

Learning Objectives - AIT

Module 1 (enduring)

1. Describe the 6 SP foundational principles and how they impact therapeutic decision-making.
2. Describe indicators of enactments using core organizers as building blocks for experience.
3. Explain the definition of SP to clients in a way they can understand, and summarize how the SP approach will help clients reach their therapeutic goals for treatment.
4. Describe the skill of tracking clients throughout psychoeducation to foster integration, including the benefits and risks of therapeutic touch.
5. Define contact and differentiate contact that funnels toward a frame and contact that funnels away from a frame by assessing the quality of indicators.
6. Describe verbal and non-verbal elements of both narrative and present-moment experience.
7. Identify an initial vs a transformational frame, and practice framing for trauma-themed session.
8. Explain how to refine a frame throughout stages of the process for trauma-themed sessions.
9. List the 5 steps in the 5-step cycle and how they relate to Organization of Experience and funneling in the SP process.
10. Define embedded relational mindfulness and how to use mindfulness directives in the 5-step cycle.
11. Examine how experiments are used in trauma themed sessions and be able to practice SP experiments in sessions.
12. Explain how collaboration, negotiation, and setup process for experiments, and provide clinical rationale for experiments.
13. Define ANS Arousal Modulation Model
14. Describe resources and somatic resources, and be able to apply resourcing in practice.
15. Define Sensorimotor Sequencing (SMS) and demonstrate SMS for hyperarousal, orienting, and defensive responses.
16. Define what it means to Reinstate an Active Defense (RAD) and how to apply it in session, including ways to incorporate physical resistance to aid in RAD.
17. Identify when to drop, link, or unlink Core Organizers (CO) by arousal states.
18. Explain the SP perspective on Transformation and be able to name indicators and frame Transformation.
19. Define the Integration stage and the importance of somatic integration for changing the organization of experience.
20. Name the 5 Stages of the Process of SP and Explain at least 1 key task for each stage.

Module 2

1. Identify therapist's implicit and explicit contact statements to client's "narrative" and "present moment experience" during observation and clinical practice in ANS Modulation and Somatic Resourcing themed context.
2. Apply SP skill of "contact" to "funnel toward a frame" in an ANS Modulation and Somatic Resourcing trauma-themed clinical session.
3. Assess quality and effectiveness of therapist's contact statements for attunement and "funneling to frame".
4. Assess and connect client's verbal and somatic "narrative" by explicitly naming and elucidating connection between "core organizers."
5. Apply SP principles of unity and nonviolence by using contact statements that are open to collaboration with and feedback from the client.
6. Apply SP skill of "tracking" for client's ANS arousal state and level of consciousness.
7. Apply SP skill of "framing," by identifying a "core organizer" activated by the client's narrative and the arousal state of the client for collaborative exploration.
8. Apply SP skill of "5-Step Cycle" to study the organization of experience in relational connection with the client and within the SP Principles.
9. Assess application of the "5-Step Cycle" and the therapist's ability to bring forward the "organization of experience", stay in relational connection, identify procedural tendencies, and work within the SP principles.
10. Apply SP skill of "stitching to the frame" to manage states of consciousness of client in clinical practice.
11. Discern the client's state of ANS dysregulation and predict helpful somatic resources.
12. Demonstrate SP skill of "refining the frame" in the processing stage, (identified a potential somatic resource).
13. Apply skills of physical demonstration, mirroring, and psychoeducation to help client fully develop a somatic resource and track the client's physical experience of the resource by applying the "5-step cycle" to study the organization of experience.
14. Create a physical experiment that includes movement to promote the client's awareness of the effects of a resource on ANS arousal, core organizers, and procedural learning.
15. Apply SP skills at the transformation stage of the process to identify and explicitly name the transformation of a client in clinical practice, apply techniques if there are blocks to transformation, and assess the somatic elements of transformation
16. Apply SP Skill of "5-step Cycle" to help client deepen physiological awareness of a transformation, highlight changes in ANS arousal at a somatic level (linking core organizers explicitly as necessary), and integrate the transformation into in procedural tendency.
17. Implement use of movement during the integration stage of the process in clinical practice to help client access a resource outside of therapeutic session to regulate ANS arousal.
18. Assess application of SP skills as a therapist in clinical practice, particularly ability to work with clients somatically, with processing, and ANS dysregulation.

19. Assess ability as a therapist in clinical practice to be in attunement with the client, and adapt application of skills based on client's state, participation, and collaboration.

Module 3

1. Identify therapist's implicit and explicit contact statements to client's "narrative" and "present moment experience" during observation and clinical practice in Reinstating Orienting and Defensive Responses disrupted by Traumatic Experience.
2. Apply SP skill of "contact" to "funnel toward a frame" in a Phase Two trauma-themed clinical session.
3. Assess quality and effectiveness of therapist's contact statements for attunement and "funneling to frame".
4. Assess and connect client's verbal and somatic "narrative" by explicitly naming and elucidating connection between "core organizers."
5. Apply SP principles of unity and nonviolence by using contact statements that are open to collaboration with and feedback from the client.
6. Apply SP skill of "tracking" for indicators client's ANS arousal state and level of consciousness for ODR.
7. Apply SP skill of tracking for somatically held procedural defense strategies for ODR.
8. Apply SP skill of "framing," by identifying a "core organizer" activated by the client's narrative and the arousal state of the client for collaborative exploration.
9. Apply SP skill of "5-Step Cycle" to study the organization of experience in relational connection with the client and within the SP Principles.
10. Assess application of the "5-Step Cycle" and the therapist's ability to bring forward the "organization of experience", stay in relational connection, identify procedural tendencies, and work within the SP principles.
11. Apply SP skill of "stitching to the frame" to manage states of consciousness of client in clinical practice.
12. Assess client's readiness, using the Window of Tolerance conceptual framework, for Phase Two traumatic memory reprocessing.
13. Demonstrate SP skill of "refining the frame" in the processing stage, (selecting for one of reinstating orienting, sequencing one of ANS arousal, orienting, or defensive response, or through physical experiment reinstating and active defense).
14. Apply somatic or relational resource to support reinstating orienting or defensive responses.
15. Create a physical experiment that includes movement to challenge procedural learning for ODR.
16. Apply SP skills at the transformation stage of the process to identify and explicitly name the transformation of a client in clinical practice, apply techniques if there are blocks to transformation, and assess the somatic elements of transformation
17. Apply SP Skill of "5-step Cycle" to help client deepen physiological awareness of a transformation, highlight changes in capacity to orient and defend at a somatic level (linking core organizers explicitly as necessary), and integrate the transformation into in procedural tendency.

18. Implement use of movement during the integration stage of the process in clinical practice to help client integrate insights related to or an actual reinstated capacity to engage in orienting and defensive responses.
19. Assess application of SP skills as a therapist in clinical practice, particularly ability to work with clients somatically, with reinstating orienting and defensive responses.
20. Assess ability as a therapist in clinical practice to be in attunement with the client, and adapt application of skills based on client's state, participation, and collaboration.

Module 4 (enduring)

1. Describe the 6 SP foundational principles and how they impact therapeutic decision-making in developmental-themed sessions.
2. Describe enactments and how they can occur both in the therapeutic relationship and relationships outside of therapy, especially in developmental-themed sessions.
3. Express the definition of SP to clients in a way they can understand and summarize how the SP approach will help clients reach their therapeutic goals for treatment in developmental-themed sessions.
4. Identify how Bodyreading is different from Tracking and be able to practice Bodyreading with clients.
5. Identify structural procedural habits and how they reflect and/or sustain development.
6. Provide clinical examples of tracking implicit narrative and somatic indicators for developmental themes.
7. Describe the 4 levels of contact and the qualities of effective contact statements for developmental-themed sessions.
8. Compare an initial vs a transformational frame, and practice framing for developmental themed sessions.
9. List the 5 steps in the 5-step cycle and how they relate to Organization of Experience and funneling in the SP process in developmental themed sessions.
10. List 4 experiments used in developmental themed sessions and be able to practice SP experiments in sessions.
11. List at least 6 possible sensorimotor sources of attaching meaning to experience.
12. Summarize the importance of meaning and why a bottom-up approach to meaning is different from other approaches.
13. Describe the process of funneling to elicit the experience of a meaning/belief.
14. Define primary and secondary emotions and be able to assess indicators for emotion.
15. Provide a rationale for exploring a current issue rather than childhood states.
16. Define dual states of consciousness, child states of consciousness, and the idea of a missing experience as it relates to transformation.
17. Define indicators of transformation and use techniques such as bite-sizing and discrimination to facilitate the process of transformation in developmental themed sessions.
18. Identify the importance and process of applying somatic integration techniques for developmental themed sessions.
19. Express the importance of returning clients to ordinary states of consciousness at the end of a session.

20. Describe the 5 stages of the process and list at least one key task for each stage in developmental themed sessions.

Module 5

1. Identify therapist's implicit and explicit contact statements to client's "narrative" and "present moment experience" during observation and clinical practice for current issues/recent experience.
2. Apply SP skill of "contact" to "funnel toward a frame" in a current issue clinical session.
3. Assess quality and effectiveness of therapist's contact statements for attunement and "funneling to frame".
4. Assess and connect client's verbal and somatic "narrative" by explicitly naming and elucidating connection between "core organizers."
5. Apply SP principles of unity and nonviolence by using contact statements that are open to collaboration with and feedback from the client.
6. Apply SP skill of "tracking" for indicators client's ANS arousal state and level of consciousness during a current issue themed session.
7. Apply SP skill of tracking for somatically held procedural defense strategies during a current issue themed session.
8. Apply SP skill of "framing," by identifying a "core organizer" activated by the client's narrative and the arousal state of the client for collaborative exploration.
9. Apply SP skill of "5-Step Cycle" to study the organization of experience in relational connection with the client and within the SP Principles/Foundations.
10. Assess application of the "5-Step Cycle" and the therapist's ability to bring forward the "organization of experience", stay in relational connection, identify procedural tendencies, and work within the SP principles.
11. Apply SP skill of "stitching to the frame" to manage states of consciousness of client in clinical practice.
12. Demonstrate SP skill of "refining the frame" in the processing stage, (narrowing the focus of the processing stage, collaboratively demonstrates fidelity to the SP Foundations as well as demonstrates the therapist can guide selection of a small enough piece of work that supports transformation and integration).
13. Use previously established resource(s) and track the client's physical experience of the resource while applying the "5-step cycle" to study the organization of experience of a current issue.
14. Create an SP experiment that evokes (in Accessing Stage), challenges procedural learning or offers a missing experience (in Processing Stage) or prompts transformation (at Transformation Stage), or anchors transformation (at Integration Stage) in a Current Issue practice session.
15. Apply SP skills at the transformation stage of the process to identify and explicitly name the transformation of a client in clinical practice, apply techniques if there are blocks to transformation, and assess the somatic elements of transformation
16. Apply SP Skill of "5-step Cycle" to help client deepen physiological awareness of a transformation, highlight changes in capacity to orient and defend at a somatic level (linking core organizers explicitly as necessary), and integrate the transformation into new belief,

primary emotion, shifted somatic experience of self, new posture, gesture, stance, etc. options.

17. Implement use of movement during the integration stage of the process in clinical practice to help client integrate transformation of belief, emotional processing and somatic experience in relation to the current issue.
18. Assess application of SP skills as a therapist in clinical practice, particularly ability to work with clients somatically, with a current issue.
19. Assess ability as a therapist in clinical practice to be in attunement with the client, and adapt application of skills based on client's state, participation, and collaboration.

Module 6

1. Identify therapist's implicit and explicit contact statements to client's "narrative" and "present moment experience" during observation and clinical practice for an attachment/developmental themed session. Placing greater emphasis on implicit dynamics.
2. Apply SP skill of "contact" to "funnel toward a frame" in a developmental themed clinical session.
3. Assess quality and effectiveness of therapist's contact statements for attunement and "funneling to frame".
4. Assess and connect client's verbal and somatic "narrative" by explicitly naming and elucidating connection between "core organizers."
5. Apply SP principles of unity and nonviolence by using contact statements that are open to collaboration with and feedback from the client.
6. Apply SP skill of "tracking" for indicators client's ANS arousal state, affect regulation and level of consciousness during a developmental themed session.
7. Apply SP skill of tracking for somatically held procedural emotional defense strategies, evidence of attachment rupture and/or developmental wounding during an developmental themed session.
8. Apply SP skill of tracking for indicators of attachment rupture and/or developmental wounding, or subsequent emotional dysregulation, limiting beliefs, missing or ineffective developmental movements, actions supportive of interaction with others and autonomy and independence in /developmental themed sessions.
9. Apply SP skill of "framing," by identifying a "core organizer" activated by the client's narrative and the emotional or cognitive procedural tendencies of the client for collaborative exploration in developmental themes.
10. Apply SP skill of "5-Step Cycle" to study the organization of experience in relational connection with the client and within the SP Principles/Foundations.
11. Assess application of the "5-Step Cycle" and the therapist's ability to bring forward the "organization of experience", stay in relational connection, identify relationally based cognitive, emotional and somatic procedural tendencies, and work within the SP principles.
12. Apply SP skill of "stitching to the frame" to manage states of consciousness of client in clinical practice.
13. Demonstrate SP skill of "refining the frame" in the processing stage, (narrowing the focus of the processing stage, collaboratively demonstrates fidelity to the SP Foundations as well as demonstrates the therapist can guide selection of a small enough piece of work that supports transformation and integration).
14. Use previously established resource(s) and track the client's physical experience of the resource while applying the "5-step cycle" to study the organization of experience of a developmental issue.
15. Create an SP experiment that evokes (in Accessing Stage), challenges procedural learning or offers a missing experience (in Processing Stage) or prompts transformation (at

Transformation Stage), or anchors transformation (at Integration Stage) in a developmental issue practice session.

16. Apply SP “child state” processing skills in a developmental themed session.
17. Apply SP skills at the transformation stage of the process to identify and explicitly name the transformation of a client in clinical practice, apply SP techniques if there are blocks to transformation, and assess the somatic elements of transformation
18. Apply SP Skill of “5-step Cycle” to help client deepen somatic awareness of a transformation, highlight changes in capacity to orient and defend at a somatic level (linking core organizers explicitly as necessary), and integrate the transformation into new belief, primary emotion, shifted somatic experience of self, new posture, gesture, stance, etc. options.
19. Implement use of movement during the integration stage of the process in clinical practice to help client integrate transformation of belief, emotional processing and somatic experience in relation to the developmental issue.
20. Discern and discuss factors that support and also impede working with various self-states in populations with complex trauma histories.
21. Assess application of SP skills as a therapist in clinical practice, particularly ability to work with clients somatically, with a developmental issue.
22. Assess ability as a therapist in clinical practice to be in attunement with the client, and adapt application of skills based on client’s state, participation, and collaboration.

Module 7

1. Identify cultural considerations for SP skills, application of supportive theory and SP Foundations based on practices of acceptance, diversity using vignettes provided and generated by the student cohort.
2. Predict and propose modifications, alternate responses to address culture in SP practice.
3. Demonstrate ability to predict and revise approach during an SP session of the client's choice of theme.
4. Evaluate the effectiveness of SP skills during practice session of the client's choice of themes.
5. Critique and apply feedback in skills application and adjust skills during practice sessions.
6. Prepare and present a relevant paper on cultural considerations.
7. Demonstrate ability to lead a small group discussion on the application of SP with a special population (i.e. children, adopted children, parents, elderly, immigrant/refugee, etc.).
8. Demonstrate ability to lead a small group discussion on the application of SP on a special topic (i.e. a particular diagnosis, a particular attachment style, a particular current issue, etc.)
9. Examine the application of SP with a special population.
10. Examine the application of SP with a special topic.
11. Apply SP case conceptualization outline to a clinical case study.
12. Prepare and present a clinical case study in a small group.

Module 8

1. Explain a description of enactment from clinical practice.
2. Predict enactments from self-reflections and strategize for their appearance in SP practice.
3. Demonstrate ability to predict and revise approach during an SP session based on exploring enactments.
4. Assess the effectiveness of SP skills during practice session based on themes of enactment.
5. Assess and apply feedback on skills application and adjust skills during practice sessions.
6. Demonstrate ability to lead a small group discussion on the application of SP with a special population (i.e. children, adopted children, parents, elderly, immigrant/refugee, etc.) that includes enactments.
7. Demonstrate ability to lead a small group discussion on the application of SP on a special topic (i.e. a particular diagnosis, a particular attachment style, a particular current issue, etc.) that includes a focus on enactments
8. Discuss the application of SP with a special population with reference to enactments.
9. Discuss the application of SP with a special topic.
10. Apply SP case conceptualization outline to a clinical case study.
11. Prepare and present a clinical case study in a small group.
12. Create and deliver a small group presentation on one of the following topics: Integrating SP with other modalities, SP and a special topic, SP and a special population, or your SP journey. (Other topics considered).