# How to move forward with loss: Treating PTSD and grief arising from traumatic bereavement with cognitive therapy for PTSD

## **Professor Jennifer Wild**

#### Introduction

Sudden traumatic losses, such as death by suicide, violence or protracted illness, increase risk for post-traumatic stress disorder (PTSD) and prolonged grief. Whereas PTSD is linked to repeatedly re-experiencing the loss trauma, prolonged grief is associated with yearning for the deceased. PTSD following traumatic loss commonly co-occurs with prolonged grief and new research demonstrates that certain strategies in the aftermath of loss influence the trajectories of traumatic stress and grief reactions. Cognitive therapy for PTSD (CT-PTSD) is a first-line, NICE-recommended, highly effective treatment for PTSD arising from a range of trauma, including traumatic loss. This workshop focuses on how to treat PTSD and grief reactions arising from traumatic bereavement with cognitive therapy for PTSD. A core aim of the treatment is to help the patient achieve a sense of continuity in the present with what has been lost in the past.

## Content

We will apply the Ehlers and Clark (2000) cognitive model of PTSD to post-traumatic stress and grief reactions arising from traumatic bereavement. One of the challenges facing clinicians treating traumatic loss reactions is how to best update the worst meanings of the loss trauma where a patient's worst fears have likely happened resulting in the death of someone close to them. The workshop will demonstrate how to update trauma memories, how to carry out imagery transformation and how to link transformed images to the relevant moment in memory so that the patient may move forward with their loss. The workshop will include a focus on how to plan rebuilding life activities that give a sense of purpose and how to help clients disengage from maintaining strategies, such as ruminating on what could have been done to prevent the death. Attention will be given to special circumstances, including death by suicide and loss of life caused by the patient.

By the end of the session, attendees will be able to:

- 1. Apply Ehlers and Clark's (2000) cognitive model to PTSD arising from bereavement trauma
- 2. Identify the differences between PTSD and prolonged grief reactions
- 3. Recognise how the core treatment components differ for PTSD associated with traumatic bereavement than for PTSD linked to trauma where there is no loss of life
- 4. Describe what imagery transformation is, why it is important, and how to link transformed images to the relevant moment in memory
- 5. Identify core cognitive themes linked to loss trauma and ways to work with them
- 6. Overcome common obstacles patients face when engaging in rebuilding activities

# **Biography**

Jennifer Wild is Visiting Professor of Experimental Psychology at the University of Oxford where she developed evidence-based interventions to prevent the onset and persistence of PTSD and major depression in first responders. Her area of expertise is in developing and evaluating evidence-based

interventions for anxiety and stress disorders, and in developing preventative interventions for people at risk of trauma, such as emergency responders and military members. She has worked in an advisory role to the Cabinet Office in the UK on best practice for developing preventative interventions for high risk occupations. She has written over 80 publications and two books, including a recently published popular science book on resilience, *Be Extraordinary: 7 Key Skills to Transform Your Life from Ordinary to Extraordinary.* Professor Wild specialises in translating evidence into practice, has co-disseminated first-line interventions for anxiety and stress disorders to the UK's National Health Service through the Talking Therapies programme. She is dedicated to improving treatments so they are more precise and effective and reach the people who need them most. Professor Wild regularly appears in the media giving advice rooted in science for preventing the onset and persistence of trauma-related mental health problems.