Narrative writing

• A long tradition of viewing narrative writing as a form of therapy

• “Writing is a very sturdy ladder out of the pit.” (Alice Walker)
Why would narrative writing be efficacious in treating PTSD?

• Emotional Inhibition/Catharsis (Freud, 1895; Pennebaker, 1989)

• Exposure model (Bootzin, 1997; Rachman, 1980)

• Cognitive Processing/meaning making (Horowitz, 1986)

Narrative Exposure Therapy (Neuner et al., 2002)

• A community-based approach for use with survivors of war and torture

• Trauma survivor develops a narration of their entire life while focusing on detailed account of traumatic events
NET vs. IPT

Schall et al. (2009). *Psychotherapy and Psychosomatics*

NET vs. Trauma Counseling and Monitoring Group

Neuner et al. (2008). *Journal of Consulting and Clinical Psychology*
Confronting a Traumatic Event: Toward an Understanding of Inhibition and Disease

James W. Pennebaker and Sandra Klihr Beall
Southern Methodist University

According to previous work, failure to confide in others about traumatic events is associated with increased incidence of stress-related disease. The present study served as a preliminary investigation to learn if writing about traumatic events would influence short-term measures of health as well as short-term indicators of physiological arousal and reports of negative moods. In addition, we examined the aspects of writing about traumatic events (i.e., cognitive, affective, or both) that are most related to physiological and self-report variables. Forty-six healthy undergraduates wrote about either personally traumatic life events or trivial topics on 4 consecutive days. In addition to health center records, physiological measures and self-report moods and physical symptoms were collected throughout the experiment. Overall, writing about both the traumatic and non-traumatic events was associated with relatively higher blood pressure and negative mood following the studies, but fewer health center visits in the 6 months following the experiment. Although the findings and underlying theory should be considered preliminary, they bear directly on issues surrounding catharsis, self-disclosure, and a general theory of psychosomatics based on behavioral inhibition.

Experimental Disclosure and Its Moderators: A Meta-Analysis

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Disclosure of information, thoughts, and feelings about personal and meaningful topics (experimental disclosure) is purported to have various health and psychological consequences (e.g., J. W. Pennebaker, 1993). Although the results of 2 small meta-analyses (P. G. Finney, J. C. Board, & S. J. Lepore, 2004; J. M. Stacey, 1996) suggest that experimental disclosure has a positive and significant effect, both used a fixed effects approach, limiting generalizability. Also, a plethora of studies on experimental disclosure have been conducted that were not included in the previous analyses. One hundred forty-six randomized studies of experimental disclosure were collected and included in the present meta-analysis. Results of random effects analyses indicate that experimental disclosure is effective, with a positive and significant average t-effect size of .075. In addition, a number of moderators were identified.

Keywords: expressive writing, emotional disclosure, meta-analysis, Pennebaker, intervention
Is written disclosure efficacious for individuals with trauma exposure and at least moderate PTSD severity?

Extinction of Fear Response


Does it matter if a person writes about the same traumatic experience at each session?
Does it matter if you write about the same or different trauma events?

Sloan et al. (2005). Journal of Consulting and Clinical Psychology

Extinction of Fear Response

Sloan et al. (2005). Journal of Consulting and Clinical Psychology
Is written disclosure efficacious for individuals with PTSD?

Written Disclosure as an Intervention for PTSD

Heart Rate Change as a Function of Condition and Session

Sloan et al. (2011). *Behaviour Research and Therapy*

Self-Reported Valence as a Function of Condition and Session

Sloan et al. (2011). *Behaviour Research and Therapy*
Altering Written Disclosure to be Beneficial for PTSD

• Added psychoeducation of PTSD

• Added treatment rationale

• Directed writing about a specific trauma event, with focus on detail and emotion felt at the time of the event

• Increase dose to 5, 30 minute sessions

Participants

• 46 adults with a primary diagnosis of motor vehicle accident related PTSD

• Average age of 41, 65% women, racially diverse (37% Caucasian, 37% African-American)

• Median time since MVA was 20 months
WET Participants

• Low treatment drop-out rate \( (n = 2; 9\%) \)

• High client satisfaction ratings
  • Mean score 28.20 (highest possible rating = 32)

Efficacy of Written Exposure Treatment for PTSD

Sloan et al. (in press). *Behaviour Research and Therapy*
WET vs. other PTSD treatments

- CAPS Total Score
- CPT
- WET
- PE
- MA
- Assessment Period: Pre, Post, 3-Month, 6+ Month

30 vs. 60 min of imaginal exposure

- PSS-SR Score
- 60-minute
- 30-minute
- Assessment Period: Pre, Post, FU

How many treatment sessions are needed?

![Graph showing PSS-SR Score over Sessions with different session durations.]

- 60 min = 6.8 sessions
- 30 min = 7.2 sessions


Future Research

- Narrative writing is a promising treatment approach for PTSD
- Directly compare narrative writing (e.g., WET) to evidence-based treatments for PTSD
- What is optimal dose of PTSD treatment?
- Narrative therapy delivered by lay counselors
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