

## M1A Learning Objectives

At the end of Module 1A of this CE activity, participants should be able to:

### SP Foundations

1. List three facets of the SP foundations.
2. List and describe 6 SP Principles.
3. Describe the purpose of the SP Foundations.
4. Name one way you can promote *The Body as Resource* with clients.

### What is SP?

5. Describe the main goals of each of the three phrases of treatment.
6. Explain the *Sensorimotor Psychotherapy* approach to two audiences: mental health practitioners and general public.
7. Explain a rationale for working with somatic experience.
8. List the five *Stages of the Process*.
9. List the five *Core Organizers* that comprise the *Organization of Experience*.
10. Explain the role of the *Modulation Model* in the Sensorimotor Psychotherapy approach.

### Environmental Considerations

11. Name two environmental factors that could impact the therapeutic experience.
12. Name two adaptations that could be made for providing *Sensorimotor Psychotherapy* remotely.
13. Explain one benefit and one risk of using props to explore somatic experience.

### SP Perspective of Well-being

14. Describe Sensorimotor Psychotherapy's perspective of well-being.
15. Identify the five aspects of well-being that comprise Sensorimotor Psychotherapy's well-being continuum.
16. Explain how racism and oppression impact well-being.
17. Describe Sensorimotor Psychotherapy's definition of trauma.
18. Identify three brain processes that may be compromised as a result of traumatic experience.

### Tracking

19. Describe the Sensorimotor Psychotherapy skill of *tracking*.
20. Explain a rationale for tracking *Core Organizers* in the present moment rather than just the client's narrative.
21. Explain how implicit bias may impact *tracking*.

22. Name two *somatic indicators* of well-being.

#### Contact

23. Describe the Sensorimotor Psychotherapy skill of *making contact*.

24. List three factors that impact the quality and resonance of *making contact*.

25. Explain the purpose of making more *explicit contact* in the *Container Stage*.

#### Framing

26. Describe the Sensorimotor Psychotherapy skill of *framing*.

27. List the two components of a *frame*.

28. Explain the difference between an *initial frame*, *refined frame*, and *transformation frame*.

#### Steps to Mindfulness

29. List the series of five skills that comprise the *Steps to Mindfulness*.

30. Explain the purpose of the *Steps to Mindfulness* when working with somatic experience.

31. Explain the difference between a *mindfulness directive* and *mindfulness question*.

32. Explain the purpose of *stitching to the frame*.

## M1B Learning Objectives

At the end of Module 1B of this CE activity, participants should be able to:

### Day 1

1. Construct a rationale for working with the *Organization of Experience*.
2. Explain how the *Sensorimotor Psychotherapy Foundations* support the exploration of the *Organization of Experience*.
3. Construct a rationale for therapeutic choice points when contacting *narrative and core organizers of present moment experience*.
4. Apply the Sensorimotor Psychotherapy skill of *tracking* to identify indicators of well-being.
5. Examine *contact* that resonates with the client.
6. Assess the impact of making *contact* to the implicit (what is implied but not stated or observable).
7. Apply the Sensorimotor Psychotherapy skill of *making contact* to indicators of well-being.
8. Apply the Sensorimotor Psychotherapy skill of *framing*.

### Day 2

9. Explain how *stitching to the frame* using the *Steps to Mindfulness* help keep the focus on exploration throughout a session.
10. Examine how the Sensorimotor Psychotherapy skill, *Steps to Mindfulness*, reveals both richness and complexity in the client's *Organization of Experience*.
11. Apply the Sensorimotor Psychotherapy skill *Steps to Mindfulness* for a theme of well-being.

## M2A Learning Objectives

At the end of Module 2A of this CE activity, participants should be able to:

### Stress Distress and Trauma

1. Describe how stress, distress, and trauma impact ANS regulation.
2. List three indicators of sympathetic nervous system hyperarousal.
3. List three indicators of parasympathetic dorsal vagal hypoarousal.
4. Describe complex and relational trauma.
5. Explain one way in which the impact of oppression-based trauma (race-based, intergenerational/collective, gender identity-based) differs from complex relational trauma.

### Dissociative Continuum

6. Explain the SP model for the dissociative continuum.
7. Define state dissociation; psychoform and somatoform.
8. Name a potential indicator of psychoform dissociation.
9. Name a potential indicator of somatoform dissociation.
10. Explain the correlation between othering and oppression and dissociation.
11. Explain the correlation between sense of self; states of well-being, challenge, stress, distress, and trauma; and dissociation.

### Patterned Dysregulation

12. Explain how procedural learning related to traumatic experience differs from procedural learning that occurs from repetition.
13. Describe the correlation between procedural learning and affective states, emotions, and belief systems.
14. List one way to work with procedural learning in the *accessing stage*.
15. List two ways to work with procedural learning in the *processing stage*.
16. Describe the rationale for working with the *organization of experience* to evoke *state specific* procedural learning.

### Experimenting

17. Describe the two types of Sensorimotor Psychotherapy Experiments.
18. Provide a rationale for the *pause* before the experiment.

### Modulating ANS Activation

19. Explain the concept of ANS arousal modulation.

20. Explain the correlation between Polyvagal theory and the Sensorimotor Psychotherapy *Modulation Model*.

21. Identify indicators of safety, danger, and life-threat (according to Polyvagal theory).

#### Resourcing

22. Explain what a *resource* is in the Sensorimotor Psychotherapy approach.

23. Explain the difference between *survival resources* and *creative resources*.

24. Describe the benefit of *somatic resources* in *phase one* work.

25. Identify and discuss a rationale for a *somatic resource* to regulate hyperarousal, and a somatic resource to regulate hypoarousal.

#### Transformation

26. Identify an indicator of *transformation*.

27. List the three main skills for *transformation*.

28. List two skills to apply when challenges come up in *transformation*.

29. Provide a rationale for creating space for emotions that come up with *transformation*.

#### Integration

30. List two Sensorimotor Psychotherapy skills unique to the *integration stage*.

31. Name one way to deepen the *transformation* through all *core organizers* in the *integration stage*.

32. Provide a rationale for the Sensorimotor Psychotherapy concept of *savoring the transformation*.

33. Provide a rationale for *somatic integration*.

#### Case Conceptualization Phase 1

34. Construct a rationale for phase one interventions based on client's presenting issues and goals, phase oriented treatment, and client's regulatory capacity.

## M2B Learning Objectives

At the end of Module 2B of this CE activity, participants should be able to:

### Day 1

1. Construct a rationale for working with the *Organization of Experience*.
2. Explain how the *Sensorimotor Psychotherapy Foundations* support the exploration of the *Organization of Experience*.
3. Construct a rationale for therapeutic choice points when contacting *narrative and core organizers of present moment experience*.
4. Apply the Sensorimotor Psychotherapy skill of *tracking* to identify indicators of well-being.
5. Examine *contact* that resonates with the client.
6. Assess the impact of making *contact* to the implicit (what is implied but not stated or observable).
7. Apply the Sensorimotor Psychotherapy skill of *making contact* to indicators of well-being.
8. Apply the Sensorimotor Psychotherapy skill of *framing*.

### Day 2

9. Explain how *stitching to the frame* using the *Steps to Mindfulness* help keep the focus on exploration throughout a session.
10. Examine how the Sensorimotor Psychotherapy skill, *Steps to Mindfulness*, reveals both richness and complexity in the client's *Organization of Experience*.
11. Apply the Sensorimotor Psychotherapy skill *Steps to Mindfulness* for a theme of well-being.

## M3A Learning Objectives

At the end of Module 3A of this CE activity, participants should be able to:

### Phase Two: Addressing the Past

1. List two indicators of readiness in a client ready to transition from *phase one* to *phase two*.
2. Explain the difference between explicit and implicit memory.
3. Describe a rationale for working with implicit memory to process unmetabolized traumatic experience.
4. List one indicator of collective memory a therapist can track for in the client's narrative.

### Sensorimotor Sequencing

5. Describe the Sensorimotor Psychotherapy skill, *Sensorimotor Sequencing*.
6. Explain what an *orienting response* is.
7. Explain what a *defensive response* is.
8. Describe how *Sensorimotor Sequencing* can be used to regulate ANS hyperarousal, complete *orienting responses*, and complete *defensive responses*.
9. Describe how to access a *sliver of memory* to active *state-specific* ANS hyperarousal for *sensorimotor sequencing*.

### Reinstating Active Defense

10. Explain the Sensorimotor Psychotherapy skill, *Reinstating Active Defense*.
11. Describe two clinical situations in which *Reinstating Active Defense* is an appropriate choice for trauma processing.
12. Explain the difference between the Sensorimotor Psychotherapy skills, *Sensorimotor Sequencing* and *Reinstating Active Defense*.

### Meaning and Trauma

13. Describe the Sensorimotor Psychotherapy skill, *Going for Meaning*.
14. Explain a rationale for working with emotions somatically.
15. Name two emotions prominent in trauma therapy.

### Completing the Dissociative Continuum

16. Explain complexity and multiplicity (secondary and tertiary dissociation).
17. Explain how to apply Sensorimotor Psychotherapy skills for trauma themes when working with primary structural dissociation.
18. Explain how to apply Sensorimotor Psychotherapy skills for trauma themes when working with secondary structural dissociation.

### Therapeutic Relationship

19. Describe one risk and one benefit of the therapeutic relationship.
20. Explain the Sensorimotor Psychotherapy approach to working with therapeutic enactments.
21. Describe the first step toward working with microaggressions.
22. Examine how the role of the therapeutic relationship shifts through the phrases of treatment.

### Well-being, Phase Three and Beyond

23. List three somatic experiments supported by Sensorimotor Psychotherapy skills for trauma themes that can be explored in Phase Three with clients.
24. List four aspects well-being that are significant to more satisfactory participation in daily life.
25. Explain what a completion pattern is and how to approach them in phase three work.

### **M3B Learning Objectives**

At the end of Module 3B of this CE activity, participants should be able to:

#### Day 1

1. Examine the correlation between processing traumatic experience and mourning/grief.
2. Assess when to apply the *Sensorimotor Psychotherapy* skill of *Sensorimotor Sequencing*, and when to apply the skill of *Reinstating Active Defense*.
3. Describe how to set up the application of *Sensorimotor Sequencing*.
4. Apply the Sensorimotor Psychotherapy skill of *Sensorimotor Sequencing* for ANS hyperarousal.
5. Apply the Sensorimotor Psychotherapy skill of *Sensorimotor Sequencing* for *orienting and defensive responses*.
6. Identify the skill of *Reinstating Active Defense* in clinical example.
7. Describe how to set up the application of *Reinstating Active Defense*.

#### Day 2

8. Apply the Sensorimotor Psychotherapy skill of *Reinstating Active Defense*.
9. Examine how to work with meaning making in Sensorimotor Psychotherapy.
10. Identify the skill of *Going for Meaning* in clinical demonstration.
11. Apply the skill of *Going for Meaning*.
12. Examine the correlation between physical/somatic states and meaning (belief and emotion).
13. Apply a Sensorimotor Psychotherapy experiment for either proximity seeking action or boundaries that supports the identification of a somatic relational resource.