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Second Edition

Arthur E. Jongsma, Jr.
To Dave and Lorrie Vander Ark,
whose friendship has enriched our lives and
whose support is more reliable than a fine timepiece.
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The PracticePlanners® series has grown rapidly. It now includes not only the original Complete Adult Psychotherapy Treatment Planner, Third Edition, The Child Psychotherapy Treatment Planner, Third Edition, and The Adolescent Psychotherapy Treatment Planner, Third Edition, but also Treatment Planners targeted to specialty areas of practice, including addictions, co-occurring disorders, juvenile justice/residential care, couples therapy, employee assistance, behavioral medicine, therapy with older adults, pastoral counseling, family therapy, group therapy, psychopharmacology, neuropsychology, therapy with gays and lesbians, special education, school counseling, probation and parole, therapy with sexual abuse victims and offenders, and more.

Several of the Treatment Planner books now have companion Progress Notes Planners (e.g., Adult, Adolescent, Child, Addictions, Severe and Persistent Mental Illness, Couples). These planners provide a menu of progress statements that elaborate on the client’s symptom presentation and the provider’s therapeutic intervention. Each Progress Notes Planner statement is directly integrated with Behavioral Definitions and Therapeutic Interventions items from the companion Treatment Planner.

The list of therapeutic Homework Planners is also growing from the original Homework Planner for Adults, to Adolescent, Child, Couples, Group, Family, Addictions, Divorce, Grief, Employee Assistance, and School Counseling/School Social Work Homework Planners. Each of these books can be used alone or in conjunction with their companion Treatment Planner. Homework assignments are designed around each presenting problem (e.g., Anxiety, Depression, Chemical Dependence, Anger Management, Panic, Eating Disorders) that is the focus of a chapter in its corresponding Treatment Planner.

Client Education Handout Planners, a new branch in the series, provide brochures and handouts to help educate and inform adult, child, adolescent, couples, and family clients on a myriad of presenting problems mental health issues, as well as life skills techniques. The list of presenting problems for which information is provided mirrors the list of presenting problems in the Treatment Planner of the title similar to that of the
Handout Planner. Thus, the problems for which educational material is provided in the Child and Adolescent Client Education Handout Planner reflect the presenting problems listed in The Child and The Adolescent Psychotherapy Treatment Planner books. The handouts are included on CD-ROMs for easy printing from your computer and are ideal for use in waiting rooms, at presentations, as newsletters, or as information for clients struggling with mental illness issues.

In addition, the series also includes TheraScribe®, the latest version of the popular treatment planning, clinical record-keeping software. TheraScribe® allows the user to import the data from any of the Treatment Planner, Progress Notes Planner, or Homework Planner books into the software’s expandable database. Then the point-and-click method can create a detailed, neatly organized, individualized, and customized treatment plan along with optional integrated progress notes and homework assignments.

Adjunctive books, such as The Psychotherapy Documentation Primer, and Clinical, Forensic, Child, Couples and Family, Continuum of Care, and Chemical Dependence Documentation Sourcebook contain forms and resources to aid the mental health practice management. The goal of the series is to provide practitioners with the resources they need in order to provide high-quality care in the era of accountability—or, to put it simply, we seek to help you spend more time on patients, and less time on paperwork.

Arthur E. Jongsma, Jr.
Grand Rapids, Michigan
ACKNOWLEDGMENTS

Although only my name appears as the author of this book, the product is the result of the combined efforts of many people. I first would like to acknowledge the contribution of my coauthors on several other books, William McInnis and Mark Peterson. They both gave permission for me to borrow and adapt some of the homework exercises we had collaborated on in writing the Brief Adolescent Therapy Homework Planner and the Adolescent Psychotherapy Homework Planner II. Several of the assignments in this book have been adapted to the adult focus group from their original creation for the adolescent client. Thank you, Bill and Mark.

I would also like to thank Jim Finley and Brenda Lenz for giving their permission to me to adapt three of their assignments from their Addiction Treatment Homework Planner for placement in the Chemical Dependence—Relapse section of this book.

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Finally, my personal support system is grounded in my wife, Judy, who makes me feel important even when I am not, and my children and grandchildren, who consistently show interest in my work. Thank you, family.

—A.E.J.
INTRODUCTION

More and more therapists are assigning homework to their clients. Not only have short-term therapy models endorsed this practice, but the benefits are being recognized by many traditional therapists as well.

WHY HOMEWORK?

Assigning homework to psychotherapy clients is beneficial for several reasons. With the advent of managed care, which often requires shorter and fewer treatment sessions, therapists assign between-session homework to help maximize the effectiveness of briefer treatment. Homework is an extension of the treatment process, provides continuity, and allows the client to work between sessions on issues that are the focus of therapy. Homework is also a tool for more fully engaging the client in the treatment process. Assignments place more responsibility on the client to resolve his or her presenting problems, countering the expectations that some clients may experience—that it is the therapist alone who can cure him or her. For some, it even may bring a sense of self-empowerment.

Another added benefit of homework is that these assignments give the client the opportunity to implement and evaluate insights or coping behaviors that have been discussed in therapy sessions. Practice often heightens awareness of various issues. Furthermore, homework increases the expectation for the client to follow through with making changes rather than just talking about change. Exercises require participation, which creates a sense that the client is taking active steps toward change. Homework allows the client to try new behaviors, bringing these experiences back to the next session for processing. Modifications can then be made to the client’s thoughts, feelings, or behaviors as the homework is processed in the therapy session.

Occasionally treatment processes can become vague and abstract. By adding focus and structure, homework assignments can reenergize treatment. Moreover, homework can increase the client’s motivation to change as it provides something specific to work on. Additionally, homework increases the involvement of family members and significant others in the client’s treatment by using assignments that call for their participation. It promotes more efficient treatment by encouraging the client to actively develop insights, positive self-talk, and coping behaviors between therapy sessions. Consequently, many clients express increased satisfaction with the treatment process when homework is given. They are empowered by doing something active that facilitates the change process, and it reinforces their sense of control over the problem. All of these advantages have made the assignment of therapeutic homework increasingly prevalent.
HOW TO USE THIS HOMEWORK PLANNER

Creating homework assignments and developing the printed forms for recording responses is a time-consuming process. This Adult Psychotherapy Homework Planner, Second Edition, follows the lead of psychotherapeutic interventions suggested in The Complete Adult Psychotherapy Treatment Planner (Jongsma and Peterson, 2006) and provides a menu of homework assignments that can easily be photocopied. In addition to the printed format, the assignments in this Planner are provided on a CD-ROM to allow the therapist to access them on a word processor and print them out as is or easily customize them to suit the client’s individual needs and/or the therapist’s style.

The assignments are grouped under presenting problems that are typical of those found in an adult population. These presenting problems are cross-referenced to every presenting problem found in The Complete Adult Psychotherapy Treatment Planner. Although these assignments were created with a specific presenting problem in mind, don’t feel locked in by a single problem-oriented chapter when searching for an appropriate assignment. Included with each exercise is a cross-referenced list of suggested presenting problems for which the assignment may be appropriate and useful called Additional Problems for Which This Exercise May Be Most Useful. This cross-referenced list can assist you in applying the assignments to other situations that may be relevant to your client’s particular presenting problem.

A broader cross-referenced list of assignments is found in the appendix Alternate Assignments for Presenting Problems. Review this appendix to find relevant assignments beyond the one, two, three, or four exercises found in any specific presenting problem chapter. For example, under the heading of Depression in the appendix you will find 18 alternative assignments originally created for other presenting problems but relevant and easily adapted for use with a client struggling with depression issues. In this appendix, with every presenting problem are listed relevant additional assignments from throughout the book. Remember, each assignment is available on the CD-ROM at the back of the book and, therefore, can be quickly edited for use with a specific client. This modified assignment can be saved on your computer’s hard disk for repeated later use.

ABOUT THE ASSIGNMENTS

Therapists may introduce the homework assignment with varying degrees of detail and client preparation. Recommendations regarding this preparation and post-exercise discussion are made on the title page of each assignment under the heading “Suggestions for Processing This Exercise with the Client.”

Clinical judgment must be used to choose the homework assignments that focus on relevant issues for the client. The title page of each assignment contains a section on “Goals of the Exercise” to guide you in your selection of relevant homework for your client.
CARRYING OUT THE ASSIGNMENT

It is recommended that you review the entire book to familiarize yourself with the broad nature of the type and focus of the various homework exercises. Select a specific assignment from a chapter titled with your client’s presenting problem or from the alternative list in the appendix and then review the list of homework goals. Assigning therapy homework is just a beginning step in the therapy treatment process. Carrying out the assignment requires a follow-up exploration of the impact of the assignment on the client’s thoughts, feelings, and behavior. What are the results? Was this assignment useful to the client? Can it be redesigned or altered for better results? Examine and search for new and creative ways to actively engage your client in participating in this homework process.

IMPORT HOMEWORK DATA INTO THERASCRIBE

Since the release of the newer versions of the software TheraScribe, The Treatment Planning and Clinical Record Management System for Mental Health Professionals, all assignments from Homework Planner books in the PracticePlanner® series can be imported into this point-and-click clinical tool. An electronic version of the Homework Planner book must be purchased separately (the CD-ROM in the back of every Homework Planner book can only be imported into a word processing program, not into TheraScribe). Once the Homework Planner data is installed into TheraScribe, the assignment may be added to a client’s treatment plan as an intervention. It can also be launched, viewed, edited, and printed out for distribution to the client and/or family members.
ALTERNATIVES TO DESTRUCTIVE ANGER

GOALS OF THE EXERCISE
1. Identify and clarify alternatives to destructive expressions of anger.
2. Increase awareness of how anger is expressed destructively.
3. Apply constructive alternatives to destructive anger expression.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL
- Antisocial Behavior
- Attention Deficit Disorder (ADD)—Adult
- Borderline Personality
- Family Conflict
- Posttraumatic Stress Disorder (PTSD)

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT
Clients often feel they responded to a frustrating situation in the only way possible. They fail to realize that they have choices and control over their behavior. You may want to review the alternatives to rage listed in the first section of the assignment to help the client understand the alternatives he/she could apply when dealing with frustration or anger. Review the client’s journal material and suggest additional constructive ways to respond to frustrating or hurtful situations that prompt his/her mismanaged anger.
ALTERNATIVES TO DESTRUCTIVE ANGER

Destructive anger can take many forms. Anger can be expressed in rage that is out of control, either verbally or physically. We also can express anger by snapping at someone or being unkindly critical. A third form that anger may take is that of cold, icy withdrawal that punishes the other person by shutting them out, shunning them, or refusing to acknowledge their attempts to relate to us. All of these reactions and many more can be destructive to the relationship and to our own feelings of self-esteem. Destructive expressions of anger often generate later feelings of guilt and shame.

This exercise is designed to briefly identify some constructive alternatives to destructive anger by giving a brief description of the positive alternative. The goal is for you to consider these alternatives as you seek to replace destructive anger with more constructive behaviors. You will be asked to keep a journal of situations in your daily life that provoked anger and then note how one or more of these constructive alternatives may have been applied to the situations.

Constructive Alternatives

A. **Assertiveness**: Speaking forthrightly in a manner that is very respectful of the other person’s needs and rights and does not attack anyone so as to make them defensive.

B. **Tune Out / Cool Down**: Recognize that the situation has become volatile and nonproductive and suggest withdrawal from the situation to give each party a chance to cool down and collect his/her thoughts and regain personal control.

C. **Relaxation**: Learn and implement relaxation skills to reduce stress and tension through the use of words that cue relaxation, deep breathing that releases tension, imagining relaxing scenes, or deep muscle relaxation procedures.

D. **Diversion**: When anger is felt to be building, find diversionary activities that stop the build up and focus the mind on more enjoyable experiences.

E. **Physical Exercise**: When anger and tension levels rise, physical exercise can be a wonderful way to release tension and expel energy as an alternative to losing control or exploding in rage.

F. **Problem-Solving Skills**: Identify or clarify the problem, brainstorm possible solutions, review the pros and cons of each alternative solution, select the best alterna-
tive for implementation, evaluate the outcome as to mutual satisfaction, and finally, adjust the solution if necessary to increase mutual satisfaction.

G. *Self-Talk:* Take time to talk to yourself in calming, reasoned, and constructive sentences that move you toward anger control and away from hurtful expressions of anger.

H. *“I” Messages:* Speak to the target of your anger, describing your feelings and needs rather than attacking, labeling, or describing the other person’s behavior, motivations, or goals. Begin your sentences with “I feel . . .” or “I need . . .”

I. *Other:* Describe your own or your counselor’s alternative to rage.

Application to Daily Life

In the columns that follow, describe the date and time, the situation that prompted the angry response, the destructive response, and the alternative constructive response that might have been used. In the final row, instead of writing a full description of the alternative, you may simply enter the alphabetical indicator of the constructive alternative, A through I.

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ANGER JOURNAL

GOALS OF THE EXERCISE
1. Increase awareness of the prevalence of angry feelings.
2. Identify the circumstances around, targets for, and causes of the angry feelings.
3. Identify alternative constructive reactions in the place of maladaptive anger responses.

ADDITIONAL PROBLEMS FOR WHICH THIS EXERCISE MAY BE MOST USEFUL
- Antisocial Behavior
- Borderline Personality
- Family Conflict
- Posttraumatic Stress Disorder (PTSD)

SUGGESTIONS FOR PROCESSING THIS EXERCISE WITH THE CLIENT
Some clients deny the degree of anger they feel and express. Other clients may be aware of feelings of anger, but need help in understanding the contributing factors and causes for their anger. As you process the journal entries with clients, help them clarify and pinpoint these contributing factors and the causes for their anger. Often the causes for the anger are not those that are initially identified, but lie beneath the surface and can be discovered with some patient processing. Finally, it is helpful to press the client toward describing positive alternative behaviors that could have replaced the maladaptive anger responses that were selected in the heat of the moment. Positive alternatives may include things like assertiveness, time-out, problem solving, “I” messages, or self-talk.
ANGER JOURNAL

To make you more aware of your angry feelings, the circumstances surrounding them, the target of them, the causes for them, and how they were shown, you are being asked to keep an anger journal. This journal will help you record the when, what, who, why, and how of the angry feelings as well as allow you to give some thought to what alternative emotional, behavioral, or cognitive reaction you might have had to the situation. Be as honest as you can be with yourself about your angry feelings, trying not to discount them, excuse them, or deny them. When you conclude that you have experienced anger, that is the time to make an entry into this journal. Your entries do not have to be lengthy; a sentence or two will suffice. You should enter enough information to permit you to discuss each incident with your therapist as you try to process and learn from your anger experiences. Do not forget to include experiences that have generated some anger within you even though you did not express it in words or behavior. The buildup of unexpressed anger can result in an inappropriate outburst at a later time. This journal may help you understand that phenomenon. It is also important for you to give some thought to the last entry; that is, what alternative positive reaction could you have given to the situation instead of burying or blurted out your feelings of anger. Often there is a more constructive response available that you are able to discover when you give the issue some calm consideration and analysis. The heat of the moment leads many of us to make mistakes. Try to make at least one entry per day into your anger journal.

The anger journal that follows asks you to enter the date and time of the experience that generated anger. Second, you are asked to enter a description of the situation, such as where you were and what was happening. Third, you are asked to name the people who were present, and specifically the people with whom you were angry. Next, you are asked to enter a sentence or two indicating your reason(s) for being so angry or the cause of your anger. Then you are asked to describe how your anger was or was not revealed. In the final column, enter your thoughts about how you could have responded to the experience more constructively.