

## Supplementary Table. Summary of Sessions for Cognitive Behavioral Therapy Arm

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| Session & goals   | Element specific to combat PTSD and anger  |
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| <p><u>1. Orientation &amp; Introduction:</u><br/>Introduce group philosophy, structure, expectations; overview of “survival mode”.</p>  | <p>Discussion of PTSD, current ESTs; “survival mode”; association of PTSD with anger, aggression; military trains for combat, not re-integration; relaxation part of “re-integration training”; group as “band of brothers” with critical training, experiences in common.</p> |
| <p><u>2. Understanding Anger &amp; Aggression:</u><br/>Differentiate emotion of anger and physiological arousal from aggression; examine motivational issues: identify pros and cons of aggression; discuss values, goals, and personal reasons to change behavior.</p> | <p>Anger and aggression may be consistent with military values, combat goals: Need to identify civilian goals, and how anger/aggression fit in that context; PTSD sensitizes to threat; military trains in survival mode, to react to threat with aggression.</p>              |
| <p><u>3. Self-Awareness of Anger Cues:</u><br/>Identify antecedents of aggression, including physical, emotional, and behavioral components of anger response; discuss importance of and barriers to self-monitoring; begin to identify triggers of intense anger.</p>  | <p>Link between triggers of PTSD and triggers of anger; trained by military for aggression to be dominant response to threat, no time to step back and “think it through”; key role of self-monitoring in re-integration training.</p>   |
| <p><u>4. Crisis Management Strategies:</u><br/>Introduce behavioral interventions to de-escalate conflict when recognize danger of aggression; discuss beliefs that may interfere with initiating crisis management strategies.</p>                                     | <p>Highly trained combat Veterans may require re- training in civilian strategies; military may reinforce belief that emotions other than anger, behaviors other than aggression, are “weak”.</p>  |
| <p><u>5. Cognitive Restructuring:</u><br/>Present cognitive “ABC” model; identify possible alternative thoughts; focus on self-monitoring data.</p>   | <p>Discuss automatic thoughts common to PTSD that trigger anger, aggression; emphasize relaxation, self-monitoring as part of warrior’s re- integration training.</p>  |
| <p><u>6. Cognitive Restructuring II:</u><br/>Continue to use self-monitoring data to discuss automatic thoughts; begin to challenge thoughts, identify alternative thoughts, coping strategies, behavioral responses; discuss attribution biases.</p>                   | <p>Contextualize thoughts: identify automatic thoughts useful in combat but not useful in civilian life; discuss how automatic thoughts from one context can generalize to become biases in other contexts.</p>  |

7. Cognitive Restructuring III:

Continue session 6 skills; identify recurring themes associated with anger and aggression; identify other emotions often labeled as anger.

Utility of labeling fear, sadness, grief as anger in combat zone; how that mindset affects emotions, behaviors in civilian life.

8. Cognitive Restructuring IV: Continue to discuss cognitions associated with escalation, maintenance, de-escalation of anger and aggression; focus on guilt, shame, as common emotion underlying anger in PTSD; reassess responsibility for trauma, discuss forgiveness and self-forgiveness.

Role of trauma, PTSD in anger and aggression; guilt, shame common in PTSD; cognitions re responsibility for trauma; introduce ideas behind trauma-focused therapy.

9. Assertiveness & Communication Skills:

Discuss styles of interpersonal interaction including passive, aggressive, and assertive; role play, receive feedback; discuss use of relaxation, behavioral techniques to de-escalate conflict.

Role play of re-integration skills with other Veterans; feedback from peers with common experiences.

10. Assertiveness & Communication Skills II:

Continue to role play communication skills, receive feedback.

Discuss why practice of skills when not stressed is necessary to use them when stressed, just as military training required over-learning of survival mode skills so could use them under combat conditions; ongoing feedback from peers.

11. Conflict Resolution Skills:

Review emotional expression skills, assertiveness; focus on threat of confrontation during conflict; emphasize taking responsibility for own feelings; role play, receive feedback on skills; identify ways to develop integrative skills, "win-win" solutions.

Win-lose, dominant approach may not be helpful in civilian setting; integrating basic skills for more difficult, complex, stressful situations.

12. Termination:

Review program; complete structured self-assessment; identify danger spots and high-risk situations; identify and discuss future goals; develop plans for continuing progress; discuss feelings and thoughts about group.

Identify helpful/unhelpful components of group with fellow Veterans; discuss how to balance being a warrior with being a spouse, parent, etc.; emphasize ongoing training, "use it or lose it"; discussion of PE, CPT as treatment for PTSD; referral within the VA.

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