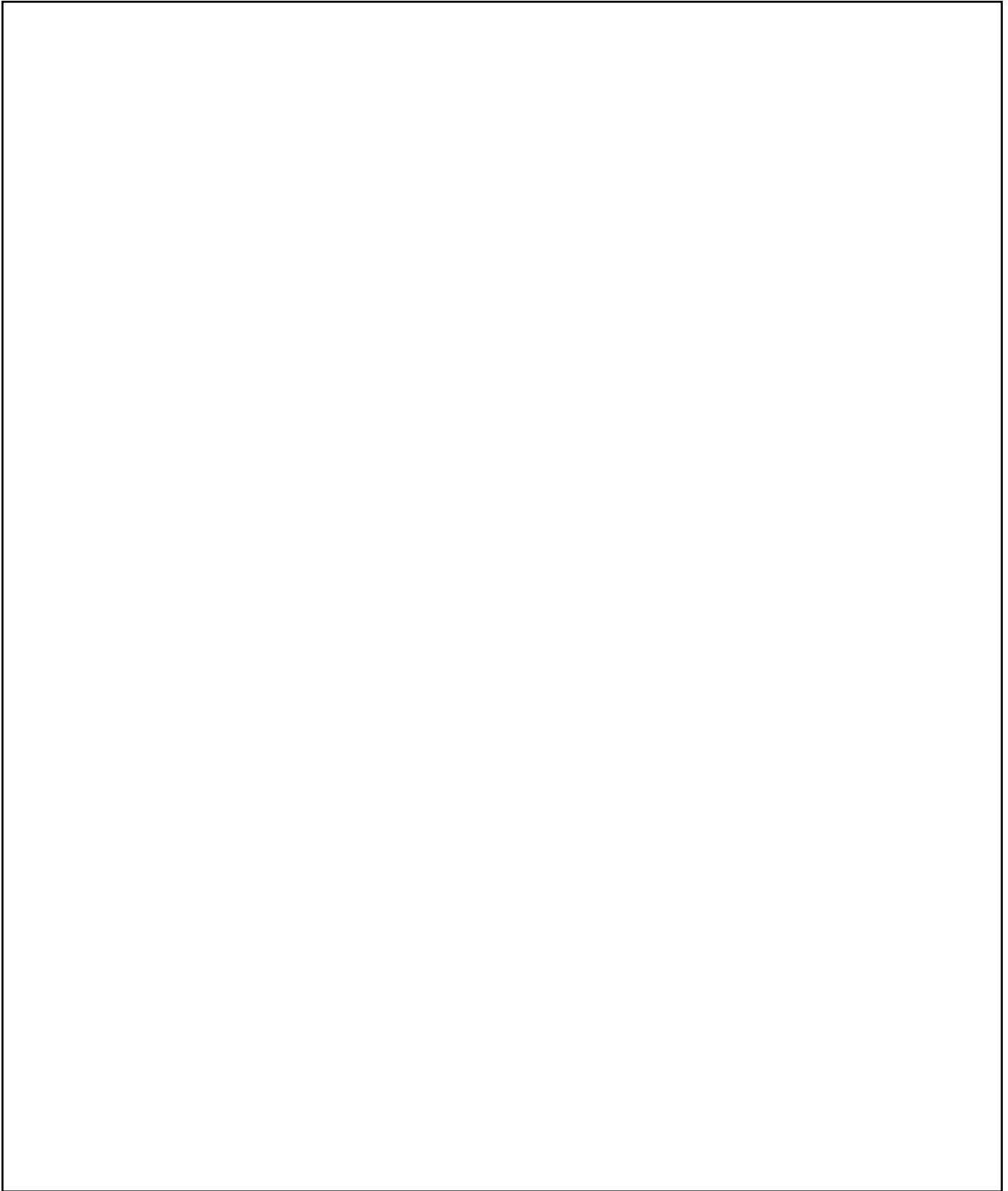
1. **Support and recognition:** It is very important for creators that the context they work in supports their need for autonomy, flexibility, and spontaneity. This support recognizes their lifestyle and gives meaning to their creativity.
2. **Available resources:** People do not create in a vacuum; nor do they create from nothing. Whether provided by the government, an institution, or the family, an available supply source is very important, especially one that can be readily drawn on when needed.
3. **Creative tension:** Tension stimulates creativity when disagreement ultimately becomes motivational and yields better ideas and outcomes. Differences and discrepancies can be more stimulating than sameness, harmony, and coherence.

4. **Trust-based security:** Trust occurs when we estimate that other people are well intentioned, reliable, and trustworthy. Humans use trust to promote interaction and accept risk in situations where they have only partial information. Their certainty that they know how events in their lives will roll out promotes a sense of safety. Trusting a person or even an idea creates a safe place for creative people to express themselves.
5. **Freedom of expression:** This term refers to the freedom of artists to produce art based on their own insight. In a climate of artistic freedom, creative people can craft a reality different from a concrete one by using some alterations, distortions, and constructions.
6. **Cooperation:** Cooperation is very significant for creative people. People may be more or less active in the process of cooperation. No matter what their level of involvement, it is crucial that they work together for the purpose of creative production. The same goes for support from a community that will recognize and support creative people for their cooperative efforts. It is a mutually beneficial action.
7. **Creative bonding:** This bonding might occur in a creative “what-if” context where people’s curiosity and spontaneity are stimulated. That social context offers permission to be different, tolerates confusion and paradoxes, and is optimal for creativity. Creators who are protected from the consequences of their mistakes develop the courage to change. Empowering them to take risks for the explicit purpose of the creative process would foster creativity. At the same time, in that context, it is clear that creators have responsibilities toward other people, themselves, and the earth.

Use the table below to track stimulating external influences. If you feel you are stimulated by any of them, rate its strength on a scale from 1 to 10, with 1 = not so stimulating to 10 = very stimulating. Then write down your strategy for remaining in a stimulating environment. For example, you may find that you work best in circumstances of creative tension with a lot of support and recognition. What can you do make these conditions the default state for your work? Evaluate your strategy after one week.

	Strength of the external factor influence (1–10)	Strategy for remaining in the stimulating environment	Efficiency (1–10)
Support and recognition			
Available resources with possible diversity			
Creative tension			

Draw a picture



Other creative projects you might want to try include:

- Sing a song. Improvise. You are creative!
- Find a medium-size box, big enough to hold various objects. Go around your home, garage, workshop, and collect odd objects that you would most likely get rid of. Put them in the box. It can be anything from a flat bicycle tire to outdated newspapers, from ticket stubs to broken pottery. Literally anything and everything. Take your time, but keep filling the box. Once the box is full, use these scraps of your existence and create a “self-portrait.” Use any technique or medium you desire. Do not strive for artistry; strive for expressing yourself.
- Find a place in your home where you could put a medium shelf. Go to an engraver and have them make you a plate titled “Museum of Me,” or you can print it yourself. Paste it onto the shelf. Now, be the curator! What would you put in your Museum of Me? Books, photos, mugs, ticket stubs, postcards, CDs, vinyl records, mix tapes, and so on. Start organizing your museum. Keep doing it. Change the exhibits as time passes by. Organize thematic exhibitions. Have a selection of items that are on permanent display. You are the only curator.
- Take your favorite novel, article, essay, or poem. Start copying it out word by word, comma by comma. When you are halfway through, stop. Put the source away and continue writing. Follow your own stream of consciousness.

The PTSD WORKBOOK

by Tijana Mandić, Ph.D.

Traumatic experience has become a more frequent and universal event rather than a rare and exceptional human experience. Almost every person suffers at least one mild to moderate trauma in his or her lifetime. No doubt this is partly because modern psychology has widened the scope of what is considered traumatic. There are many types of trauma and many ways of looking at them.

This workbook is, essentially, a guide to a journey. The traditional treatment for Post-Traumatic Stress Disorder involved teaching clients specific psychological skills to get rid of the symptoms. This is no longer the case. Insights from new research have shifted our focus from "getting rid of the symptoms" to teaching trauma victims to seek a path of resilience and to keep growing toward achieving their fullest potential. The worksheets in this book have been developed from years of research and clinical experience and are intended to help people find a happier and more fulfilling life, not just alleviate their symptoms.

The therapeutic tools include:

- Monitoring and Ranking Your Symptoms
- Identifying Your Hyperarousal Zone
- Identifying Your Resilience Zone
- Calming Techniques
- Understanding Hallucinations
- Reclaiming Your Life
- Identifying Your Memory Problems
- Monitoring Your Cravings
- Thinking Before You Act
- Finding Your Calm Heart
- Managing Your Intrusive Thoughts
- Understanding Your Emotions When You Are Upset
- Anger Management
- The Art of Talking and Listening
- Treatment for Depersonalization
- Rebuilding Your Inner Trust
- Post-Traumatic Growth Inventory
- Spiritual Awareness
- Discovering Creativity
- The Happiness Habit

About the Author:

Tijana Mandić, PhD, is a clinical psychologist with broad expertise in psychotherapy, including the psychology of creativity, psychology of communication, and peace psychology. She is the author of *Overcoming Creative Blocks* as well as academic books on change in therapy, gender identity, the psychology of communication, and psychological profiling. Dr. Mandić's main activities include teaching and providing consulting services to various artistic organizations, and she also has extensive experience in the world of business, especially leadership training and stimulating creativity in teams.

During the Balkan conflicts in the 1990's, Dr. Mandić worked with different refugee populations. She has worked with a wide variety of clients with PTSD, including clients affected by floods and political turmoil. Dr. Mandić is also known for her humanitarian projects commissioned by High Neighbor, Open Society Foundation, Save the Children Fund, International Organization for Migration, IRC, and many others.

About the Series:

The PTSD Workbook is part of a series of workbooks designed to give therapists and their clients easy access to practical evidenced-based psychotherapy tools. Each workbook represents a complete treatment program.

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