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SESSION TOOLS

- Handout 2.1:** Post-traumatic Reactions, Re-Experiencing, Hyper-Arousal
- Handout 2.2:** Post-traumatic Reactions, Avoidance/Numbing of Responsiveness
- Handout 2.3:** Grief Reactions
- Handout 2.4:** Trauma Goal Worksheet
- Handout 2.5:** Monitoring Changes in My Mood/Feelings

HANDOUT 2.1

Post-Traumatic Reactions, Re-Experiencing, Hyper-Arousal

Re-Experiencing

- Have upsetting memories of what happened come into your mind when you don't want them to.
- Have nightmares about what happened.
- Become upset or agitated when something reminds you of what happened.

Hyper-Arousal

- Feel irritable or on edge much of the time.
- Get angry easily.
- Find it hard to pay attention in school, concentrate on homework, or remember things that you have read.
- Have trouble sleeping.
- Startle easily.

HANDOUT 2.2

Post-Traumatic Reactions,

Avoidance/Numbing of Responsiveness

Avoidance/Numbing of Responsiveness

- Avoid people, places, or situations that remind you of what happened.
- Feel emotionally 'flat', like you are trying to avoid having any feelings at all.
- Feel distant from friends and family and find it difficult to trust anyone.
- Feel different from other people, like no one really understands you.

Grief Reactions

Grief Reactions

- Feeling sad whenever you are reminded that they are gone and not in your life anymore.
- Feel angry at the way they died. Lose faith in the people who are supposed to keep us safe.
- Feel regret about things you did or didn't do.
- Feel depressed and hopeless.
- Wonder why you are alive and not them.
- Find it difficult to think about your friend because thoughts or images of how he/she died pop into my mind.

Trauma Goal Worksheet

By the end of this intervention:

I want to feel LESS: *(please circle all that apply)*

Nervous

Scared

Angry

Upset

Sad

I want to feel MORE: *(please circle all that apply)*

Happy

Calm

Excited

Relaxed

I want to change the way I do things and think about things: *(please check ✓ all that apply)*

- Calm myself down when I feel upset.
- Think about things that happened without feeling upset.
- Talk about things that happened without feeling upset.
- Stop avoiding things that made me nervous.
- Do more of the things that I used to do.
- Think more about things before I do them.
- Make better decisions.
- Have fewer problems with my family.
- Have fewer problems with my friends.

I also want to change:

Parent's Section

What would you like to see changed in your child by the end of the intervention?

HANDOUT 2.5

Monitoring Changes in My Mood/Feelings

DIRECTIONS

Pick up to three occasions this week in which you notice a downward shift in your mood - that is, situations in which you start to feel worse.

Be especially alert for strong feelings such as sadness, anxiety or fear, guilt, or anger. All of these may be signs that you may be having a reaction related to your trauma or loss experience.

*For each occasion, write a brief description of what was happening in the physical situation **OUTSIDE** of you. Then, describe one or two emotions that you felt most strongly. Rate each emotion on a "thermometer" from 0 - 10.*

SITUATION 1

What is happening OUTSIDE of you?

What is happening INSIDE of you?

Emotion #1
(What are you feeling?)

Intensity
(How strong is the feeling?)

1	2	3	4	5	6	7	8	9	10
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Emotion #2
(What are you feeling?)

Intensity
(How strong is the feeling?)

1	2	3	4	5	6	7	8	9	10
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SITUATION 2

What is happening OUTSIDE of you?

What is happening INSIDE of you?

Emotion #1
(What are you feeling?)

Intensity
(How strong is the feeling?)

1	2	3	4	5	6	7	8	9	10
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Emotion #2
(What are you feeling?)

Intensity
(How strong is the feeling?)

1	2	3	4	5	6	7	8	9	10
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SITUATION 3

What is happening OUTSIDE of you?

What is happening INSIDE of you?

Emotion #1 <i>(What are you feeling?)</i>										
Intensity <i>(How strong is the feeling?)</i>	1	2	3	4	5	6	7	8	9	10
Emotion #2 <i>(What are you feeling?)</i>										
Intensity <i>(How strong is the feeling?)</i>	1	2	3	4	5	6	7	8	9	10