

Checklist for Session 5: Targeting Nightmares Part 3

- Review Sleep Diary and Nightmare Log and Changes to Sleep Habits (5 minutes)**
- Develop New Sleep Plan (5 minutes)**
- Nightmare Review (30 minutes)**
 - Option 1: Rescript Original Nightmare
 - Option 2: Work on Another Nightmare
- Relaxation (5 minutes)**
- Assign Home Practice (5 minutes)**
 - Follow your “New Sleep Plan.”
 - Complete the Sleep Diary and Nightmare Log.
 - Review session information in the patient packet and bring any questions to the next session.
 - Practice the relaxation exercise at least two times per day, with one of these times near bedtime, and record your practice on the Sleep Diary and Nightmare Log. Imagine your new dream in as much detail as you can for about ten minutes each night, followed by relaxation exercise. Record your practice on the Sleep Diary and Nightmare Log.

Session 5: Targeting Nightmares, Part 3, and Sleep Hygiene

I hope you found the information and skills in the last session useful. Today, we'll review your Sleep Diary and Nightmare Log and change your sleep routine as needed. Then we will review your progress working with your new dream. We may begin work on a different nightmare.

REVIEW SLEEP DIARY AND NIGHTMARE LOG AND DISCUSS CHANGES TO SLEEP HABITS

Let's take a look at your Sleep Diary and Nightmare Log and see how you did this week.

- How did it go following each step of the sleep plan since last session?
- Did you notice any changes in your nightmares or sleep?
- What were the major challenges you faced?

Develop New Sleep Plan (5 minutes)

- Let's update your "New Sleep Plan"
- Are there any habits that you feel are pretty natural to you now? The more you practice the new habits, the more natural they will become.
- What new habit or habits would you like to add to your sleep plan? Let's work on those habits that are the most likely to have the biggest impact on your sleep.



Troubleshoot and Encourage as Necessary (This section is repeated from prior session)

- Review Healthy Sleep Habit rationales as needed.
- Poor sleep habits may include avoiding thinking about the trauma or nightmares. This may make it more difficult to change these types of habits.
 - Formal or informal cognitive restructuring techniques may be used to assist the patient in identifying thoughts to help them engage in changing some habits.
 - Recognizing the motivation behind unhelpful habits can inform you how you might proceed. Are the patient's symptoms leading them to feel overwhelmed with making changes? Is avoidance leading to difficulties making changes?
 - Using a more gradual approach by changing one or two habits at a time, using a hierarchy instead of changing a lot of habits all at once, or making changes to a specific habit gradually may be indicated (See Session 1 Troubleshooting section "Setting Patients Up for Success in Changing Sleep Habits for more details").
- Help the patient recruit support from others as needed. For example, encourage the patient to have their bed partner review the material or even join session to understand why these changes to sleep are important for the patient. Alternatively, consider role-playing the discussion they can have with their bed partner at home. Teaching others the guidelines will reinforce learning.
- Remind them:
 - It is common for people to experience some trouble staying on track throughout treatment. How they handle this can make all the difference between getting the most out of the treatment and dropping out.

- Instead of feeling guilt, self-blame, or thinking there is no use in continuing to work on the treatment, it can be helpful to focus on any progress made so far and to set realistic goals.
- A slip is just a mistake and not a sign of weakness. People often have such slips, and most learn from them and succeed in the long run.
- It can be helpful to think about what got them off track and how to help prevent similar problems next time.
- It can be helpful to push oneself to practice even when one does not really feel up for it. If it's not the best effort, that's okay. At least practice will be in gear rather than staying stuck in neutral.

REVIEW RELAXATION PRACTICE AND TROUBLESHOOT

Were you able to practice your relaxation techniques last week?

Review relaxation ratings on the Sleep Diary and Nightmare Log. [**Troubleshoot and encourage, if necessary.**]

IMAGERY REHEARSAL REVIEW

- [**Review Practice Review included in Sleep Diary and Nightmare Log**]
- Were you able to practice imagine your new dream?
- When and where did you practice did you rehearse the new dream?
- How much time did you spend each time?
- How did you rehearse the new dream?
- How did you feel before, during, and after imagining your new dream?
- Were you able to vividly imagine the new dream? Did you find yourself avoiding the rescription or getting bored?
- Did you notice any changes in your nightmares?
- Did you practice relaxation after each time you visualized your dream?



Troubleshooting: Imagery Rehearsal Practice (This section is repeated from prior session)

Patient avoided thinking about the new dream. This may be due to uncertainty about the reasons for doing it or anxiety that it will not help/make things worse.

- Try to determine the reason for the avoidance. If they are unclear or unconvinced about the rationale, it may be helpful to revisit some of the psychoeducation. Encourage them to experiment for a week and give it a try.
- If they are anxious and think it will make things worse, you can help brainstorm some additional changes.
 - Let's brainstorm some changes to the rescription today into something you feel more comfortable picturing.

The dream seems like it may be too different from the old nightmare.

- Did the new dream feel real enough to you?
- In what ways was your new dream the same as the old one? How was it different?

- Let’s try adding a detail from the nightmare into the new dream to help your brain make a connection between the two.

The rescription did not address the theme enough or in a helpful way (e.g., used violence that led them to feel upset when imagining rescription). It can be helpful to have the patient specifically talk through where they made the changes and how it changed the theme. In particular, for power/control, it is important that the patient take an active role in addressing the situation. For safety, it is important that safety be long-term in the rescription, not temporary.

- How did you deal with the ideas in your new dream?
- Did the new dream focus on the ideas enough?
 - Safety; Feeling bad about yourself or others; Trust; Intimacy; Power/control
- Is your new dream meaningful to you in anyway?

The patient had trouble picturing the new dream.

- Were you able to picture the new dream clearly?
 - Try adding more sensory details like sounds, colors, smells, feelings, things in the environment.
- How do you feel when you imagine the new dream? Does your new dream bring up emotions that are different from the trauma?
 - Peace, acceptance, motivated, or even inspired instead of guilt or shame?
 - Safe and secure instead of fear?
- It is even ok to use humor in your new dream that makes you smile or laugh instead of dreading going to sleep.

The patient persistently declines to engage in rescription or imagery rehearsal.

- This is ok. Changing sleep habits, practicing relaxation, and exposure to the nightmare have all been shown to have positive impacts on sleep.

Options for Continue Nightmare Work

If the patient has not seen any changes in nightmare yet, work on the rescription again by writing a different version of the rescription. See “**Option 1: Rescript Original Nightmare**” section.

If the patient has only one nightmare and would like to create another rescription for this nightmare, work on the rescription again by writing a different version of the rescription. It is important to note, if the patient only has one nightmare and they feel the initial rescription worked well, this is not necessary. See “**Option 1: Rescript Original Nightmare**” section.

If the patient has seen significant changes in nightmares, they may want to complete exposure for a new nightmare. See “**Option 2: Work on Another Nightmare**” section.

Option 1: Rescript Original Nightmare Again

What changes could you make to the nightmare?

- Remember, you can make changes to the beginning, middle or end.
- It is helpful to focus on changing areas with theme related stuck points.
- Here are some ideas that others have found worked well for them:

- **Power-focused ideas:** more or better weapons, size change, rank change, control of time, control of environment.
- **Safety-focused ideas:** body armor, physical cover, additional exits, change injury location/type, night vision, scopes, advance warning, prophetic dream/bad feeling, support person, law enforcement, ability to fly/teleport/be invisible. You can also consider changing/reducing the intensity of what happened—i.e., turning down the volume of what happened, or making a PG13 version of what happened.
- **Intimacy-focused ideas:** add in a trusted friend, have a battle buddy, increase honesty, emotional honesty.
- **Trust-focused ideas:** being believed, leadership following through, promises kept, consistent rules and punishment, added security, making multiple copies of items, conversation changes or adding conversations you wish would have happened.
- **Esteem-focused ideas:** act in a way that is in line with your beliefs, recognition from others, different/better training, honoring the dead/injured, result is a different ending, “spirit or ghost discussion” (can talk with someone who is dead/knocked out).

Rescript Nightmare

Now you will have time to write out your new dream.

- Remember to write your changed dream like it is happening right now.
- Use all of your senses (smell, touch, taste, feel, hear), and use as many details as possible.

Before you begin, rate how tense/upset you feel on a scale of 0–100. [Make a note of response.]

[Have patient write out the rescription. Allow the patient to have fifteen minutes. Consider setting a timer in the patient’s view if it would be helpful for the patient. Give the patient reminders when time is running low, without pressuring them. Allow them to finish if they need a few more minutes.]

How upset do you feel after writing the changed dream (on a scale of 0–100)? [Make a note of response.]

Nice work!

Read Rescripted Dream

Now we are going to have you read your changed dream out loud.

- As you read your changed dream, pay attention to the differences between your old nightmare and this new, changed dream.
- Remember, looking for the ideas and making them part of your changed dream can make you feel more in control.

[Have patient read the rescripted dream out loud.]

How tense/upset do you feel after reading the rescripted dream (on a scale of 0–100)? [Make a note of response.]

- Over the next week, practice imagining your new dream in detail for about 10 minutes each night before your relaxation practice, right before you go to bed. Record your practice on the Sleep Diary and Nightmare Log.
- You can also practice during the day. The more times you imagine this new dream, the more it will help. This is called imagery rehearsal.
- Remember the theories about why nightmares happen (trauma processing and mood matching). Imagining the new dream when you are awake gives your mind a different direction to go during sleep.
- This is also similar to the way athletes visualize their actions before a competition. If you have ever watched the Olympics, they typically show athletes closing their eyes and making body movements right before their performance. This visualization can improve athletic performance. Imagining the new dream is a way of improving sleep performance.
- When you practice:
 - Sit comfortably in a relatively quiet place.
 - Close your eyes if you feel comfortable doing so. If no, keep your eyes open and focus on a point on the floor or on a wall.
 - Mentally create the images of your new dream. Make the images, sounds, feelings, thoughts, and emotions as clear as possible.
 - If within 10 minutes, you get through the new dream, repeat it again and again.
- You can also make a recording to listen to or read it over.

Practice Imagery Rehearsal in Session

- Let's practice imagining the new dream now for a few minutes in session so you can get an idea of what this will be like. There are a few options for how we can do this.
 - I can read the dream to you while you close your eyes or focus on a neutral spot to imagine the new dream.
 - You can close your eyes to picture the new dream.
 - You can read your dream to yourself quietly or outloud.
 - The main point is for you to picture the imagery and imagine what you are seeing, hearing, smelling, tasting and feeling.

[Practice imagery rehearsal for approximately 5 minutes.]

What was it like for you to imagine the new dream? [Problem solve as needed.]

Some people find themselves wanting to avoid practicing the new dream. Let's make a plan in case that happens. What can you do if you have an urge to avoid practicing your new dream?

Option 2: Work on Another Nightmare

The next few pages are for your written story of the nightmare.

Just like the last time, remember:

- It is important to think about your most upsetting nightmare.
- Write in present tense (e.g., "It is dark" or "We are bumping along").
- Write in first person (e.g., "I am going" or "I see the blood").
- Use sensory details. What are you seeing? Smelling? Tasting? Temperature? Lights?

- Sounds? The more details, the more vivid it will be. Try to make the image as clear as possible.
- Try to write down as much of the nightmare as you can.
- Be sure to include the beginning, middle, and end.

You'll have about ten minutes to write. **[Allow more time if feasible.]** Remember, if you start getting upset, that you are in a safe place, you are not alone, and it is only a dream.

Before you begin, rate how tense/upset you feel on a 100-point scale, with 0 = completely and deeply relaxed throughout your body, and 100 = extremely tense throughout your body. [Make a note of response.]

[Have patient write out the rescription. Allow the patient to have fifteen minutes. Consider setting a timer in the patient's view if it would be helpful for the patient. Give the patient reminders when time is running low, without pressuring them. Allow them to finish if they need a few more minutes.]

How tense/upset do you feel after writing the nightmare (on a scale of 0–100)? [Make a note of response.]

You may feel more upset after writing the nightmare. This is normal. The first few times you do something you are afraid of, you are likely to feel some fear. Try not to let this bother you—it will go away.

The more you talk, write, read, or think about the nightmare, the less upset you will feel.

Read Nightmare

Now that you have written out your nightmare, the next step will be for you to read your nightmare out loud. Remember to listen for different ideas/themes that may be in your nightmare:

- Safety
- Power/Control
- Intimacy
- Trust
- Esteem

[Have patient read the nightmare out loud. As the patient reads, make a note of themes you hear (e.g., safety, power/control, intimacy, trust, esteem) in order to facilitate theme identification in this session.]

How tense/upset do you feel after reading the nightmare (on a scale of 0–100)? [Make a note of response.]

Process Nightmare

As you read your nightmare, did you notice any of the following themes?

- **Safety:** Feeling unsafe, seeing dangerous things happening, or being in danger.
- **Power/Control:** Not being able to control what is happening, not calling the shots.

- **Intimacy:** Feeling close to other people, or a lack of closeness.
- **Trust:** Not being able to count on others or yourself.
- **Esteem:** Not feeling good about yourself or not feeling good about others.

These ideas you picked out are very important to keep in your mind during this next part, when we get to make some changes. These areas are considered “stuck points”—thoughts or feelings that you are having problems working through. Picking out these themes is the first step toward dealing with them.

DEEP BREATHING RELAXATION

Now that we have gone through the nightmare work, let’s practice relaxation.

First, tell me how tense you feel on a scale of 0–100, with 0 = completely and deeply relaxed throughout your body, and 100 = extremely tense throughout your body. [Make a note of response.]

[Play relaxation recording, or read the following script:]

- Put one hand on your upper chest and one on your belly, just below your rib cage.
- Close your eyes and breathe in slowly through your nose.
- Expand your belly as you breathe in.
- The hand on your belly should move a lot, while the hand on your chest will barely move.
- Pause naturally, then tighten up your stomach muscles and slowly exhale, allowing the air to gradually escape through your lips.
- The hand on your stomach will fall quite a bit, while the hand on your chest will hardly move.
- Try to keep your breathing slow, smooth, and easy. Many people find it easiest to breathe through their nose, but do whatever is most comfortable for you and allows you to breathe most naturally.
- When you breathe in, think “one” to yourself.
- Then breathe out slowly and think the word “relax.”
- On your next breath, think “two” as you breathe in, and “relax” as you breathe out.
- Continue counting until you reach “eight,” and then count backward, back down to “one.”
- Try to focus only on your breathing and the words. Open your eyes when you are finished.

[When patient is finished:] *Great, now tell me again how tense you feel on the same 100-point scale, with 0 = completely and deeply relaxed throughout your body, and 100 = extremely tense throughout your body? [Make a note of response.]*

How was that for you? Any difficulties? [Troubleshoot.]

Before we move on, what questions do you have?

SESSION 5 HOME PRACTICE

- Follow your “New Sleep Plan.”
- Complete the Sleep Diary and Nightmare Log.
- Review session information in the patient packet and bring any questions to the next session.
- Practice the relaxation exercise at least two times per day, with one of these times near bedtime, and record your practice on the Sleep Diary and Nightmare Log.
- These media files are available to share or download:
 - Progressive Muscle Relaxation Guided Imagery Script One: <https://vimeo.com/480387339>
 - Progressive Muscle Relaxation Guided Imagery Script Two: <https://vimeo.com/480399123>
 - Progressive Muscle Relaxation without Music: <https://vimeo.com/480401030>
 - Progressive Muscle Relaxation with Music: <https://vimeo.com/480402598>
- Other relaxation resources that are preferred can be used as well. It is recommended that relaxation practice be at least 10-15 minutes and include some element of guided imagery.
- **Option 1:** Imagine your new dream in as much detail as you can for about ten minutes each night, followed by relaxation exercise. Record your practice on the Sleep Diary and Nightmare Log.
- You can also practice during the day. The more times you imagine this new dream, the more it will help.
- When you practice:
 - Sit comfortably in a relatively quiet place.
 - Close your eyes if you feel comfortable doing so. If no, keep your eyes open and focus on a point on the floor or on a wall.
 - Mentally create the images of your new dream. Make the images, sounds, feelings, thoughts, and emotions as clear as possible.
 - If within 10 minutes, you get through the new dream, repeat it again and again.
 - You can also make a recording to listen to or read it over.
- **Option 2:** Start thinking about and making notes of ways to change your new nightmare using the instructions and table in your packet.