Mastering the Four Stages of Trauma Assessment & Treatment

The ravages of trauma and its aftereffects are increasingly prevalent in our society. According to the National Center for PTSD, about 60% of men and 50% of women in the U.S. will experience at least one trauma in their lives. For some, the results can be catastrophic and life-changing. Approximately 7-8% of the population will experience full-blown PTSD at some point in their lives, with roughly 8 million adults contending with PTSD during a given year.

If you are relatively new to the field, this Trauma Competency Conference will provide the thorough grounding in the assessment and treatment protocols you need to successfully diagnose and treat clients suffering from PTSD. If you have decades of experience, the two-day seminar will help you expand and deepen your skillset based on our review of the latest cutting-edge research in brain science, cognitive science, and neurology; through hands-on exercises designed to promote experiential learning; and via the real-world insights of board-certified trauma experts with over three decades of clinical experience.

Whether your approach is eclectic or firmly rooted in a particular treatment methodology, you will also learn how to integrate the “active ingredients” common to all evidence-based trauma treatments via the IATP Treatment Structure. This four-stage protocol will enable you to effectively manage the trajectory and pacing of treatment to meet the specific needs of every client.

**STAGE I: Preparation & Relationship-Building**

With every mental health treatment, the quality of the therapeutic alliance is the most decisive factor in achieving a successful outcome. In Stage 1, you will learn and master skills for:

- Establishing and maintaining the essential rapport needed for clients to summon the courage and strength required to confront and resolve trauma and its aftermath.
- Quickly and accurately employing assessment tools such as the PCL, TRS, ACE, and CAPS for diagnosis and treatment planning.

**STAGE II: Psychoeducation “Tools for Hope”**

Clients suffering from traumatic stress often enter therapy in crisis, feeling overwhelmed and demoralized by their failed attempts to manage their symptoms, and despairing that their pain can be alleviated. It is essential to address these issues immediately with “Tools for Hope” that provide relief and begin the healing process during the very first session. These include:

- Skills for stabilizing clients, including sensory grounding, envelope containment, postural grounding, motivational interviewing and positive expectancy, Thought Field Therapy/Emotional Freedom techniques, and more.
- Skills clients can use to recover their sense of personal safety. These include multiple techniques for self-regulation and anxiety reduction, such as interoception, mindfulness and “body-fullness,” diaphragmatic breathing, guided visualization, peripheral vision, and core relaxation.
Psychoeducational and cognitive restructuring tools that empower trauma survivors to catalyze their natural resilience by overcoming their “victim mythology.” Shifting clients from an external to an internal locus of control enables them to regain a sense of self-efficacy and focus on solutions rather than problems.

Learning how trauma is more accurately understood as an injury rather than an illness and why the underlying biological and neurological mechanisms must be addressed before proceeding to treatment using cognitive and behavioral techniques. Practitioners and clients jointly explore the nature and functioning of the human threat detection system, the polyvagal response, and the roles these systems play in the development and maintenance of posttraumatic symptoms and adaptations (e.g., addiction).

STAGE III: Desensitization & Integration

In order to heal, clients need to gently recover and then consciously consolidate their memories of traumatic events, gradually eliminating their intrusive power through self-regulation and by creating narratives that give these experiences meaning and context. In Stage III, we examine proven methods that have shown the greatest promise in treating trauma. These include:

- Reviewing and discussing all of the “Category A” evidence-based treatments for PTSD through the lens of recent meta-analytic research on treatment outcomes. These include Prolonged Exposure Therapy, Cognitive Processing Therapy, Stress Inoculation Training, and Eye Movement Desensitization & Reprocessing.
- Comparing and contrasting all of the “Category B, C, D & I” treatments, including Traumatic Incident Reduction, Accelerated Resolution Therapy, Acceptance and Commitment Therapy, as well as other methods that employ hypnosis and energy psychology.
- Learning and practicing Narrative Exposure Therapy. This IATP cognitive-behavioral technique utilizes five separate narrative methods that help clients gently and efficiently navigate the painful process of recovering and integrating trauma memories.

STAGE IV: Posttraumatic Growth & Optimization

The healing process does not end with desensitization and integration. It is also essential to reactivate the natural maturational processes that have been stalled by the client’s trauma adaptations. In this phase of the training, we will learn about Forward-Facing Trauma Therapy, a real-time treatment and self-help methodology for maintaining a regulated nervous system and achieving an intentional, principle-based life.

Ancillary Treatment Skills: Grief & Bereavement

Clients commonly experience considerable grief and mourning as they come to terms with the traumatic experiences that have proven so painful and disruptive to their lives. In this phase, we:

- Identify simple and elegant strategies for facilitating the completion of both common and complicated trajectories of grieving and bereavement.
- Learn to recognize thwarted healing as the cause of complicated bereavement along with skills for rapidly re-starting this organic process to a successful resolution.

**Additional Benefits**

While trauma work is deeply satisfying, ongoing exposure to our clients’ trauma may cause therapists to begin developing compassion fatigue that ultimately leads to professional burnout. In this section of the training, we demonstrate how the trauma assessment and treatment skills we’ve learned can be applied to ourselves in order to navigate and ameliorate the stress and rigors of clinical work.