

Trauma-Centered Psychotherapy

Client-Centered Skillset for TCPT

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Introduction for Clinicians:

Clients sometimes ask for concrete skills that can be used at home to deal with symptoms that arise. In TCPT, the centrality of the trauma and the reverberation of its effects throughout the client's life are the main foci of each session throughout the treatment. Therefore, a successful skillset for clients to learn and practice must keep the trauma at its core. When clients develop a lens that helps them differentiate the past from the present, revise their distorted trauma-based schemas, and alter their relationship to the trauma, they can apply it on their own when situations in life arise that activate their trauma schemas. This will then help prevent the utilization of maladaptive coping skills.

We have developed the following three documents that you are welcome to give to your clients if you desire, or if they ask. The first one is a general statement of the methods of TCPT that provides a transparent summary of how we work, with encouragement for the client to adapt these ideas in their everyday life. The second one is a more specific rendering of these ideas that includes step-by-step procedures that can be practiced and integrated into a daily or weekly routine. The third one is an even more specific set of guidelines for clients to implement when they become distressed/triggered and a trauma schema is evoked. These are not prescriptive and you may choose which documents to share, or revise them as necessary for a given client.

We examined the skills suggested by 1) DBT, 2) Positive Psychology, 3) AA, and 4) common wisdom, with the initial thought that some of them might be applicable to TCPT. However, we found that many of these skills are focused on “emotional regulation” and “distress tolerance” which aim to limit emotional expression and therefore may work against our method (e.g., breathing exercises, muscle relaxation, counting to 10, trying to think only of positive thoughts). In this exploration we rediscovered that TCPT is not a skill-based technique, as it attempts to keep the client's attention on reviewing the details of their traumatic events, become desensitized to them, and work on integrating these experiences into a mature, complex

understanding of themselves and their relations with others. This process involves 1) exposure to the details of their memories, 2) identification of the traumatic root of their behavior and thinking, 3) mourning their losses, 4) reaching out to others, and 5) finding new interests and new people in the service of reparation. The risk of focusing on concrete skills is that the client will shift their focus onto these, rather than the traumatic event; they will inevitably view these skills as means of reducing their psychic pain rather than reducing their fear of their psychic pain. Nevertheless, with that caveat, we offer you the following client handouts.

INFORMATION FOR CLIENTS

To our Clients:

We believe that it will be helpful for you to understand what is involved in trauma-centered psychotherapy, so that you can participate as our partner in the healing process. Over the past forty years, we have learned a great deal about how traumatic events (including abuse, neglect, and mistreatment) negatively impact people, and even more about how to effectively recover from these injuries.

In these pages we would like to give you an overview of how the therapeutic process works, and then provide you with more specific, concrete skills for dealing with the impact of these traumatic events in your life now. Having a toolbox to handle challenging situations as they arise puts you in the driver's seat of your recovery.

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Applying the Methods of Trauma-Centered Psychotherapy in your Life

Avoidance

Traumatic events cause an overwhelming amount of fear and/or shame that shatters one's assumptions that the world is a safe or just place. It will come as no surprise to you that no one wants to dwell on these memories. Because these events almost always involve a perpetration of harm by someone onto someone else, society also does not want to bring these events up. Avoidance is fueled by our fear of these perpetrators, by fear of the emotions that erupt when remembering, and our fear of failure, weakness, and loss. Almost everyone initially believes that "remembering traumatic events will cause harm, or re-traumatize the person." We are taught not to air our dirty laundry, not to beat a dead horse, or dwell on the past; we are told to leave the past behind, let bygones be bygones, and "just move on."

However, avoidance is the number one symptom of PTSD and the number one cause of your pain. You simply cannot run away from the truth....it will seek expression.

In treatment, you will work with your therapist to identify and describe your traumatic experiences in detail, so that you are fully aware of the ways those events continue to affect you. We will encourage you to actively think about your memories at home also, until you are no longer afraid of them. This is a process called *desensitization*.

Identifying Triggers

When people, places, or things in your current life remind you of those traumatic events, you may become *triggered*, by which we mean you will become emotionally upset or distressed, and re-experience some of the fear, shame, and helplessness of the original event. People with PTSD can become triggered at any time and by anything, it is often quite unpredictable. What is predictable however, is that your triggers will have a direct connection with what happened in your traumatic event.

In treatment your therapist will work with you to identify the most common triggers, and even more importantly, to learn how to *decode* your triggers, meaning how to figure out the links between what just happened in the present, with what happened in your trauma. Treatment will teach you to become an expert at decoding!

Knowing your Trauma Schemas

Once triggered, your mind and body will automatically move to protect yourself from the intense emotions, as well as to protect yourself from being harmed again, as you understandably do not want to take a risk of being in danger again. The way you protect yourself is called a *trauma schema*.

Trauma schemas are rigid and repetitive cognitive distortions about yourself, relationships with others, and the world in general, which were created at the time of the trauma. Your trauma schemas are activated by your desire to avoid the pain you experienced in the past. Their purpose is to eliminate all uncertainty about what is happening, even if it means withdrawing from a relatively safe situation. For example, trauma schemas can be ideas, such as “all men are dangerous,” or behaviors, such as “I will not go into crowded spaces.”

Many trauma schemas interfere with relationships, activities, or expectations at work, and therefore are usually noticed by other people, who may react by withdrawing from you, or

confronting you. This is how PTSD can lead to interpersonal problems, which cause you additional pain and stress.

In treatment, you will work with your therapist to identify these repetitive behaviors, statements, and decisions you make in an effort to stay safe and avoid remembering your trauma. You will work on how these ideas and protective behaviors arose from your original trauma, and learn that these behaviors will not succeed in making you feel safe because the anxiety stems from the original trauma and not the current situation.

Knowing your trauma schemas will allow you, at home or at work, to interrupt them and reassure yourself that you are not in danger, that you are safe, and that you are only having a memory of a past event. This important process is called *differentiating the past from the present*.

Dealing With Your Perpetrator

Every trauma has a perpetrator, even in natural disasters. In trauma, the perpetrator dominates, overcomes, neglects, harms, shames or belittles, the victim. They were strong. They won. Most perpetrators get off without any punishment. Many are highly respected by other people. Sometimes you may still be living with them, or see them at family gatherings or at work.

Many victims deal with this by trying to forget their perpetrator, which fails. So they at least try not to mention them. As time goes by, your family and friends and society tend to forget the trauma ever happened, and also, by never mentioning the perpetrator, forget who harmed you! Eventually, you find it difficult to even say their name.

Unfortunately, this strategy backfires and contributes to the development of PTSD and your continued pain. Not openly discussing or disclosing your perpetrator actually protects them, and paradoxically keeps the secret of the trauma between you and them. This secret forms a private bond, an attachment, between the victim and perpetrator that gets in the way of your ability to be intimate with anyone else. In this insidious way, the perpetrator keeps their hold on you, their power over you, based on the secret that the two of you share.

In treatment, you and your therapist will work on identifying and describing your relationship with the perpetrator, and help you feel more comfortable talking openly about them, including naming them, and speaking about them to your friends and family. You will work to

understand how fear and shame forge a bond between you and the perpetrator that can have devastating effects on your relationships in the present.

Accepting the Truth, Accepting Loss

Things happen. Things break. Things are broken. Accidents happen. People die. Humans are violent. All of these result in loss. Trauma is all about loss. A loss of safety, a loss of protection, a loss of innocence, a loss of voice, a loss of rights, or a loss of loved ones. Healing and recovery cannot occur by denying these losses. The truth cannot be erased, as hard as some truths are. Humans process their losses by experiencing the emotion of grief, and going through the process of *mourning*, followed by *reparation*. When a fence falls down or a car breaks down, we fix them. PTSD interferes with reparation by making us afraid of the fence or the car and therefore avoid them; so they never get repaired. When a bully humiliates us publicly at school, and we have support, we come back with friends who stand up for us. If we are overwhelmed with fear, we stay home.

In treatment, you and your therapist will work on acknowledging and accepting your losses. You will work on tolerating and finding acceptance of the emotions of shame, fear and sadness that come with loss, without having to take actions to avoid or deny them such as through using substances, addictive behaviors, poor self-care, or risk-taking. You will work towards forgiving yourself for being human and not being able to prevent or stop the trauma, and learn how to find elements of what you lost in new activities, people, and nature. You will work toward your own and the world's repair through positive actions that help yourself, others, and the environment.

Reach Out for Help

Trauma happens when you are alone; but recovery happens when you are with other people. Because no one else knows, or could know, what happened to you in that moment, you feel alone and may even feel more comfortable when you withdraw from social functions. Someone may have failed to be there to protect you, which taught you that other people are unreliable. Isolation is thus a common situation for trauma victims. It is important to counter this urge.

In treatment, you and your therapist will work on overcoming your tendency to isolate yourself, and counter your ideas that other people do not care about you, are dangerous to you, or look down or are critical of you.

Later in treatment, especially if you join a trauma-centered group therapy or support group, you will find the seeds of *solidarity* with other trauma victims and survivors, and gain much confidence and esteem in realizing that the conditions in the world that led to your trauma have indeed caused suffering for many others. You may even begin to feel a desire to participate in *advocacy* efforts, by speaking in public, contributing to nonprofit or political movements, or volunteering in schools, hospitals, shelters, refugee camps, or day care centers.

Dealing with Childhood Trauma

If you experienced trauma in childhood, especially from dysfunctional family relationships, and especially when you were harmed or neglected by a parent, caregiver, or sibling, you will have the additional task of sorting out the distorted ideas you were taught then which are supporting your distress today.

All families create an intense social environment that instills many distorted ideas and behaviors in children, who grow up not realizing that these things were made up by family members and are not true. Here, it is the *family's* schemas that are taken in by the child, who is too young to know the difference between them and reality. Instead, they become your reality!

In treatment, you and your therapist will work to identify these distorted ideas, challenge them, and discover the ways you have applied them to your view of yourself and other people. Perhaps the most important of these are a child's *basic needs*.

All children have basic needs that are supposed to be provided by their parents/caregivers. Providing these needs assures a healthy development and a path for a thriving adulthood. These primary needs to be seen, to be heard, to be held, to be fed, and to be loved are part of our human condition and should be fulfilled. When these needs are not met or worse, punished, the growing child concludes something is wrong with themselves, which leads to a sense of shame, embarrassment, humiliation, and guilt for having these needs. Over the years the child no longer expects them to be met, and eventually denies these needs even in situations where someone else offers to fulfill them.

In situations where you feel out of control, you will be taught how to pause and ask yourself what need you are seeking, and then to remember when in childhood that need was denied. This is often the case when you seek out alcohol or drugs, sexual encounters, food, attention, or gambling: in each case you are seeking to fulfill a basic need that was denied you. This is then followed by an intense attack of shame, guilt, and sense of worthlessness, which confirms in your mind the voice of the person who denied you.

Summary

Recovery from trauma involves learning the antidotes to fear, shame, avoidance, and isolation: it involves *courage* to deal with what happened, *acceptance* of the loss, holding the perpetrator *accountable*, gathering *allies*, and developing *confidence* in one's own integrity and *acceptance* of one's essential humanity.

The ideas presented here have been long-tested. They are not fancy, they are not complicated, they are not expensive. We believe that there are no quick ways around trauma. It is a life-long journey of choosing yourself over the perpetrator. Having experienced abuse, trauma or mistreatment offers an opportunity to deepen your relationship to yourself and others, and to deepen the wisdom that comes from suffering. Freeing yourself from the chokehold of the trauma allows you to strengthen the bond with the people in your life who love and care for you, and take control over your precious life.

Key Ingredients for Successful Healing and Thriving after Trauma

This list summarizes some of the things you can do on an ongoing basis at home or at work, on a daily or weekly basis, to integrate the principles of trauma-centered therapy into your life. By making these a part of your routine, you will insure your recovery for the long-term.

Be Open about Your Trauma

Keeping your trauma a secret only protects the perpetrator and harms you. You must get it off your chest and let trusted individuals share this burden.

1. Notice when you want to avoid a person, place, or thing.
2. Immediately remind yourself WHY it reminds you of the traumatic experience.
3. Pause and do not proceed with avoiding it.
4. Wait until the anxiety you feel drops to a level of 2 on a scale of 1 to 10.
5. Say to yourself “this ____ reminds me of my trauma but it is not dangerous.”
6. Congratulate yourself for not avoiding it after your anxiety decreases.

Identify When You Have Been Triggered

Dealing with Fear:

- *Differentiate:* When fear rises in a present situation, tell yourself, for example, “I am afraid of dating because I was date-raped in college, *but* not all dates are dangerous, and I can tell the difference.”
- *Ground Yourself:* Observe your surroundings, align with reality, be aware of sensations of smell, touch, sight and sound in your environment, to remind yourself that you are safe in the present and not in danger back in the past.
- *Do Not Withdraw:* Stay put and do not exit the situation. Let the anxiety crest and then gradually go down. Once on the other side, you will feel better and be able to re-engage with the situation.

Dealing with Shame:

- *Identify Your Needs:* When you feel a sense of shame or humiliation, ask yourself which of your childhood needs were not fulfilled by your caretakers. Write them down.
- *Assign Responsibility:* Remind yourself that fulfilling your needs as a child is the responsibility of your parents/caregivers, not yourself.
- *Admit to Having Needs:* Give yourself permission to have needs, identify what they are, and counter your thoughts that you do not need help or that you can handle things all by yourself.
- *Identify Supports:* Review who in your life today sees you, hears you, holds you, loves you, and recognizes your worth and achievements.
- *Seek Out Supports:* Spend more time with the people who are capable of fulfilling your needs. Notice when you withdraw from them, avoid them, or reject their offers of support, and reverse your actions.

Know your Trauma Schemas

Having knowledge about your primary trauma schemas allows you to quickly realize the source of your distress when you become upset.

1. When you notice a trauma schema kick in, say to yourself, “I’m trying to protect myself, but I am not in danger now.”
2. Then repeat to yourself the revised statements you and your therapist have worked on.
3. Proceed to behave based on the revised statement (schema).
4. Notice the effect your new behavior has produced in the people around you.

Example:

Past traumatic experience:	“I was raped by a violent man”
Distorted trauma schema:	“All men are dangerous”
Repetitive behavior:	Saying ‘no’ to any man who approaches me
Connection with the past:	“Because I was raped by a dangerous man, I view all men as dangerous”

Current assessment:	“I am not in danger now so the anxiety I experience is a result of the memory of the rape”
Current revised statement:	“Not all men are dangerous, the one who raped me is”
Revised behavior:	I say “yes” for coffee with this man, and I may discover that I enjoy the company
Discrepancy:	Recognizing the discrepancy between the past and the present is the key to the difference between illness and wellness

Stop Protecting Your Perpetrator

The trauma was authored by the perpetrator, not you. The ugly colors of perpetration reflect on the perpetrator, not on who you are.

In Your Relationship with Yourself:

- *Identify the Perpetrator:* Who in the past said that you are worthless, stupid, unlovable, or are good for nothing?
- *Silence the Perpetrator’s Voice:* The voice in your head that tells you that you are worthless or unlovable, or should not be in relationships with others, is the voice of your perpetrator. Tell them to stand to the side and ask yourself, “what do *I* think?”
- *Know your Supports:* Make a list of the individuals in your life today who believe in you, love you, respect you, and see you as a worthy person.
- *Accept Compliments:* When you are praised or get a compliment, say “thank you” and take it in. Repeat it to yourself several times. Write it Down. (Example: “My boss told me I will be promoted; I am competent in what I am doing”).

In Your Relationship with your Partner:

- *Inform Your Partner:* Do you avoid intimacy? Do you push your partner away? If so, then your perpetrator shares your bedroom! Inform your partner that when they do certain things, you are reminded of your perpetrator, which is why you tense up or withdraw. (Example: “when you hug me too tightly, it reminds me of how my stepfather hugged me before he molested me.”)
- *Teach Your Partner:* Instruct your partner what to say when you are together. (Example: Have your partner say, “Let me know whenever you feel uncomfortable, and I will stop what I’m doing so we can talk about it.”)
- *Say Yes:* Whenever you are with your partner, especially at intimate times, say to yourself, “yes” to your partner, and say “no” to the perpetrator. Get the perpetrator out of your relationships!

In Your Relationship with Other People

- *Remind Yourself:* Every morning, say to yourself, “My perpetrator (even if they are dead) wants to isolate me in order to control and harm me, and I will not allow that today.”
- *Push Yourself:* Every day, at least once, get out of the house, talk to your neighbor, walk around the block, attend a social event, call or text someone to chat.
- *Question Yourself:* Each time you feel an urge to say ‘no’ to an invitation to join a social event, ask yourself if the ‘no’ is coming from you or your perpetrator.

Accept your Losses

Put your trauma into a “file” and set it aside. Do not let it engulf your life. You will never forget it, but do not let it control your life any longer.

- Make a list of your losses.
- Take time on a regular basis to remember them (for example, for a few minutes every week, read the list).

- Tell yourself it is okay to feel sad. When you do become sad, remind yourself you have a good reason to be sad, and let it be. It will pass.

Practice These Skills

Rehearsal leads to success and mastery. All successes are a product of many repetitions and rehearsals. If you did not succeed, try again until you do.

Celebrate Each of Your Successes

Your successes are as real as the past traumas; do not minimize or mute them. Thriving is living a full life again.

- Find a time each week to celebrate the things you accomplished that week.
- Develop a repeating gesture or action to mark this celebration.
- Be sure to carry out this celebration in the presence of someone who cares about you.

Guidelines for Dealing with Distress in the Moment

As you learn the process of trauma-centered psychotherapy, you will find that you will be able to do everything your therapist is doing, by yourself, and with the help of your family or friends. When you suddenly become distressed, follow these guidelines:

1. **PAUSE.** Give yourself a second to think.
2. **NAME THE PROBLEM:** Immediately tell yourself: “This is my PTSD; this is a memory; this is my trauma.”
3. **IDENTIFY THE TRIGGER:** Turn your attention onto what *just happened* a second ago that caused you to become upset; go through the list of triggers you have learned in your therapy.
4. **LINK YOUR BEHAVIOR TO THE TRAUMA:** Connect the trigger to a related piece of your traumatic event, and recognize the connection.
5. **SEPARATE PAST FROM PRESENT:** Assess the danger now, in comparison to the past, and tell yourself, “I am upset about what happened *then*, not now; I am not in danger now.”
6. **TELL YOURSELF THIS ANXIETY WILL PASS.** Wait. Breathe. Remind yourself that your distress will go up and then go down, and you will get through it, like a passing thunderstorm.
7. **ALLOW YOURSELF TO FEEL SAD OR ANGRY THAT IT HAPPENED.** As your upset begins to drop, let yourself feel the emotions (sadness, anger, etc.) about what happened to you, and let yourself grieve your losses. Having emotions is natural.
8. **ACKNOWLEDGE TO YOURSELF THAT THIS TAKES COURAGE.** Tell yourself that dealing with all this pain directly, honestly, takes a lot of courage. Accept the fact that no life is perfect, every person has challenges, and find gratitude in being a part of humanity.
9. **INFORM A MEMBER OF YOUR SUPPORT NETWORK.** As soon as possible, inform your loved ones of this moment and share at least a little bit of what you just went through, and then, most importantly, accept their offers of care and love.

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