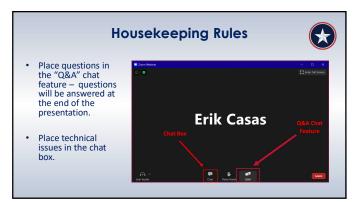


The Role of Emotions: Reducing Posttraumatic Emotional Numbing Using CPT and PE

VANESSA JACOBY, PHD, ABPP The University of Texas Health Science Center at San Antonio San Antonio, Texas





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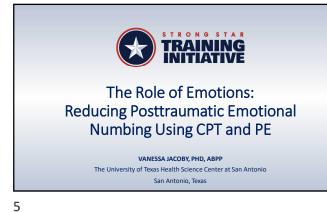
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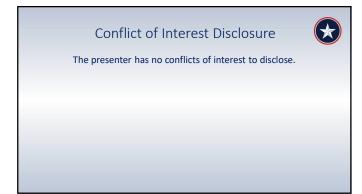
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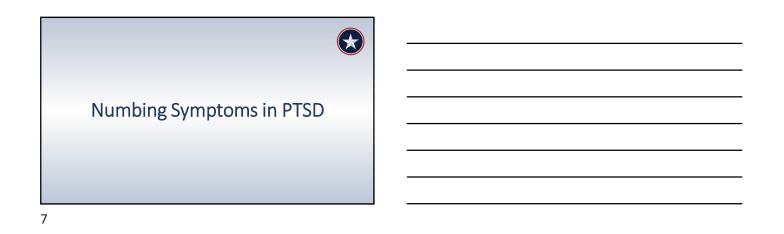
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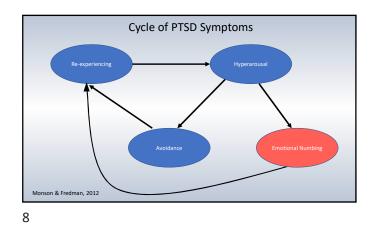
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Emotional Numbin	g Symptoms in PTSD
Symptom	Example
Anhedonia	 Being uninterested in riding motorcycles or playing with one's children when this is something he/she use to enjoy.
Detachment or estrangement	 Feeling like no one in his/her family or unit understands them and their experiences.
Inability to experience positive emotions	 Not feeling joy when his/her child makes an achievement or he/she receives a promotion.



 Cultural Impact: Stoicism

 Self-control

 Intention =

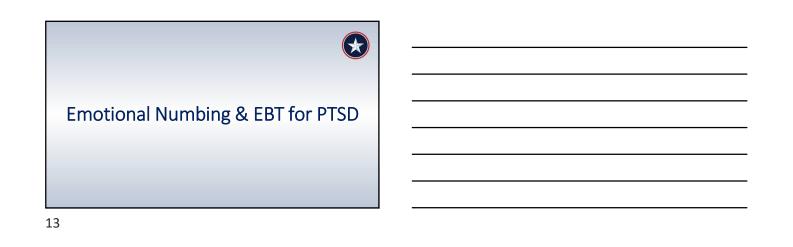
 Intention =

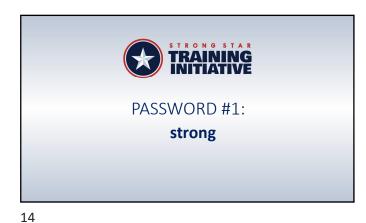
 Intention =

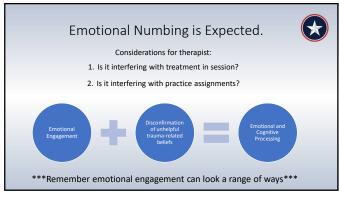
 Excerpts from NCO Creed: "No one is more professional than I...and will at all times conduct myself so as to bring credit upon the Corps, the military service and my country regardless of the situation in which I find myself...Competence is my watchword. My two basic responsibilities will always be uppermost in my mind—accomplishment of my mission and the welfare of my Soldiers..."

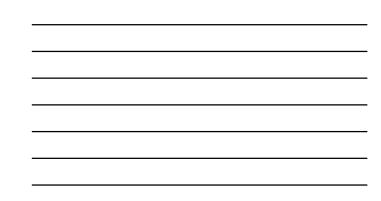






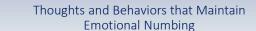






Consequences of Emotional Numbing				
	Maintains unhelpful beliefs	Maintains psychosocial		
Unwillingness to acknowledge/feel	Maintains unneiptul beliets	problem in:		
helplessness related to the trauma	about control of the event and control in the world now	Relationships at home and work due to over control of others		
Anxiety related to treatment assignments	that one cannot tolerate these feelings	Any activity that leads to anxiety (trauma related or naturally anxiety provoking experiences)		
Sadness about the death/loss	That sadness will last forever	Intimacy or letting one get close to others		
Anger about real injustice during trauma	That one cannot control themselves/will harm others if angry	Relationships at home and work by avoiding any interaction that may involve conflict or		

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Thoughts

- "feeling emotions is weakness or of no value."
- "I have to maintain my composure at all times."
- "I can't feel close to others because I can lose them."
- Behaviors Avoiding emotional conversations Avoidance of trauma reminders
- "white knuckling" behavior
- Pervasive distraction when emotions emerge
- Substance use

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"white knuckling it" •

- speeding through an exposure or worksheet that elicits emotion
 checking the time to see when session is over
- Being in-authentically agreeable while working on stuck points
- Talking about the trauma like a reporter, with disinterest, or with feigned acceptance despite continued high PCL score
 Either during Imaginal Exposure or when discussing trauma-related stuck points
 - points
- Persistent numbing symptoms on PCL-5

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Interventions to Address **Emotional Numbing**

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Psychoeducation About Emotions



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- Acknowledging military, cultural, and gender norms around stoicism
- . Highlight the protective function of emotions. Value of both positive and negative emotions in helping people to learn and make sense of themselves, the world, and other people Emotional expression is the "glue" of close relationships (Monson & Fredman, 2012)
- Highlight the function of posttraumatic numbing and emotional avoidance
 Challenges to identify emotions at the time of the trauma because they were focused on the mission at hand and acted accordingly
 Ongoing challenges Brain trying to keep you safe. But it is confusing *feeling negative emotions* with being in danger.
 Can make one *feel* more powerful, strong, untouchable. But it is a trick that may keep you from living the life you want to live.

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CPT Interventions for Emotional Numbing Challenging Beliefs Work Identify Stuck Points related to the emotional avoidance and challenge them using Challenging Beliefs Worksheets If allow myself to feel ____ __, then _____ will happen. • If I feel _____, than it means I am _____

Possible Socratic Questions

- Where does this thought come from? (e.g., childhood? Military training?)
- Is there a certain context for when this emotion is helpful vs. unhelpful?
- Is there a difference between emotion regulation and emotional over-control/numbing?

When an alternative thought is identified: "What would someone who believed that thought be doing differently than you are doing now?" Encourage "behavioral experiment" while practicing the new thought. Calling or texting a friend, Trying out a new restaurant that family wants to try, Visiting loved one's grave site or looking at pictures of them, Having a conversation with a spouse about something that has been bothering them, Telling someone "I love you" .

PE Interventions for Emotional Numbing In-Vivo Exposure

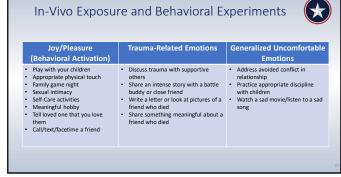


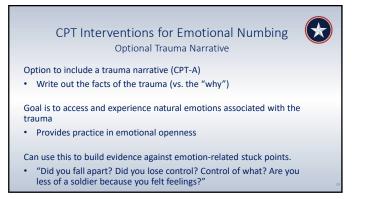
Use the in-vivo hierarchy as a way to experiment with approaching feared emotions, noticing positive emotions, and practicing emotional expression. Add to hierarchy at any point in treatment.

- Encourage patients to notice their emotions at different levels of intensity. • Discuss how to notice emotions (mindfulness) – being present, noticing what happens in the body
- In reviewing practice, ask about the feared outcomes related to emotional vulnerability "Did you fall apart? Did you lose control? Did it last forever?

Task is for patients to repeat this exposure with the goal of rebuilding emotional engagement

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PE Interventions for Emotional Numbing Imaginal Exposure



Focus on sensory details

- Encourage use of emotion words. This may be emotional expression
 experienced during or after the event May do exposure of roll call, memorial service, talking to family

- Discuss vulnerability in processing.
 How does not allowing yourself to express more "vulnerable" emotions impact the meaning your are making the trauma? (often themes of power/control)
 How is this pattern negatively impacting your life now?
- Ask about the feared outcomes related to emotional vulnerability.

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- Addressing Racial Trauma through Cognitive Processing Therapy and Prolonged Exposure Therapy
- Presented by Brittany N. Hall-Clark, Ph.D., Assistant Professor within the Department of Psychiatry and Behavioral Sciences at The University of Texas Health Science Center at San Antonio
- When: Thursday, February 10 at 1pm CST/ 2pm EST



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