PSY 679 TRAUMA

Final Exam Essays

Please respond to all questions and email your responses to [cpaltin@nu.edu](mailto:cpaltin@nu.edu) Please include the actual question with your response.

PLEASE PRINT YOUR NAME ON ALL PAGES OF YOUR RESPONSE.

Final Essays are due no later than MONDAY, August 29th.

1. Rebecca, a 36 year old mother of an infant is referred by her physician for depression and trouble sleeping. She reports that she has been “snapping” at the baby, irritable and feels hopeless and depressed much of the time. She would like to return to her job next year which was fulfilling, but her husband has refused to allow this, stating that her job is to raise her child. In late sessions she mentions that her spouse “tore up the bedroom after an argument” and says she felt guilty that it woke the baby. When questioned about his anger, she reports to you “oh he drinks and that is sometimes what happens, but it only happens when he drinks.” She reports that she has had thoughts recently of taking her life, no specific plans, just a desire to not be alive, and states that guilt about the baby would prevent her from ever acting on this.

Describe based on readings what Rebecca might be thinking and feeling, and what practices and approaches might assist you in working with her. What risks are there?

2. Mark is a 42 year old Hispanic who is a father of three children a girl age 2, and two boys ages 9 and 14. His wife Yolie, a Hispanic/caucasion is 38, and has a child from a previous marriage. Mark comes to therapy with you because he was in couple therapy with Yolie, but the therapist felt his aggressive behavior, anger and history of abuse should be dealt with in individual before couples therapy can be beneficial. Mark is angry about this, doesn’t want to “keep wasting money on doctors” and states that he gets angry, but his wife comes from a family “that didn’t ever get angry, and she doesn’t get that anger is normal.” He reports that he yells at everyone, and that she does many things to frustrate him. He admits to slapping her once, and to also states he has grabbed her and shoved her several times, but “only when she is aggravating me to the point I can’t deal with her anymore.” He states he drinks and smokes weed, but not excessively. He reports that Yolie has “an attitude” because she went to college and thinks she is smarter than me.” Mark has a high school education, and is currently a plumbing and heating repairman, earning a good wage. He states that the two argue over money frequently, but this has improved since he took over all the finances so that “Yolie doesn’t go blow all the money every month.”

What factors might increase his likelihood to continue battering?

- How would his cultural background play a role in this? What are some of the pros and con’s of anger management for treatment of batterers and how might you use distress reduction and affect regulation training to assist?

4. Describe how you would assist an Neda, an intern who reports she is becoming overwhelmed by her work with trauma survivors. What might her needs be, and in general what are the needs of first responders in treatment of trauma.

5. Brett is a war veteran who has returned home after deployment in active duty. He is quiet and tends to be emotionaless much of the time, a distinct change from his outgoing and social demeanor prior to his combat. His wife Susan urges him to go to therapy with you because they used to jog and kayak together, and Brett has little interest in this since his return. They have only had sex a few times since he returned, and His wife describes it as “O.K.” Brett enjoys his two small children, but “needs breaks from them when it gets too noisy or crazy.” He reports that much of what he experienced he would like to put behind him, and that it is not something he would ever share with his wife. He spent most of the time at his four year old son’s birthday party in another room watching tv, which was upsetting to his Susan. He was given anti-depressants, but states they do nothing for him. Brett says his very much enjoys sitting with his dog, who has been “a great way to relax.”

What diagnostic questions would you have in assessing Brett?

Based on your overall impression, how might you work with Cognitive and emotional processing for Brett? What would be your initial goals with him, and how would you achieve those goals?

6. How does Briere address relational functioning? How does he see this impacted by trauma?