

Advanced Clinicians' Training & Consultation Group

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Self-Trauma Model: Applications for torture survivors

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Issues especially relevant to torture survivors that STM can address

- Extreme posttraumatic stress, especially hyperarousal and reexperiencing
- Easily triggerable memories
- Trust issues
- Low self-esteem, helplessness, and other cognitive sequels
- Isolation associated with unspeakable memories, despite local support



Basic needs before therapy

- Food, shelter, regular medical attention
- Physical safety
- Danger to self, others
- Amnesty
- Other legal or governmental issues
 - Immigration
 - Child welfare
- Support groups, other structured social contexts



Therapeutic relationship

- Overall importance in tx outcome literature
- Development of trust and sense of safety
- Context for compassion and positive regard
- Activates and processes historic schema
 - Expectations of maltreatment
- Blocks to relationship formation
 - Therapist assumptions about client limitations
 - Impairments, culture, language, psychological mindedness
 - Therapist need to avoid witnessing pain
 - Client fears, expectations, interpersonal history



Grounding and centering

- Grounding
 - Redirecting awareness away from escalating processes to contact with physical stimuli, here-and-now, new activity (e.g., movement)
- Breath training
 - Effects of slower, deeper, diaphragmatic breath
 - Taught in early sessions, homework
- Access to regular prayer, meditation, or mindfulness exercises, if relevant



Trauma processing

- Titrated exposure and the therapeutic window
 - Gradual, careful exposure to memories when client is ready and feels relatively safe/stable
 - Sometimes affect regulation skills should be increased beforehand
 - Non-structured, may appear as conversation
 - Balance between therapeutic challenge and overwhelming internal experience (Therapeutic Window)
- Multiple targets, varying times and intensities
- Acceptance of avoidance, reframed as titration



Trigger grid

- Review of times client has been triggered, what are specific triggers
- How does client know has been triggered
 - Thoughts, feeling, behaviors after triggered
- What can client do
 - Identify process as triggered
 - Things could say to self
 - Things could do to change contact with trigger



Mindfulness

- Moment-to-moment awareness of current experience, without judgment and with acceptance
 - Observing and “letting go”
- Meta-cognitive awareness
- Transmission through therapist mindfulness
- Teaching mindfulness principles and skills
- Teaching meditation
 - Contraindications



Identity

- Development in childhood or adulthood
- Interventions are more process-level
 - Focus on self-knowledge, self-reference, empowerment
 - Detective-work on self
 - Thoughts, feelings, basis for reactions
 - Avoid excessive interpretations, lecturing
 - Use non-leading, open-ended questions
 - Regular redirection to what client thinks, feels, guesses about what is happening or might be helpful