

SESSION 1 (new)

T: Ok, Camille, thank you for talking with me about what is bringing you in for treatment at this time, and for clarifying a few things about traumatic experiences you have had.

C: Yeah, it's not easy, but it hasn't been too bad.

T: That's good. I could tell that it was really difficult to accept the fact that you have PTSD, but I want you to know that there is some good news.

[C looks quizzically at the therapist.]

T: The good news is that this therapy, STAIR, was developed specifically for people who have experienced trauma and are struggling with the same types of things you are. As you can see on the handout, STAIR stands for "Skills Training in Affective and Interpersonal Regulation."

C: Ok, but what does that mean?

T: That means that the focus is on teaching you skills for how to deal with feelings and how to deal with relationships. This is because we have learned that these are the two areas that are particularly affected by trauma. Does that strike a chord with you?

[C becomes more animated in her expression and in her chair]

C: Heck yeah! I'm either a basket case or completely numb. And relationships! Forget about it.

T: Yes, I think that this therapy is a great fit for you. It will help to address your PTSD symptoms, problems with dealing with emotions, and difficulties with relationships. I want you to know that STAIR has been used with hundreds of individuals coming in for treatment with similar problems as the ones you described, and it has been found to be effective. STAIR is different from other types of trauma-focused treatments in that first we are going to work on the problems that brought you here in the first place—your emotions and your interpersonal life.

C: It's so embarrassing—I feel like I can't do basic things—go for a job interview, ask my landlord to fix my sink, not to mention having a healthy relationship...because I don't know how AND my feelings always seem to get in the way.

T: You know Camille, a lot of people who have experienced trauma say similar things, and that is why STAIR was developed specifically to address these two key areas.

T: Let me tell you now about how this treatment is going to work and what it will look like.

C: Ok.

T: We are going to meet once a week for 45-minute sessions. Does this time work for you each week?

C: Yes, this will work.

C: Oh wait, I am going out of town in three weeks, and so I won't be able to come in then.

T: That's ok. Thanks for telling me about that. You know what—telling me that shows me that you are committed to this and that you are going to do your very best to attend our appointments regularly. That's going to make our treatment together more likely to be successful! Other than the time you already told me about, in general we are agreeing to meet each week at this same time. Sound good?

[smiling]

C: Agreed!

T: Perfect! Now, I want to tell you some other things about STAIR. The S and T stand for Skills Training, and what that means is that this is a very active therapy, different from what you might assume therapy is like. What I mean is that at each session, we will set an agenda of what we're going to cover in the session. And each session has its own "lesson" or topic that I'll want to present to you. What do you think?

C: Sounds kind of like school.

T: Well, the goal of this therapy, as with any kind of cognitive behavior therapy, is to teach you how to be your own therapist. But, you ALWAYS have a say in what we talk about. We can add more sessions if we need to, and we have flexibility about the pace and timing of what we do.

C: I like that. One day I'll be my own therapist.

[C and T smile at each other.]

T: Exactly.

T: The other thing that is important to know is that I may ask you to do some between-session assignments, such as monitoring your mood, and bring in the assignments for us to talk about. What do you think of that?

C: I think I can do that. I like writing things down anyway. But what if I forget it or don't have time to do it?

T: I am going to ask you to do your best to try to practice the assignment and see how it goes. Research shows that people get more out of treatment when they do between-session work, and I have found that to be the case with clients I've worked with as well. But, I understand that sometimes things get in the way, and if that happens, we'll just work on it together.

C: Ok, sounds fair.

[C listens attentively.]

T: Now, let me tell you about the most important part—what this therapy is going to focus on. The A, I, and R are for Affective and Interpersonal Regulation. What this means is that the treatment has two main goals. The first goal is to help you experience your feelings without being overwhelmed by developing healthy emotion regulation skills. The second goal is to help you improve your interpersonal skills by using personal goals, rather than feelings to guide what you do.

T: In general, the first four sessions are devoted to working with emotions and the second four sessions are devoted to working on interpersonal skills, for a total of eight sessions. Although remember we have flexibility in the number of sessions, and we will decide together how many sessions we need. We'll be working as a team the whole way.

[T gives C the handout-introduction and rationale for treatment.]

T: Here is a handout that describes in detail everything we just talked about, so you can read it before next session and definitely let me know if you have any questions.

C: Ok, I guess this is my first homework assignment (laughs)!

T: (Laughs) you could say that!

T: But really, how are you feeling about doing this therapy with me?

C: Well, I can tell it's going to be a lot of work. But I kind of like that, because I feel like finally I'm going to be doing something that is really going to help me. I feel like you understand what I really need.