

APPENDIX

Component-Based Psychotherapy

Clinician Self-Assessment

with Jana Pressley

For each item, please rate how you would currently describe your level of proficiency to engage in each of the following clinical skills or therapeutic stances.

Intervention Strategies for Relationship Component of CBT						
<i>Clinical skill</i>						
	Minimal proficiency					High proficiency
1. Establishing a relational stance; maintaining empathic attunement with clients.	1	2	3	4	5	
2. Offering a consistent, predictable, safe relationship in therapy.	1	2	3	4	5	
3. Assisting the client in building awareness of attachment style and implications for relational patterns.	1	2	3	4	5	
4. Supporting the client in developing relational skills, such as communication, attunement, assertiveness, problem solving, and boundary setting; practicing in the context of the therapeutic relationship to generalize to other relationships.	1	2	3	4	5	
5. Learning through therapeutic ruptures and repairs.	1	2	3	4	5	

Jana Pressley, PsyD, is Director of Training and Education at the Trauma Center at Justice Resource Institute and Adjunct Associate Professor at Richmont Graduate University. She is a national ARC trainer and consultant and also trains on the impact of trauma on adult spirituality.

From *Treating Adult Survivors of Childhood Emotional Abuse and Neglect* by Elizabeth K. Hopper, Frances K. Grossman, Joseph Spinazzola, and Marla Zucker. Copyright © 2019 The Guilford Press. Permission to photocopy this appendix is granted to purchasers of this book for personal use or use with individual clients (see copyright page for details).

<i>Therapist self-reflective capacity</i>					
	Minimal proficiency		High proficiency		
	1	2	3	4	5
1. Maintaining present-moment relational attunement and engagement while concurrently developing meta-awareness of the client's and therapist's individual processes and interaction patterns.	1	2	3	4	5
2. Developing balance in regard to boundaries, self-disclosure, level of action, "holding" experiences, and meeting clients' needs.	1	2	3	4	5
3. Understanding personal attachment style(s) and relational patterns and how these impact the therapeutic process.	1	2	3	4	5
4. Exploring the ways in which cultural and other contextual factors influence worldviews of the client and therapist and impact the therapeutic process.	1	2	3	4	5
<i>Supervision (only fill out if you serve as a supervisor; leave blank if you do not)</i>					
	Minimal proficiency		High proficiency		
	1	2	3	4	5
1. Providing a holding environment for the supervisee and the therapy itself.	1	2	3	4	5
2. Reflecting on parallel processes (between client's relationships, the therapeutic relationship, and the supervisory relationship).	1	2	3	4	5
<i>Intervention Strategies for Regulation Component of CBT</i>					
<i>Clinical skill</i>					
<i>Regulation</i>	Minimal proficiency		High proficiency		
	1	2	3	4	5
1. Supporting the client in building/expanding self-regulatory capacity, including awareness of, tolerance for, linkages among, skills to regulate, and ability to express aspects of experience: affect, cognition, somatic, and behavioral.	1	2	3	4	5
2. Teaching the client affective, cognitive, somatic, or behavioral tools for regulation:	1	2	3	4	5
a. Applying standard regulation tools/utilizing existing tools (grounding, imagery, breathing, mind–body tools, yoga).	1	2	3	4	5
b. Working with client to tailor tools (modifying standard tools or creating new tools collaboratively).	1	2	3	4	5
3. Matching regulatory tool to type of current client dysregulation (affective, cognitive, somatic, behavioral).	1	2	3	4	5
4. Supporting the client in expanding client window of tolerance.	1	2	3	4	5
<i>Regulation × Relationship</i>	Minimal proficiency		High proficiency		
	1	2	3	4	5
1. Using the therapeutic relationship to facilitate containment, reflection/self-awareness, and co-regulation.	1	2	3	4	5

2. Progressing in the regulatory role of the therapeutic relationship—from providing containment, to supporting exploration, to encouraging client's internalization of skills.	1	2	3	4	5
3. Assisting the client in developing regulatory tools that emerge organically from the therapeutic relationship.	1	2	3	4	5
4. Working through ways in which the therapeutic relationship acts as a dysregulating force with the client (e.g., intimacy as dysregulating).	1	2	3	4	5
<i>Therapist self-reflective capacity</i>					
Regulation					High proficiency
1. Managing personal reactivity, including affective, somatic, cognitive, and behavioral reactivity.	1	2	3	4	5
2. Expanding therapist window of tolerance.	1	2	3	4	5
Regulation × Relationship					
1. Maintaining an optimal window of engagement with the client (therapeutic relationship feels safe at a given time for both client need and therapist capacity).	1	2	3	4	5
2. Recognizing personal reactivity to clients.	1	2	3	4	5
3. Understanding the impact of personal tendencies regarding pacing (colluding with avoidance or pressure to “do” more in treatment).	1	2	3	4	5
<i>Supervision (only fill out if you serve as a supervisor; leave blank if you do not)</i>					
Intervention Strategies for Parts Component of CBP					
Clinical skill					
Parts work					High proficiency
1. Maintaining awareness that the current client presentation might be reflecting only one part of self; understanding that parts hold, embody, and/or express unresolved traumatic material.	1	2	3	4	5
2. Developing a curious, compassionate stance toward all parts of client; building empathic engagement toward fragmented self-states.	1	2	3	4	5
3. Acknowledging and supporting strengths of client parts.	1	2	3	4	5
4. Working with the client to reduce fragmentation; building cohesion, linkages, and communication among parts of self.	1	2	3	4	5

5. Engaging in indirect work with client parts.	1	2	3	4	5
6. Working directly with client parts.	1	2	3	4	5
<i>Parts × Relationship</i>	Minimal proficiency			High proficiency	
1. Engaging relational parts of the client as resources.	1	2	3	4	5
2. Identifying and learning to meet client parts' relational needs.	1	2	3	4	5
3. Using the therapeutic relationship to co-regulate parts of client self and to facilitate direct engagement with dissociated parts.	1	2	3	4	5
4. Exploring enactments with the client in therapy.	1	2	3	4	5
<i>Parts × Regulation</i>	1	2	3	4	5
1. Recognizing client patterns in affective, cognitive, somatic, and/or behavioral responses that may reflect parts of client's self.	1	2	3	4	5
2. Assisting the client in expanding each part's repertoire of coping skills.	1	2	3	4	5
3. Reflecting and soothing client dysregulated parts; regulating the whole by regulating specific parts.	1	2	3	4	5
4. Tailoring regulatory tools and strategies to developmental stage of parts.	1	2	3	4	5
<i>Therapist self-reflective capacity</i>					
Parts	Minimal proficiency			High proficiency	
1. Developing a curious, compassionate stance toward all parts of self and toward all parts of the client, honoring the role they have served.	1	2	3	4	5
<i>Parts × Relationship</i>	1	2	3	4	5
1. Maintaining compassion for all parts of client.	1	2	3	4	5
2. Building awareness of the ways in which therapist parts are activated through interactions with client parts.	1	2	3	4	5
3. Acknowledging and communicating with clients about therapist role in enactment.	1	2	3	4	5
<i>Parts × Regulation</i>	1	2	3	4	5
1. Noticing activation of parts of self and engaging in self-regulation in the moment.	1	2	3	4	5
2. Identifying and drawing on parts as therapeutic resources.	1	2	3	4	5

Supervision (only fill out if you serve as a supervisor; leave blank if you do not)						
	Minimal proficiency			High proficiency		
	1	2	3	4	5	
1. Offering a mindful, reflective environment to build awareness of all parts of the client and supervisee.						
2. Exploring interactions between supervisee and supervisor parts of self.	1	2	3	4	5	
Intervention Strategies for Narrative Component of CBP						
Clinical skill						
Narrative	Minimal proficiency			High proficiency		
	1	2	3	4	5	
	1. Assisting the client in linking triggers to past traumas.					
	2. Assisting the client in reframing behaviors as survival adaptations.					
	3. Supporting the client in the development of a trauma narrative; integrating aspects of trauma-related experience and decreasing related distress (verbal, affective, sensory/somatic, cognitive, behavioral).					
	4. Supporting the client in the process of integrating traumatic experience and evolving the trauma narrative into a life narrative.					
<i>Narrative × Relationship</i>	5. Redefining narrative work: moving beyond memory processing to meaning-making and identity development.					
	1. Assisting the client in developing a narrative about relational patterns, using a trauma-informed lens.					
	2. Supporting the client in building new relational patterns and a new story about self-in-relationship.					
	3. Bearing witness and “holding” the developing client narrative.					
<i>Narrative × Regulation</i>	4. Building the story of the therapy and the therapeutic relationship over time.					
	1. Providing the client with psychoeducation about trauma reactions and regulatory processes.					
	2. Paying careful attention to the client window of tolerance and window of engagement during trauma processing.					
<i>Narrative × Relationship × Regulation</i>	3. Supporting the client in the process of achieving regulation through narrative work or memory processing, including relief of alienation and shame that can emerge from being seen or witnessed.					

<i>Narrative × Parts</i>	1	2	3	4	5
1. Listening for one-sentence stories that may hold the defensive stance and defining narrative of a part of self.	1	2	3	4	5
2. Providing psychoeducation about dissociation and parts work.	1	2	3	4	5
3. Helping the client recognize implicit trauma narratives that are organizing identity and driving behavior.	1	2	3	4	5
<i>Therapist self-reflective capacity</i>					
Narrative	Minimal proficiency		High proficiency		
1. Recognizing personal stance or orientation to trauma work.	1	2	3	4	5
2. Acknowledging that therapist self-narrative is always present, even when it is implicit or unspeakable; understanding that there is no singular narrative.	1	2	3	4	5
3. Actively working on personal trauma or life narrative (building self-awareness), with growing recognition of professional narrative integrated into a larger self-narrative.	1	2	3	4	5
4. Recognizing the presence, operations, advantages, and limitations of the professional identities and organizing narratives that influence and at times drive work as a trauma therapist; working to shift and temper these as needed to increase therapeutic effectiveness in general and with particular clients.	1	2	3	4	5
<i>Narrative × Relationship</i>	1	2	3	4	5
1. Using self-disclosure appropriately with the client.	1	2	3	4	5
2. Codeveloping the therapeutic narrative with the client.	1	2	3	4	5
3. Acknowledging the intersections of traumatic experiencing and broader cultures and context of oppression and integrating recognition of these into the treatment process.	1	2	3	4	5
<i>Narrative × Regulation</i>	1	2	3	4	5
1. Understanding self-regulatory patterns and challenges as therapist.	1	2	3	4	5
2. Maintaining effective pacing regarding trauma processing; not colluding in avoidance or overfocusing on traumatic experiences.	1	2	3	4	5
<i>Narrative × Parts</i>	1	2	3	4	5
1. Recognizing implicit narratives in identity as a trauma therapist.	1	2	3	4	5
2. Cultivating the ability to be flexible around self-narrative as a therapist; drawing on different identities/roles in response to the unique needs of different clients.					

Supervision (only fill out if you serve as a supervisor; leave blank if you do not)						
	Minimal proficiency			High proficiency		
	1	2	3	4	5	
1. Bringing attention to pacing of narrative work in supervisee cases.	1	2	3	4	5	
2. Fostering increased supervisee awareness of latent identities and implicit narratives driving their general approach to trauma treatment, or held by less integrated parts of self.	1	2	3	4	5	
3. Assisting supervisee in obtaining and cultivating the personal supports and resources to manage internal experiences in order to increase attunement to and effective response with clients.	1	2	3	4	5	
4. Maintaining a grounded stance in the meaning of supervisory work; building mindful awareness of the impact personal and professional experiences and worldview has on supervisory style.	1	2	3	4	5	
Interactions among CBP Components						
<i>Clinical skill</i>	Minimal proficiency			High proficiency		
	1	2	3	4	5	
1. Incorporating assessment of the four components into conceptualization and treatment planning.	1	2	3	4	5	
2. Individually tailoring treatment by prioritizing among components for different client presentations.	1	2	3	4	5	
3. Developing an in-depth understanding of client's parts of self, regulatory processes, relational patterns, and life narrative.	1	2	3	4	5	
4. Attending to timing and pacing; shifting between CBP components and between macro focus and present-moment experience to contribute to effective pacing.	1	2	3	4	5	
5. Supporting the client in developing greater sense of connection to self and others, improving general functioning, and increasing sense of meaning and engagement with life.	1	2	3	4	5	
6. Reflecting on the therapeutic process and progress.	1	2	3	4	5	
<i>Therapist self-reflective capacity</i>	Minimal proficiency			High proficiency		
	1	2	3	4	5	
1. Cultivating personal ability to be actively engaged in moment-to-moment therapeutic interactions, while simultaneously maintaining meta-awareness of all parts of the client, self, and contextual factors that influence the therapeutic process over time.	1	2	3	4	5	
2. Parallel to client experience, developing therapist capacity to "show up" in professional and personal life, continually developing self-awareness, regulatory and relational capacity, and cohesive identity that includes all parts of self.	1	2	3	4	5	

Supervision (only fill out if you serve as a supervisor; leave blank if you do not)

	Minimal proficiency		High proficiency		
	1	2	3	4	5
1. Raising awareness about relational enactments, regulatory challenges, dissociative processes, and narrative development, involving the client and/or supervisee.					
2. Supporting the supervisee's present-moment attunement (to client and to self) and meta-awareness of the larger therapeutic process and the ability to effectively toggle between the two.					
3. Attending to parallel processes in the supervisory relationship that informs CBP work.					