This is a chapter excerpt from Guilford Publications. Getting Unstuck from PTSD: Using Cognitive Processing Therapy to Guide Your Recovery. Patricia A. Resick, Shannon Wiltsey Stirman, and Stefanie T. LoSavio. Copyright © 2023. Purchase this book now: www.guilford.com/p/resick2

Overview of This Book

We're so glad you have found your way to this book and that you are interested in addressing your trauma.

This book is for you if you . . .

- ✓ Have experienced one or more traumatic events.
- ✓ Have been bothered by symptoms of PTSD, such as unwanted thoughts or memories of your trauma(s), strong emotional or physical reactions to reminders, or wanting to avoid thinking about the trauma memory.
- ✓ Are willing to face your traumatic experience(s) so you can move toward recovery.
- ✓ Are willing to make it a priority to spend time practicing the skills you learn.

This book will walk you through a comprehensive approach to overcome your trauma and get back to living the life you want to lead. It's not necessary to have a formal diagnosis of PTSD to use this book. In the next chapter, you'll complete a questionnaire to self-assess your PTSD symptoms.

This book contains all the worksheets and tools you'll need to recover from your traumatic experiences. By working on the trauma a little each day, you can make progress toward taking back your life. Some people complete this program in a few weeks, and some take up to several months. It all depends on your own pacing. When people undergo trauma-focused treatments with therapists, though, research has shown that working consistently over a shorter period of time (two to three months) can lead to better results than spreading it out over a longer period of time.

Working on your trauma won't make the memory go away, but it will reduce its hold on you so you can begin to move forward. Instead of being blindsided by the trauma memory when you least expect it, you might be able to think about it when you want to without all the strong negative emotions and the sense that the traumatic event is happening all over again. That means that you can get back to living your life in the here-and-now, without your trauma(s) impairing your relationships or your ability to achieve your goals.

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What Is Cognitive Processing Therapy? ~~

This book is based on cognitive processing therapy (CPT), which is one of the most effective therapies for PTSD. CPT is an approach that helps people get unstuck from their PTSD and move toward recovery. The goals of CPT are to improve your PTSD and related symptoms, such as depression, anxiety, guilt, and shame. It also aims to improve your day-today functioning. CPT helps you figure out where you got stuck in your recovery from the trauma (such as unfairly blaming yourself for what happened or not preventing it) and helps you get unstuck by examining the facts of the trauma so that you can make sense of your experience and recover.

CPT is effective. Many research studies have demonstrated that CPT works for people who have experienced a variety of different forms of trauma. These studies have taken place in community treatment settings, military and veteran hospitals, and in many countries. Most people who have completed CPT have had noticeable reductions in symptoms of PTSD, as well as other problems, such as depression, suicidal thoughts, hopelessness, anger, guilt, and substance use. (See the box below for details.)

Evidence for CPT

Over the decades that CPT has been developed and refined, numerous researchers and therapists have collected data to make sure it works. It has been studied in rigorous clinical trials, where it has been compared to other effective treatments, with steps in place to make sure that the effect of treatment was real and due to the treatment itself, and that the results wouldn't be biased. The first large study of CPT compared CPT to prolonged exposure, another trauma-focused treatment that had been shown to be very effective for PTSD. One hundred seventy-one women who had been raped (and most had experienced other traumas as well) began CPT or prolonged exposure. The women did equally well in both treatments, except that the women who participated in CPT reported experiencing less guilt after treatment and lower suicidal ideation. A long-term follow-up five to ten years after the posttreatment assessment found that the improvements were maintained over long periods of time. Later studies showed that some different variations of CPT (like group treatment, treatment that didn't include a written account of the trauma, and versions for people who couldn't read or write) were also very effective. Since the early studies that showed that CPT was effective, there have been almost forty carefully controlled studies comparing CPT to other therapies and continuing to show that CPT reduces PTSD and other issues like depression, suicidal thoughts, and anger. There have also been many studies that have examined predictors of treatment outcome and tests of the treatment in various therapy settings, with people who experienced different types of trauma, and in other countries and cultures. If you want to read publications of studies about CPT, a number of them are located on the CPT website (*http://cptforptsd.com*) under "Resources."

CPT works even for people who have a complex trauma history and symptoms beyond PTSD. For example, many people with PTSD also have depression or substance use issues. Research has shown that even people with additional problems like these benefit from CPT. CPT was originally developed to help rape survivors in the late 1980s, but it was quickly tested with people who have experienced a range of traumatic events, including incarcerated adolescents, women who had been sexually abused in childhood, refugees, military veterans, and many others. Most often people have more than one traumatic event in their life, and the research on CPT over the past thirty-plus years has shown that CPT works for people even if they have complex trauma histories and a complex set of symptoms. In other words, CPT was developed and tested with all types of people, and very possibly with people who struggle with some of the same issues that you struggle with.

CPT is a **time-limited**, **recovery-focused** approach, which means that it's not intended to go on for years and years. Instead, positive changes can often be seen in just a few weeks. This may be hard to believe if you've been suffering from PTSD for a long time, but if you stick with it and engage fully with the activities, working at it a little each day, you'll have the opportunity to see for yourself how it works.

CPT is **trauma focused**. That means that most of the time the focus is on your traumatic experiences and their impact on you. This is because trauma-focused treatments are the most effective treatments available for people with PTSD. Whereas you may have something stressful going on in your life that is at the top of your mind, focusing on day-to-day events won't treat your underlying PTSD. On the other hand, if you address your PTSD by working on the trauma, you're likely to see improvements in your day-to-day functioning. You'll also see that many of the skills and tools you learn in CPT can help you with everyday issues as well.

Why We Wrote This Book

We are psychologists with many years of experience working with people who have endured traumatic events and who suffer from PTSD. Patricia Resick originally developed CPT over thirty years ago and has trained thousands of therapists, including Shannon Wiltsey Stirman and Stefanie LoSavio, to use CPT with our clients. Now we all train students and therapists to use CPT in their clinical practice, and we have consulted on thousands of cases. However, there are still places where it is very difficult, if not impossible, to find a therapist who has been trained in CPT. We also recognize that factors like costs/lack of insurance and difficulty getting time away from work, school, or caregiving responsibilities make it hard to get to therapy on a regular basis. Other people may worry that their friends, families, or employers may not be supportive of their receiving therapy, and they feel a need to keep their PTSD to themselves. We believe that everyone should have access to tools that can help them. We wrote this book so that people who can't do CPT with a trained therapist can still have the opportunity to use CPT tools to support their recovery. It's courageous to decide to work on your PTSD, and we sincerely hope that you'll find this book helpful.

CPT has been tested and shown to be effective when delivered with a therapist in person or over the computer (such as via Zoom), and we even have evidence that it can work through a texting format. It has not been formally tested as of yet as a self-help book. However, studies have shown that self-help for PTSD can be beneficial, and we have included the same skills and organized this book as you might complete it with a therapist. We have also included a lot of extra guidance so that you can complete the exercises on your own. It is our hope that people will be able to use this book to get benefits similar to those from doing CPT with a therapist.

That said, if you get stuck, help is available. If, while using this book, you decide you could benefit from the assistance of a therapist, there are thousands of therapists who have been trained in CPT through the U.S. Department of Veterans Affairs (VA) or in the community. If you are a U.S. veteran, you can contact your local VA or Vet Center to see if you qualify for services and can ask for a CPT-trained therapist. If you are looking for someone in the community and have access to the Internet, you can go online to *http://cptforptsd.com* and click on "CPT Provider Roster." You can search by country, state, city, or zip code. If engaging in therapy by computer (Zoom or some other format), you can search for anyone who is licensed in your state. If you want to see them in person, you will need to search for someone nearby. Don't give up if the person you contact is fully booked or charges more than you can afford. That person may have a suggestion for you, and some providers or agencies have sliding fee scales or take insurance or Medicaid.

Remembering traumatic events you have experienced is not easy. So, why would anyone want to think about their traumatic experience(s)? The premise of CPT is that sometimes people get *stuck* in PTSD but that it's possible to get *unstuck* and recover from the effects of trauma. As you'll read later, people get stuck in PTSD when a traumatic experience has not been fully processed, and so the symptoms keep popping up in their life today. So, to address the ongoing symptoms, it's helpful to figure out where you got stuck in your recovery from the event and face the trauma so that it no longer has a hold on you and your life.

Getting Unstuck

In the past, you may have thought about the trauma without feeling any sense of resolution, or feeling like you were not making any progress in recovering. This book will guide you step-by-step through concepts and strategies to address your traumatic experiences in a way that can help you process what you have been through and move toward recovery. If you're willing to put in the work, the tools in this book can help you figure out where you have gotten stuck and how to move forward.

Getting unstuck means doing the opposite of what you may have been doing in the past: trying to ignore the memory of the event or avoiding the triggers that bring up the memories. While those strategies might seem to work in the short run, in the long run you've probably found that they keep you stuck. Instead we'll ask you to think about what you have been saying to yourself about the traumatic events and to examine your automatic thoughts to see if they are factually correct and if they are really helping you in your recovery. When you change what you are saying to yourself to be more balanced and factual, your emotions will change and you'll be able to move forward in your recovery. You may find yourself feeling other emotions that are universal after a trauma and flow naturally from the event (like sadness or disgust), but unlike the feelings you have when you are stuck in your recovery, these feelings will run their course fairly quickly and eventually subside.

Reynaldo had been experiencing PTSD symptoms since one of his friends was shot and killed when he was a young adult. He was supposed to be with his friend that night, but had gotten called into work. After it happened, people asked why he hadn't tried to stop his friend from going to such a dangerous part of town, and Reynaldo felt a lot of guilt. His parents told him not to dwell on what had happened. When he tried to talk with his sister about his feelings after the funeral, she reacted angrily and told him it was time to move on. Reynaldo started to try to push the thoughts and feelings away. He avoided places where he had spent time with friends. When the memories were hard to control, he would drink or smoke marijuana to try to get rid of them. But they kept coming up, even a few years after the event. Mostly, when he thought of what happened, he felt guilty, ashamed, and angry at himself. These feelings didn't go away on their own.

Reynaldo began CPT and started to face his trauma. He did the CPT exercises when he noticed thoughts that were keeping him stuck, including identifying and examining some of the thoughts that had been making him feel guilty, like thinking "I should have been there" or "I could have prevented it." Reynaldo started looking at the evidence for these beliefs and considered whether these thoughts were realistic. As his guilt and anger at himself decreased, he noticed that he was starting to feel grief and anger at the person who had shot his friend, which made sense. At first, the emotions were pretty strong. Reynaldo would let himself cry when he felt sad, but sometimes, such as when he was at work when they came up, he would acknowledge the sadness, take a break and listen to some music, and then get back to work. Soon he noticed that the feelings of grief and sadness were less intense, and he began to also have some happy memories of his friend. The memory of the trauma was still there, but it didn't have the same power over him that it once had.

We're so glad you have found your way to this book. In the next chapter, you will learn more about how you may have gotten stuck in PTSD and how to get unstuck using the tools in this book.

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