

Contents

I. WHAT DO WE KNOW ABOUT PTSD FOLLOWING ASSAULT?	
1. The Clinical Picture: A Rape Victim and Her Father Tell Their Stories	3
The Father's Reaction to Learning of the Rape / 3	
Sarah's Disclosure to Her Family / 4	
The Father's Response to Sarah's Disclosure / 4	
Sarah's Description of the Rape / 5	
The Father's Continuing Reactions / 6	
Authors' Conclusion / 7	
2. Diagnosis and Prevalence of PTSD Following Assault	8
PTSD According to DSM-IV / 8	
Validity of the Three PTSD Symptom Clusters / 10	
Similarities and Differences between PTSD and Other Anxiety Disorders / 11	
The Symptom Picture of PTSD / 13	
Prevalence Studies / 13	
Acute and Chronic PTSD / 20	
Acute Stress Disorder: A New DSM Category / 21	
The Relationship between Acute Stress Reactions and PTSD / 21	
Dissociation, Numbing, and PTSD / 24	
Conclusion / 25	
3. Other Common Responses to Assault	27
Affective Reactions / 27	
Psychophysiological Reactions / 31	
Conclusion / 35	

4.	What Do We Know about Treatment Efficacy for PTSD?	36
	Interventions Shortly After the Trauma / 36	
	Traditional Psychosocial Interventions / 38	
	Pharmacological Interventions / 43	
	Cognitive-Behavioral Interventions / 51	
5.	Theoretical Bases for PTSD and Its Treatment	68
	Theoretical Underpinnings of Cognitive-Behavioral Therapies for Anxiety Disorders / 68	
	Personality and Social Psychology Theories / 70	
	Emotional Processing Theory / 72	
	How Do Cognitive-Behavioral Techniques Ameliorate PTSD? / 84	
II.	HOW TO CONDUCT EFFECTIVE TREATMENT OF PTSD	
6.	An Overview of Cognitive-Behavioral Techniques and Programs for PTSD	91
	An Overview of Treatment Planning Options / 91	
	A Typical Treatment Program / 92	
	Suggested Treatment Schedules / 96	
7.	Assessment of PTSD and Related Problems	110
	Goals for Assessment / 110	
	Methods of Assessment / 112	
	Problems in Assessment / 118	
	Conclusion / 120	
8.	The Beginning of Treatment	121
	Session 1 / 121	
	Session 2 of Treatment / 127	
9.	<i>In Vivo</i> Exposure: Confronting the Feared Situations	144
	Presenting the Rationale for <i>In Vivo</i> Exposure / 145	
	Explaining Habituation / 145	
	Introduction to SUDs / 147	
	Constructing a Hierarchy of Avoided Situations / 147	
	Developing <i>In Vivo</i> Homework Assignments / 153	
	Instructing the Client about the <i>In Vivo</i> Exposure Procedure / 155	
	Using <i>In Vivo</i> Exposure in Sessions / 156	

Contents	xvii
10. Imaginal Exposure: Reliving the Trauma	158
Presenting the Rationale for Imaginal Exposure / 159	
The Imaginal Exposure Procedure / 161	
Additional Guidelines and Suggestions / 165	
Case Illustrations / 168	
Vicarious Traumatization of the Therapist / 174	
11. Cognitive Techniques I: Cognitive Restructuring	176
Theoretical Bases for Cognitive Restructuring / 176	
Presenting the Rationale for Cognitive Restructuring / 181	
Identifying “Trigger” Situations, Emotions, and Negative Thoughts or Beliefs / 184	
Challenging and Modifying Negative Thoughts or Beliefs / 187	
Identifying and Challenging Dysfunctional (Unhelpful) Assumptions / 192	
12. Cognitive Techniques II: Thought Stopping and Guided Self-Dialogue	198
Thought Stopping / 198	
Guided Self-Dialogue / 202	
13. Relaxation Training: Deep Muscle, Cue-Controlled, and Differential Relaxation	208
Deep Muscle Relaxation / 209	
Cue-Controlled Relaxation / 214	
Differential Relaxation / 215	
Practice and Homework / 216	
14. Role Play and Covert Modeling	217
Role Play / 217	
Covert Modeling / 223	
15. Common Problems, Termination, and a Full Case Example	227
Common Problems and Complications / 227	
Determining Whether the Client Needs More Sessions / 231	
Termination / 232	
Case Example: Betsy / 236	

Appendix: Assault Information and History Interview (AIHI)	249
References	261
Index	277