

## Welcome to Trauma Resolution Therapy (TRT)

You are reading this booklet because either:

Your counselor wants you to have more information about TRT with which to make an educated decision about your participation, or

You have already decided to enter the TRT process and your counselor wants you to use this booklet as a guide for beginning and completing your phase 1 writings.

Before beginning, please read the entire booklet, including the section on the reading process. (We also highly recommend that you read, **Stop Treating Symptoms and Start Resolving Trauma!** by Denice Adcock Colson. This is available from the counseling center or online at [www.AuthorHouse.com](http://www.AuthorHouse.com).) Then, begin by getting yourself organized. Purchase a three-ring binder, which has pockets, and, if you want to hand write your incidents, fill it with lined paper. Of course, typing it is allowed and encouraged. Changes are much easier to make in a word processing program. Some participants have also found it helpful to use dividers with tabs to keep their phases organized and easily accessible. Do not lose any of your correct writings. With the exception of phase one, each phase builds on another phase. After you have completed all five phases you may choose to shred or even burn your completed work. Or, you may choose to translate it into a novel of hope for other trauma survivors! Until then, however, keep it in a safe place where no one else is likely to find it and read it.

Before writing all of your incidents, please complete only three and show them to your counselor. Most new participants don't get the style right the first time. Allowing your counselor to see your first three writings and correct them is part of the learning process. This will give you more of an exact idea of what is expected in phase one.

Direct all and any questions to your counselor. Remember, it is not your responsibility to know how to do this; it is your counselor's responsibility to lead you through this process. If you do the writing wrong over a period of time, it is not your fault, but your counselor's. They are responsible for making sure you are doing it right. They will not be looking at spelling, only make sure you have followed the five rules.

Shall we begin?

### ***Phase One: The Written Component***

Phase One describes in writing the actual trauma-causing event or events. This is done by recalling the traumatic incidents caused by the identified perpetrator and writing each incident down on a separate sheet or sheets of paper. The incidents may be written in any order. It is not necessary to write them in chronological order. The order in which they are recalled is fine.

There are five basic rules to follow in completing Phase One writings. These are called rules rather than guidelines because it is very important that the writer follow these exactly in order to experience the resolution of the past. This is not journal writing, letter writing, or an “empty chair technique.” This is a very specialized narrative writing and nothing else should be substituted for this step unless the therapist is working with a special population.

Here is an example of a completed Phase One incident for a person not writing about his or her own addiction:

*I was in the 5<sup>th</sup> grade, about 11 years old. You picked me up from school. The car smelled like beer. I could tell you had been drinking because the radio was blaring country music, and you were slurring your words. I felt nervous. You were driving recklessly, and I felt scared. Some policemen stopped us and made you get out of the car. One made you walk around outside, and the other talked to me. I could see you stumbling and laughing real loud. Some friends rode by with their mothers. I felt embarrassed. The police put us in their car and took us to jail. They called dad to come and get me and arrested you. I felt terrified and angry at you. I felt embarrassed and confused.*

A completed Phase One incident for a person writing about his or her own alcohol or drug use will appear as follows: (the differences will be discussed at the end of this section under “exceptions”)

*We’d been married two years or more, and a group from my work invited us to a float trip in New Branunfels. Diane and I hadn’t been getting along real well. We thought we’d have some fun, and it’d be like when we were dating. She asked me not to get drunk, but I told her I’d do what I wanted to do. Inside I promised myself I’d only get a good buzz. A couple of the guys I knew filled a cooler with beer, put it in its own raft, and floated it down the river. For a while, Diane stayed near us, and then I didn’t notice her again until we were getting near the end. We were all pretty drunk and Diane was pouting and ignoring me. I started tickling her and teasing her to get her to lighten up. She just got in the car. I sat next to her in the back seat. I was still elbowing her and making comments about some of the girls in their bikinis. She looked away from me and pressed her lips together. Everyone else was quiet and looking straight ahead. I got mad, and I started shouting obscene comments out the window about some girls. Diane started asking me to be quiet. I hung out the window and grabbed at some girls at a stop light. Diane started to cry. I felt victorious. The next day I felt stupid and embarrassed. Diane refused to go to any more office parties and did not speak to me for days.*

Non-chemically dependent trauma survivors should adhere to the following five rules:

**Rule 1:** The perpetrator of the trauma is addressed in the second-person language, “you,” rather than by name or in the third person

Example: “We were sitting in the living room and you became angry. **You** picked up a lamp and threw it at my head.”

Using the third person language distances the writer from the emotion and reality of the incident. Using the person’s name would make it seem as though we are writing a letter *to* the person. This is a narrative *about* the incident, not a letter expressing feelings *to* the perpetrator.

*Rule 2:* Always write in the past tense no matter how recent it feels or occurred.

By writing about the event as history, you begin the process of actually putting it behind you.

Example: “We **were** sitting in the living room, and you **became** angry. You **picked** up a lamp and **threw** it at my head.”

*Rule 3:* At the beginning of the narrative, record the approximate time and place the incident occurred. This can include the exact date and location, or the season, grade of school, approximate age, any time-defining facts that can be recalled.

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Example: “**We had been married two months. We were living in an apartment in Chicago.** We were sitting **in the living room** and you became angry. You picked up a lamp and threw it at my head.”

*Rule 4:* This is an explanation of what happened. Write a factual description of the incident with as much related detail as possible. Philosophy, opinions, and rhetorical explanations should not be included.

*Rule 5:* Write how you felt about the incident at the time. Write your feelings simply, without couching them in terms of “you made me feel . . .”

Example: “I felt **scared** and **angry.**”

Putting all the rules together, a Phase One incident writing will look like this:

*It was 1982, and we had been married for two months. We lived in an apartment in Chicago. We were sitting in the living room, and you became angry. You had been drinking beer and had probably had 7 or 8. You picked up a lamp and threw it at my head. I screamed at you and ran toward the bedroom. You called me a bitch and chased me. You grabbed my arm and slapped me. I picked up a statue next to me and hit you in the head. You stumbled back and fell on the*

*couch. After a few minutes, you started laughing then got up and left the house. I felt hurt, angry, and scared.*

A completed Phase One incident for a person writing about his or her own alcohol or drug use will appear as follows:

I had been drinking all evening. It was the Fourth of July 1984. Some buddies and I decided to find a car to steal. We found a red pickup and went for a joy ride. Some police spotted us because we were swerving all over the road. I was afraid we were going to crash. When they caught up with us, my friend finally stopped. There were two police cars and the officers had their guns drawn and pointed at us. I felt terrified and thought I was going to die. They took us to jail, and then called our parents. I dreaded facing my father. I was 16 years old.

For chemically dependent people writing about their own toxic behavior, Rule 1 is changed. Rather than the second person language “you,” use the first person language, “I,” when describing a trauma-causing event caused by your own toxic behavior. Also, include a description of your chemical use, the amount and identity. The other four rules remain the same.

Exceptions:

- A. When writing about someone else’s’ trauma-causing behavior, if chemical use was involved during or prior to the incident, include a description of the chemical use, if possible, and the behavioral signs of the chemical use.

Example: “You had been **smoking pot all evening**. I woke up and noticed you were gone. I found you **stumbling** around the house, talking to the furniture.”

- B. For Crisis Managers and Crime Victims relating incidents not involving an interpersonal relationship, you may opt for using the third person language, “he” or “she,” rather than the second person language.

Example: “The car was smashed from the front and the rear. **She** was lying in the street with blood everywhere” or “**He** broke through the front door and he lunged at me.”

After reviewing the rules, the individual is asked to write three incidents and show them to the counselor before writing any more. This is because most people do not write them correctly the first time and the counselor will need to review them and correct them. If the participant has written too many incidents and is required to rewrite them all, he or she may become discouraged and give up. However, after mastering the writing style of Phase One with the counselor’s direction, the participant may write as many incidents about the identified perpetrator as he or she can remember. The participant must save all the completed Phase One writing since they will be used in Phase Two. I recommend the use of a three ring binder. The

participant must complete Phase One, writing and reading, before beginning Phase Two. Participants must not start any phase without the direction of the counselor.

### **Examples of Other Phase One Incidents**

#### **Stranger Assault/Robbery**

It was Sept 29, 2001. It was around 8:30 PM and I was walking out to my car from a jewelry store. As I passed some vans, a couple of guys ran out from between them and grabbed me. I felt terrified! I started screaming. One held me by the shoulders while the other grabbed my purse. The jewelry store bag was around my wrist and one of them tried to get it off. I felt like my wrist was cut or scraped and bruised, but it wouldn't come off. I had the keys in my fist in that hand and the bag handle wouldn't slide off. I kept screaming. They were cursing and threatening me. The one holding me by the shoulders said shut up bitch or I'll shoot you." The one trying to get the bag off was saying something like "come on, come on". People must have started running toward me because suddenly they took off with my purse but left the bag. Immediately there were people right next to me trying to help me. I heard a car squeal real loud in the parking lot. I was shaking uncontrollably. I felt terrified, confused and afraid I was going to die. I felt scared because they had my purse with my address and lots of personal information. A kind woman led me inside and we were surrounded by several other people including a security guard with a gun. I felt safer. I called my husband and he came to get me.

#### **Home Robbery**

It was December 19, 2000. We came home from a Christmas party around 11:00 PM. As we pulled into the driveway, I noticed our dog ran out of the garage when I opened the garage door. I remember thinking, "How did he get in there? Did I leave the door to the garage open?" I looked to see and it was closed. I asked my wife, "Did you let Patty into the garage?" She looked confused too and said "No, I don't think so." Patty was a Golden Retriever and I'm sure we would have noticed had she tried to sneak past us. I felt confused and disoriented. I looked around the garage and noticed things were out of place. Could Patty have knocked down my new power tools? They seemed to be lying on the ground. I felt the hairs on my arm and the back of my neck stand up. Something inside me said "BE careufl1" My wife sat frozen in the seat next to me. I reached out and put my hand on her leg. I said a fast prayer in my head "God help us! What should we do?!" I suddenly put the car in reverse and backed out as fast as I could. Patty followed us wagging her tail. I stopped long enough for my wife to open her door and call Patty to her. She jumped up on my wife's lap, a big Golden in the front seat of a Mercury Sable, and climbed over us to the back seat. For a few moments, I felt a little hysterical and thought I would laugh or cry. Then I backed on out and headed down the street. We stopped a couple of houses down and I called the police on my cell phone. They arrived with no lights or sirens and followed us back p to our house. They walked around the house and found the back door standing open. The glass had been broken and they had reached around an opened it from the inside. I had not put the alarm on. After the police went through the house

to make sure no one was there, we went in to survey the damage. Everything was a mess. All of our electronics were gone. Bedroom drawers were dumped on the floor. My wife's grandmother's silver service was gone. Our computers were gone. I felt devastated. I felt guilty and responsible. I felt angry and sad. I put my arms around my wife and she cried. I felt helpless. I prayed to God to please help us and thanked him for keeping us safe.

### **Verbal Abuse**

It was June 12, 1999. We were on our honeymoon at Disney World. We had just arrived at the hotel and were unpacking our things in our room. I felt excited to be there and a little nervous about making love later. We were chatting about how nice the room was and talking about what we wanted to do during the week. You said, "Where's my electric razor?" I said, "I don't know." You said irritably, "It was in the bag with the rest of the stuff I brought over for you to pack for me." I said "Sorry, I didn't see it." You suddenly got louder and said "You stupid idiot, I put it in there!! What are you, blind?!" I felt stunned and shocked. I had never heard you talk that way before my stomach knotted and I stood frozen for a second. "Maybe it's over in that bag," I said. You stomped over to the other bag and angrily turned it upside down and dumped everything on the bed. You reached out, snatched the razor, and said, "There it is. I knew I put it in my bag!" Then you went on unpacking and talking about what you wanted to do. Son you wanted to make love. I felt numb and shocked, confused, hurt and worried. You never said anything about your outburst; you never said you were sorry. You acted as if nothing had ever happened. I felt alone, isolated and disoriented.

### **Car Accident**

It was November 1987. I was driving home from work in my two day old, gently used (but new to me) red, Nissan 300ZX with T-tops. I was in the center lane, next to the concrete divider. There were five lanes of traffic to my right, all headed south at about 45-50 miles an hour. I noticed a lot of flashing lights ahead and off the highway on the access road. I remember thinking "They must have had a big accident up there." I noticed a police car entering the highway, headed the same direction I was. His car seemed to pitch and swerve. I thought, "He's driving too fast!" Then his car started spinning across the lanes of traffic. He spun across five lanes of traffic without getting hit and landed right in front of me facing me. I remember thinking to try to swerve to miss him, but didn't want to go into the car on the right of me or into the huge concrete dividers to the left of me. I remember thinking "I can't get around him." I felt panicked, but everything happened so fast. I felt the impact of hitting him head on. I felt my body being thrown against my seat belt hard and my head slung around. I felt like a ball in a pinball machine being bounced around in every direction. I heard lots of loud crashing sounds and squealing tires. When my car came to a stop, I was facing north one lane to the right of the one I had been in. There were stopped cars everywhere and several seemed to be wrecked. I felt scared and very sore. My neck hurt, my back hurt, my knees hurt, my chest hurt. I had a cut on my collarbone area from the seat belt and my knees had gone through the hard plastic dash. I sat stunned while people ran up to talk to me. They pried my door open and asked if I was

okay. I said yes but I hurt. They asked if I could breathe, if anything felt broken. The EMT's seemed to get there immediately. At some point, I had started crying. They tried to calm me down and told me not to move. They said they wanted to get me on a backboard and take me to the hospital. They asked me what had happened and I told them about the police car spinning across traffic. I asked how the policeman was and said I tried to go around him but there wasn't any room. They assured me he was fine. Everything sort of runs together from there. They strapped me on a backboard and put me in an ambulance. They drove me to a nearby hospital. I must have had them call some friends for me because they later came and picked me up. I felt discouraged, hurt, sad, angry, overwhelmed, alone, and in physical pain.

### **Death of a Loved One**

It was Saturday in October 1997. I was sitting on the sofa with my husband watching T.V. The phone rang. It was my father. He said that you had been taken to the hospital with chest pains and that he was in the emergency room waiting for you to be examined. He said he would call back when he knew something. I felt shocked and scared. I told my husband and began to cry. The phone rang again about a half-hour later. Dad said they had admitted you and taken you right to surgery. E said that the doctors were hopeful and that we should pray. He said they suspected a blockage and were doing a bypass. I asked if I should come and he said, not yet. I felt stunned and scared. I began praying and decided to pack my bags anyway. I searched for flights on the internet. Several hours later, dad called again. I could tell when I answered that the news was not good. Dad was trying to stay calm but his voice was shaking. He said that the surgery had not gone well, that there were more problems than they had anticipated. He said that you had a stroke and slipped into a coma and that the doctors said we should come. I felt numb, shaken and weak kneed. We scheduled a flight and went to the airport. When we got to the hospital dad was crying. We went in to see you. You looked pale, weak and disheveled. You looked so small. I felt helpless, sad, broken hearted and scared. I sat by your bed all night. After several days, the doctors said that you had no brain activity. After talking to dad, we decided to take you off life support. You passed away only minutes after the tubes were removed. I felt sad, angry, brokenhearted, and mad at God, regretful, helpless and depressed. You were only 55 years old.

### ***The Reading Process***

The second component of all five TRT phases is the reading process. Many clients come in after completing their writings for the first time and say, "Well, I wrote it, but it didn't really do anything for me." That is fine! Writing is really only required to get the facts and feelings on paper so that you can read them without introducing survival responses of analysis and avoidance. Writing the incident is not enough to resolve trauma. It must be read out loud with the TRT structure in place in order to receive the full benefit. Other people come in having had very emotional experiences while writing. Either response is normal and to be expected, but the reading is still vital!

Before being allowed to read a correctly written incident, it is very important that the participant understand the structure of the reading process. This structure remains. The same whether the reading is done one-on-one with a counselor or in a group-counseling setting. In an individual session all, the time may not be devoted to the TRT reading process. The session may start out with, "How have things been this week?" or other more traditional, though no client centered, counseling questions. Client centered questions like "What would you like to focus on today?" turn control of the session over to the client and undermine the structure of the TRT process and do not belong in any part of a TRT individual or group session. Usually toward the beginning of the session I will ask, "Did you get some writing done this week? Can I see it?" or for more advanced clients, "Do you have something to read this week? How many?" Then the rigid structure begins. It goes like this:

1. (counselor) What are you feeling about reading?
2. (participant) Nervous, anxious, but ready.
3. (counselor) Please read slowly. Read just what is written, don't add anything or stop to make comments or explanations. When you are done, lay your paper in your lap and sit quietly and don't say anything until I ask you to. You may begin when you are ready.
4. (participant) Reads incident. If the person reads too fast, counselor interrupts and slows them down as many times as needed. Specialized techniques are taught in the Certification workshop. It is not unusual for the person to cry and need time to pull himself or herself together.
5. (counselor) When the participant finished, the counselor uses discretion as to when to say, "What are you feeling?"
6. (participant) "Hurt, sad, really angry and stupid."
7. (counselor) "As you were reading, I felt" . . . the counselor inserts empathetic feelings focused on the perpetrator, for example, "I felt betrayed, used, hurt and insulted."
8. (participant) The participant is instructed in advance to respond with "thank you." No discussion or questions are allowed here.
9. (counselor) "What are you feeling?"
10. (participant) "I feel betrayed and used and still angry."
11. (counselor) At this point the counselor may let the participant read another incident and repeats steps 4-10 or move on to the "observational feedback." Moving on to observational feedback would signal the end of the reading process. Observational

feedback means that the counselor gives physical observations of the participant without any emotional interpretation. For example: "I noticed that your eyes turned red and you cried. I noticed your hands shook and your feet were tapping." The counselor would never say, "I noticed you were sad or angry," as that would be interpreting the client's feelings for him or her. While this is a part of traditional client-centered therapy, it is not a part of the TRT reading process.

12. (participant) Again, the participant is instructed in advance to respond with "thank you." No discussion or questions are allowed here, either.
13. (counselor) "What are you feeling?"
14. (participant) "Still angry, but relieved, tired, and sad."
15. (counselor) "Thank you for reading, Sara." Let's take a deep breath.
16. (participant) Takes a deep breath and the reading process is finished.

This structure is very important and is designed to keep the client in his or her feelings and not in his or her head. Analyzing the incident does not move the resolution process along at this point. Identifying it and grieving over it does. Again, this is a simplified version since all types of variables happen when actually going through the process. However, deviation from the structure is not allowed in the TRT process.

The same process takes place in group but on a grander scale. Since there are more participants who must interact with each other during a ninety-minute group, all the time is structured to avoid mishaps.

There are four basic stages in the TRT group process. First, the facilitator asks each group member to "Check-in." During this time, each group member briefly states how he or she is feeling at that moment. Common responses are "rushed," "nervous," "tired," etc. Also, since many participants are seen only in group, if any extraordinary events have occurred that the counselor needs to know about, i.e., the death of a loved one, etc., they are disclosed during this time so that individual sessions can be scheduled.

Next, the facilitator leads the group through processing the previous week's session. Each person who read the previous week is lead through the process. The facilitator will ask, "Kim, briefly summarize what you read about last week," then "What did you feel after the reading? Did anything related to it come up for you that evening or during the week?" After she finishes responding, each group member is asked to share with the reader his or her feelings after the reading, any ways he or she could relate to what was read, or any memories triggered by the reading. Since no discussion is allowed during the actual reading process, this is when a group

member can say, “Something just like that happened to me, and when you read that last week I felt like I was going to explode!” This part of the process provides for continuity from week to week and allows the clients to identify with each other more specifically. Also, not all of the grieving takes place in the group. This allows the facilitator as well as the group members to hear about the participant’s grieving experiences outside of group and helps the participants to tie the grieving experiences to the reading process. Try to keep this part brief, however.

After everyone has had an opportunity to share, the facilitator will ask, “Who wants to read tonight?” If more than one person came prepared to read, I will ask, “Who’s going first?” In a working group of six to eight members, it is not unusual to run out of time. I have even had people draw numbers and set up a queue for the next week. Working groups are anxious to read and get through the process. New groups, however, take time to get moving. We will frequently end early for the first few months.

After a reader is chosen, the facilitator will ask everyone else to place anything he or she is holding on the floor and to give complete attention to the reader. The focus should remain on the reader for the duration of his or her reading and processing. The facilitator asks, “Kim, what are you feeling about reading tonight?” The reader will give a brief answer, usually something like nervous, or embarrassed, or calm. The facilitator then instructs the reader, “Read slowly, speak up so everyone can hear. You can start when you are ready, and turn the paper over or close the book to let us know when you are finished.” The reader then proceeds to read the incident from beginning to end, just as it was written, with no comments or explanations. Many times people feel the need to stop and cry or hesitate. Usually the group sits quietly, grieving with the person. Offering tissue or touching can be disruptive to the flow of emotion and is discouraged. I place a box of tissues in the center of the circle where it can be reached by everyone.

When the reader has finished, the facilitator will ask, “What are you feeling, Kim?” the reader responds with feeling words like angry, hurt, sad, disappointed, etc. It is the facilitator’s job to help the person stay focused on the perpetrator rather than on herself. Words like “Ashamed” or “guilty” usually mean the reader is focusing on her response to the trauma. Reminding the reader to focus on the perpetrator by saying, “What do you feel about your mother’s behavior, Kim?” usually helps shift the focus.

After the reader has said as much as she wants to, the facilitator asks the rest of the group, “What did you feel about what Kim read?” Notice the use of “what” rather than “how.” This gets the group members to use more feeling words and to stay focused on the reader rather than on themselves. Each group member will look the reader in the eye and express his or her feelings. No giving of advice, judgment or blaming of the reader is allowed.

When the group member is finished, the reader responds simply with “thank you.” A verbal acknowledgment is important to help prevent shock and withdrawal in the reader. After all group members have finished, the facilitator returns to the reader to ask, “What are you

feeling?” sometimes the reader may identify with the feelings expressed by the rest of the group, or she may feel the same as before.

When the reader has finished expressing her feelings, the process is repeated if she has another reading. If not, the facilitator moves on to Observation feedback by asking the group, “What did you observe while Kim was reading?” Group members take turns making physical observations, without interpretation. In other words, they express only what they saw, not what they think the person felt. Examples include, “I noticed you were clenching your hands into fists,” “I noticed you cried,” “You laughed when you read the first line,” etc. It is very important for the facilitator to help the group members stick with observations only and allow the reader to interpret the behavior for herself. This gives the reader practice in identifying her feelings and prevents a conflict between members. It also affirms to the reader that people were paying attention to her. When observations have been made, the facilitator returns to the reader to ask, “What are you feeling?”

Then the facilitator thanks the reader for sharing her story with the group. The facilitator asks everyone to take a deep breath, stretch and then goes on to the next reader. After all readings for the night are complete, the group stands for a group hug and/or prayer and dismisses until the next week. This process is followed regardless of the phase. The only exception is Phase Five B, the graduation and celebration phase.

We have been looking at the TRT group process as if through a pair of binoculars in order to see even the minutest detail. Now let us turn the binoculars around and get a wider view of a TRT group. Here you have a group of individuals all going through the TRT five-phase process, all writing uniformly about either their own addictions or the perpetration of someone else on their lives. They may enter the group at different times and each person works at his or her own pace. Therefore, each may be in a different phase. There may be a few in Phase One, a couple in Phase Two, one in Phase Three, one in Phase Four, and one ready to do Phase Five B. the group is closed in that no visitors are allowed and a person must come through the facilitator to participate. The group is open-ended in that there is not time limit; people come and go as they start and finish the five-phase process. I have had group participants take anywhere from six months to two years to complete all five phases, depending upon how many incidents they had to write about, how intense the trauma was, and how faithfully they attended and did their homework. However, the structure is consistent. The structure remains the same. The structure is what the participants depend on each week as they return to resolve their sources of trauma.