# Descriptions of Therapy Modalities and Philosophies

### **GENERAL MODELS**

- 1. Crisis Intervention: Crisis intervention therapy aims to intervene as quickly as possible after the traumatic event occurred. The goals are to help the client clarify the event, minimize the use of destructive coping skills, and create productive coping techniques.
- **2. Psychoeducation**: This therapy involves the therapist teaching the survivor about the impact of trauma, common disorders associated with trauma, and ways to cope with symptoms.
- **3.** Cognitive Behavioral Therapy: Cognitive behavioral theory stems from the idea that people are characterized by how they think about the world, and that the way they think and interpret events leads to emotional responses. The goal of CBT in the context of rape crisis counseling, is to teach the client to identify and change irrational or dysfunctional thoughts about their rape that are causing negative emotions and reactions (Hembree et. al 2003).
- **4. Psychodynamic /Psychoanalytic:** Psychoanalytic therapy aims to uncover unconscious thoughts, emotions, and behaviors. Psychodynamic theory also focuses on uncovering repressed thoughts and emotions while focusing on the dynamics of the client's family.
- **5. Client Centered**: Client centered therapy, developed by Carl Rogers, is focused on the therapist establishing a warm, safe environment for the client, and providing genuine empathy. The therapist normally does not give advice.
- **6. Substance Abuse/Addictions**: Substance abuse therapy involves addressing the use of a substance such as alcohol or drugs as a coping method. The goal is to work through the addiction and develop more adaptive coping methods. CBT and 12-step programs are the most common approaches.
- **7. Feminist Theory**: Feminist theory aims to empower women by focusing on power disparities in relationships.
- **8.** Creative Therapies: Creative therapy involves using art, dance, and drama, to promote self-awareness, express trauma, aid communication, and facilitate change. These techniques are often used in survivors who have difficulty verbalizing their emotions (http://www.mental-health-matters.com)
- **9. Somatic/Body Therapies**: Somatic therapy a holistically orientated therapy that works to address the "bodily" memory of trauma by helping the client recognize where they are carrying physical tension (www.inner-healing.com)
- **10. Solution-Focused Therapy**: Solution focused therapy seeks to establish goals and solutions to a client's problem that utilize the client's strengths. The client sets their own goals and is aided by the therapist through psycho education and interactive counseling.

**11. Narrative Therapy**: Narrative therapy involves telling and retelling the story of a trauma in order to better understand it, and work through the problems associated with it.

### SHORT TERM TRAUMA MODELS

- **12. Beyond Trauma:** A Healing Journey for Women (Covington): This is a gender-responsive integrated curriculum for trauma treatment and substance abuse. It involves psycho education, and focuses on developing coping skills (Covington).
- **13.** Critical Incident Stress Debriefing (Mitchell & Everly): This is a 7-phase group therapy designed to take place soon after a trauma occurs. During this process, clients go through the facts of their trauma, address their reactions and symptoms, and learn about stress reduction.
- **14. Cognitive Processing Therapy (Resick & Schnicke):** This treatment program combines cognitive therapy and exposure therapy. The cognitive component works to teach patients to identify and modify distorted thoughts. The exposure component consists of writing a trauma narrative and reading it repeatedly (Hembree et. al 2003).
- **15. Counting Method (Ochberg)**: In this technique, the therapist counts out loud to 100 while the client focuses on their trauma. Afterwards, the trauma is discussed and worked through. This method works by linking the trauma to the security provided by the therapist's voice.
- **16. Dialectical Behavior Therapy (DBT) (Linehan)**: DBT is based on the idea that some clients react abnormally to emotional stimulation and have a hard time returning from peak arousal to baseline. The goal of DBT is to teach methods to evaluate emotions and thus reduce life-threatening behaviors (www.mental-health-maters.com).
- **17. EMDR (Shapiro):** Eye movement desensitization and reprocessing involves the therapist asking the patient to generate anxiety producing images and thoughts while he or she elicits rapid saccadic eye movements by having the patient track the therapist's finger as it is waved back and forth. The belief is that eye movements override neural blockage of a traumatic event (Hembree et. al 2003).
- **18. Exposure (Foa & Rothbaum):** Exposure therapy was developed to help patients address their feared objects or situations through confrontation. In an exposure session, clients are instructed to use imagery, memory, and real life objects to construct a vivid, anxiety producing image of a traumatic event, and are encouraged to remain in the anxious state until their fear of the event declines (Hembree et. al 2003).
- **19. Growing Beyond Survival (Vermilyea)**: This is a self-management workbook for trauma survivors, that teaches empowerment and coping skills by helping clients understand their emotions and reactions. It can be used in individual or group therapy, as well as in a self-help capacity.
- **20. Guided Imagery (Naparstek & others)**: Guided imagery is a self-directed relaxation tool that helps the survivor of a traumatic event regain control by reducing their anxiety and

- anger. It helps survivors confront traumatic memories using indirect symbolism and metaphors, and works to naturally elevate serotonin-like neuro-hormone levels (Naparstek, 2001).
- **21. The PTSD Workbook (Williams & Poijula)**: This workbook helps clients understand PTSD and understand the symptoms plaguing them. It teaches coping skills and intervention approaches.
- **22. Somatic Experiencing (Levine, Rothschild, Ogden):** This technique is a short-term naturalistic approach to healing trauma. Somatic Experiencing involves using an awareness of body sensation to help people heal their traumas, rather than relive them (Levine).
- **23.** Skills Training in Affective & Interpersonal Regulation (STAIR) (Cloitre): This is a two-phase approach that works to help clients effectively regulate their emotions, and improve their interpersonal relationships.
- **24. Stress Inoculation (Meichenbaum & Kilpatrick)**: Stress inoculation therapy is aimed at helping patients develop coping skills for stress management. Patients are encouraged to implement skills such as deep breathing, role-playing, and modeling, when confronting rape-related fears (Hembree et. al 2003).
- **25. Thought Field Therapy (EvTFT) (Callahan)**: Evolving Thought Field Therapy is a mind, body, energy psychotherapy that involves alleviating negative emotions through activation of acupuncture points. The acupuncture meridians involved in the psychological issues are repeatedly tapped by the patients fingers in order to restore balance (TFT worldwide site)
- **26. Tapas Acupressure (Fleming)**: Tapas Acupressure was developed in 1993 by an acupuncturist. It works to reduce stress by focusing ones attention on specific acupuncture points in the face and back of the head. It has been used worldwide for treatment of trauma (TAT site).
- **27. Traumatic Incident Reduction (Gerbode)**: TIR works to alleviate the effects of trauma by having the client repeatedly "view" the traumatic event as if they were watching a videotape. The goal is to replay the incident enough times so that the client no longer has negative emotions associated with it (Healing Arts http://www.healing-arts.org/tir/)
- **28. Visual Kinesthetic Dissociation & Trauma Pattern Release**: In this approach, the client is encouraged to dissociate from the trauma and experience it as if out of body.

## INTEGRATED MODELS FOR TRAUMA AND SUBSTANCE ABUSE

**29.** Addiction and Trauma Recovery Integration (ATRIUM) (Miller & Guidry): ATRIUM is based on the idea that trauma impacts the mind, body, and spirit, and is designed to intervene on all fronts. The program utilizes a 12-week curriculum, and integrates CBT, relational treatment, psychoeducation, and expressive activities (Finkelstein et al.)

- **30. Concurrent Treatment of PTSD and Cocaine Dependence (CTPCD (Brady)**: This is twice a week, 16-session program designed for both men and women. It combines cognitive-behavioral techniques and exposure therapy to teach sobriety and coping skills (Najavitis)
- **31.** Helping Women Recover: A Program for Treating Addiction (Covington): The HWR program involves an integrated curriculum addressing trauma and addiction. The program includes 17 sessions designed to address the four modules of self, relationships, sexuality, and spirituality. The curriculum utilized expressive arts, relational theory, CBT, and a women's journal (Finkelstein et al.)
- **32. Seeking Safety** (**Najavitis**): Seeking Safety is a treatment manual based on the principles of safety and interpersonal treatment, and addresses cognitive, behavioral, interpersonal, and case management. This manual is based on present focused therapy and is designed for individuals with PTSD and substance abuse histories (Finkelstein et al.)
- **33. Substance Dependence PTSD Therapy (SDPT) (Triffleman)**: This is a five-month, twice a week program with a "trauma-informed phase" and an "addiction focused phase." It teaches coping skills, and uses cognitive restructuring and in vivo exposure (Najavitis).
- **34. Transcend (Donovan)**: This technique was developed for Vietnam veterans with PTSD and substance abuse problems. It involves 12 weeks of group therapy, rehab, skills development, and trauma processing (Najavitis)
- **35.** Trauma Adaptive Recovery Group Education and Therapy (TARGET)(Ford): This program involves a strength-based approach and works to reprocess emotions related to the trauma. It addresses substance abuse and PTSD, and teaches a step-by-step approach to overcoming PTSD symptoms (Najavitis)
- **36. Trauma-Relevant Relapse Prevention Training (Abueg & Fairbank):** This program is based on developmental and learning models, and helps clients learn to cope with their trauma by developing effective mechanisms and skills. It is a three phase program (Najavitis)
- **37. TRIAD (WCDVS)**: Triad women's trauma manual is designed to treat women with issues related to trauma, mental health, and substance abuse. It is a cognitive-behavioral model with a primary goal of reducing psychiatric and trauma-related symptoms (Finkelstein et al.)

### INTEGRATED MODELS FOR TRAUMA AND MENTAL HEALTH DISORDERS

**38. Trauma Recovery and Empowerment Model (TREM) (Fallot, Harris)**: This is a manualized group intervention program designed for trauma survivors with severe mental disorders. It covers 33 topics and focuses on teaching coping skills, establishing boundaries, and building relationships.