

Advanced Trauma Training: Trauma-Informed Stabilization Treatment for Complex Trauma and Dissociative Disorder

Developed by Janina Fisher, PhD.

Synopsis

Although Sensorimotor Psychotherapy techniques are uniquely suited for clients with complex symptoms and disorders, they must be adapted to their unique needs. Whether the clients suffer from Complex Post-traumatic Stress, Borderline Personality Disorder, DDNOS or DID, they will be able to benefit from the Sensorimotor Psychotherapy emphasis on mindfulness, present day focus, modulation of autonomic arousal, and resourcing. In addition, dissociative disorder clients can benefit from working with the body because it is a shared whole for all parts of the personality. Despite the challenges clinicians face when more complex clients have issues of body-phobia or difficulty with movement and action, Sensorimotor techniques can be adapted to suit the special requirements of more fragile, fragmented clients. Slowing down the pace, working with 'slivers' of information with an emphasis on increasing the client's resources, combining body and parts work, and repetition or practice all contribute to expanding the Window of Tolerance.

Using a combination of PowerPoint presentation, case discussion, video, demonstration, and experiential exercises, this training, developed by Janina Fisher, will enable participants to increase their facility with techniques for working with more complex, fragmented, or dysregulated clients. In addition to didactic presentation, experiential exercises, video, demonstration, and session practice time as learning modalities, the Advanced Trauma Training will also include client role-play and case presentation to increase integration of the material into clinical practice.

Prerequisites

Successful Completion of the Level I Training and recommendation from Level I Trainer(s).

Course Structure

Four 2-day modules.

Contact Hours

The length of the Specialty Training is approximately 50 contact hours.

Content Outline

- Challenges in treatment of complex trauma and dissociative disorder clients
 - dysregulated autonomic arousal
 - impulsive and unsafe behavior
 - difficulty connecting to one's emotions and body
 - dissociative compartmentalization
 - difficulty sustaining dual awareness
 - hypo- or hyperactive defenses
- Addressing barriers to effective treatment
 - increasing the client's capacity for mindfulness and top-down regulation
 - working with the body with body-phobic clients
- Overcoming traumatic reactions through the practice of new actions
 - titrating interventions for dysregulated clients
 - facilitating neuroplasticity through repetition and practice
 - resolving inner conflicts that impede healthy boundaries and defenses
- Working with memory with dysregulated clients
 - reorganizing orienting and defensive responses with dissociative clients
 - helping dysregulated clients sustain dual awareness
 - processing present experience and implicit memory
- Becoming a neurobiological regulator
 - somatic countertransference
 - attunement and contact with fragmented individuals
 - interactive regulatory techniques for dysregulated/dissociative clients

Teaching Methods

Didactic

- 60%
- Lecture, Discussion, Video Recordings

Experiential

- 40%
- Demonstration, Experiential Exercises, Practice Sessions

Learning Objectives

Module 1: Sensorimotor Interventions for Working with Structural Dissociation

1. Assess challenges to stabilization common to clients with complex trauma and dissociative disorders
2. Distinguish autonomic arousal patterns accounting for de-stabilization
3. Describe the Structural Dissociation model and its implications for treatment
4. Specify animal defense-related inner conflicts that threaten stability or stall the treatment
5. Identify approaches to increasing the client's capacity for mindfulness and top-down regulation

6. Identify complications of treatment posed by the effects of traumatic attachment

Module 2: Working with Defensive Responses and Trauma-Related Internal Conflicts

7. Evaluate interventions for working with attachment-seeking parts
8. Facilitate interventions for working with hypervigilant and self-destructive parts
9. Specify interventions for working with collapsed, immovable parts
10. Summarize how to develop somatic resources that speak to the differing needs of different parts
11. Examine the differing challenges presented by traumatized clients who are either hyperactive or cannot act
12. Summarize how to work with orienting and defensive responses in dissociative and dysregulated patients

Module 3: Traumatic Attachment and Self-Destructive Behavior

13. Summarize the effects of disorganized attachment status
14. Identify the effects of disorganized attachment on the therapeutic relationship
15. Identify approaches to resolving trauma-related inner conflicts
16. Explain alternative approaches to working with memory when clients cannot regulate arousal sufficiently to process experience
17. Reorganize self-destructive and addictive behavior
18. Reframe chronic trauma-related patterns as survival resources

Module 4: Challenges to Resolution of Complex Trauma-Related Disorders

19. Identify how to set appropriate goals for treatment in complex trauma-related disorders
20. Specify complications to trauma treatment: somatization, phobia of normal life, inability to tolerate states of calm or pleasure, working with negative cognitive schemas
21. Recommend working with somatic symptoms as unresolved memories
22. Specify approaches to working with cognitive schemas as unresolved memories
23. Identify techniques for helping clients to overcome fears of calm, success or pleasure
24. Summarize a neurobiological view of 'integration'