

Chapter 12

How Exactly Should We Do Phase One?

You may have noticed that the Phase Two part of this book starts on the next page. Some of you may be wondering when I'm going to tell you exactly how to do Phase One with all your clients with complex trauma. I hear you murmuring, "Tom, you have told me what not to do. You have told me not to make a big list of all the horrible stuff all at once. You have a few areas of inquiry that you suggest. You have said that I should be trauma-informed and sensitive in my approaches... but I don't know what to *do* for Phase One."

I'm only going to humbly suggest that you do know what to do. You know how to begin therapy with clients with severe trauma. They sit in front of you, and they try to find the words that explain why they are there. They don't tell you everything you need to know to fully conceptualize the case the first time you meet them, because how could they? You do not have everything that you need to fully conceptualize their case in the first session or two, because how could you? You will start Phase One by starting. You will listen closely and warmly and you will figure out how to start therapy at the intersection of what might be productive for them and what might also be tolerable for them. Maybe you don't need to start in a way any more complicated than that. I can promise, the next session and the next will bring more essential information. That information also becomes part of your stretched-out Phase One of understanding more deeply and richly who this client is, what they have survived, what they have learned, and where their unburdening might most productively and tolerably begin. The goal of Phase One with clients with complex trauma is not to fully and conceptually organize their whole recovery at first contact. It is to build an adequate enough understanding to safely start somewhere. Again, one of the big risks is that we become so overwhelmed with everything that we don't ever start somewhere.