

CBT with PTSD

A sudden traumatic event can devastate a person’s life, so we need to be able to do everything possible to mitigate its effect.

A 3-day course for 6-15 people (2-day version also available).

Executive Summary:

Post-Traumatic Stress Disorder is an interesting, complex, and often devastating syndrome which may affect people who have been through a major traumatic event. It causes significant distress / impairment in social, occupational or other areas, and persists for a long time, sometimes a whole lifetime.

The person may re-experience the event, by images, thoughts, or dreams. They may have intense distress and reactivity to cues that symbolise the traumatic event. They may avoid stimuli associated with the trauma, and be unable to recall important aspects of it. Loss of interest in previously important activities is common. They may feel detached from others and be unable to have loving feelings. They may be unable to see a future for themselves, have difficulty falling or staying asleep, be irritable and have outbursts of anger, have difficulty concentrating, be ‘always on the lookout for another disaster’, and be very easily and exaggeratedly startled. It is therefore unsurprising that this is a very distressing condition both for the sufferer and those around him or her.

What this course will do for you:

- You will know about PTSD: the symptoms, how it affects people, the theory underlying it, and the models proposed to explain and remedy it.
- You will become familiar with the techniques for addressing the symptoms of PTSD and how to ameliorate them.
- You will know what to do for those people who are resistant to treatments that are aimed at restoring them to their pre-trauma state.

The course covers:

- What is Post Traumatic Stress Disorder? PTSD is a very specific condition, defined most clearly by the DSM.
- The influence of different parts of the brain, and their interaction with one another.
- How previous core beliefs may be erased and new ones established, and the effect this has.
- Cognitive deficits resulting from PTSD.
- What can we realistically hope to achieve in treating PTSD?

- Assessment and the first session or two.
- Normalisation. Boosting feelings of self-efficacy. The tools we use for normalisation: micro-validation and psycho-education.
- Appropriate changes in lifestyle to minimise short term distress.
- Cognitive restructuring: Identifying Hot ‘traumatic’ Thoughts, and cooling them down.
- Problem Solving. Those who have been through trauma often have new problems to resolve.
- Mindfulness. Mindfulness can provide a calm place from which to observe turmoil and from that place you can decide on how you want to respond to it.
- Neutralising Distress. Passive Distress Tolerance, and the Active Neutralising of Distress.
- Biological Interventions: illnesses; routine; exercise; diet; harmful substances; a good sleep pattern; relaxation.
- Social Support. The 3 types of social support available.
- The Glossary of PTSD-relevant techniques.
- Information sheets to work through with patients, and to give them.
- Case studies and interactive presentations.
- Measurement of progress, using subjective and objective methods.

Delegates’ Feedback

Average presentation rating: **90%**



Average relevance rating: **96%**



Written Feedback:

“Very enjoyable and informative two day course. The tutors created a relaxed atmosphere which greatly facilitated learning.”

To discuss or place an order call **0116 241 8331** or email **office@apt.ac**

Over 100,000 professionals have benefitted from attending APT courses; APT tutors are a resource of academic and clinical expertise probably unequalled in the UK.

APT, The Dower House, Thurnby, Leicestershire, LE7 9PH | Tel: 0116 241 8331 | Email: office@apt.ac | Web: www.apt.ac