

Certified TRE Provider Certification Process

TRE® Tension and Trauma Releasing Exercises

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I. Certification Overview

The goal of the TRE® training is that every TRE Certified Provider will be able to lead people safely through the Tension and Trauma Release Exercises.

'Don't be fooled by the simplicity of this work. Getting the human body to tremor through the use of these exercises is easy.

Knowing how to facilitate the speed, direction and integration of this trembling process requires substantial care and caution'

Dr David Berceli

Certified TRE Provider

- This is the name for people listed on the TRE for All website (<https://traumaprevention.com/tre-provider-list/>). Certified TRE Providers are accredited to teach TRE® as a stress relieving set of exercises.
- TRE Certified Providers are certified to teach individuals and small groups the trembling process.

Core skills required

- **Safety:** Capacity to lead others through TRE safely.
- **Limits:** Understand own personal and professional limitations, and take necessary actions and precautions.
- **Presence:** Capacity to stay connected to self and others during the TRE process (groundedness).
- **Regulate:** Capacity to identify and respond to specific TRE reactions, including Freezing, Flooding and Dissociation.
- **Self Practice:** Maintain a continued TRE self-practice.
- **Knowledge:** Understand TRE theory, and be able to apply theory to practice.

Supervision

Supervision covers contact with Mentor, records are entered by the Mentor and measured by 'Credits'.

A minimum of 13 credits, inc Final Cert Session, to certify.

There are a minimum of 4 supervisions on Personal Process, 4 on Teaching Individuals and 4 on Teaching Groups.

Assessment

Assessment covers written submissions, records are entered by the Student and recorded as 'Complete'.

A minimum of 18 completed assessments to certify.

Assessments include 2 Journal Summaries, Pre M2 and Pre M3 Agreements, 4 Write Ups on Teaching Individuals, 2 Case Studies, 4 Write Ups on Teaching Groups and 4 Write Ups on TRE Concepts.

'The process of doing TRE in one's own body is precisely what develops the ground and centeredness within oneself to provide these exercises safely and competently to others.'

Dr David Berceli

For people without an existing qualification as a therapist, teacher or trainer then the supervision requirements will almost certainly be greater.

The goal of the TRE training is that every TRE Certified Provider will be able to lead people safely through the TRE process.

Supervision is an ongoing negotiation depending on your existing skills, your study progress and time taken to complete each stage.

It is not unusual for more supervision sessions than the minimum outlined to be required as part of your learning plan. Typically we suggest groups of 4 extra supervisions.

For a table showing expected costs, scroll to the bottom of this page: <https://trecollege.com/certification/>

The completion of the minimum requirements does not guarantee you will be certified as a Certified TRE Provider.

It is recommended that the whole process, from Module 1 to Final Certification, takes 10 to 24 months.

TRE: Simplicity and Complexity

Because TRE exercises appear simple and easy, they can be particularly damaging in the hands of untrained individuals. Getting the human body to tremor through the use of these exercises is easy because the body is genetically encoded to tremor. However, knowing how to facilitate the speed, direction and integration of this trembling process requires substantial care and caution.

It is unfortunate that the ease and straightforwardness with which I demonstrate the effectiveness of these exercises is often misunderstood as simplicity. There is a great deal of complex behaviors, signs and indicators I am watching for when I guide people through these exercises. This requires training and supervision for the TRE provider. It is very problematic when people who are over confident and under competent believe they can guide people through these exercises without any training or supervision simply because it seems to look easy.

The improper use of these exercises by the untrained TRE provider can cause individuals to access deep emotional disturbances so quickly that they cannot integrate the experience. This can cause severely traumatized individuals to surface deeply hidden emotions of helplessness and hopelessness. If not approached professionally these unconscious and unresolved emotions could, in the worst case scenario, lead to severe depression and subsequent suicide ideation.

No individual should be teaching TRE to traumatized people without the proper training and supervision. The first rule of thumb, even for the most *'well intentioned'* individuals should be to cause no harm. I have worked with these tremors for over 20 years and have a very firm grasp of their simplicity and ease as well as their complexity and seriousness. Until the trainees are guided through a proper certification process which includes their own bodywork with TRE and supervision for individuals they are guiding through these exercises, they should not be guiding people through these exercises.

I have often seen that well-intentioned people are over confident and under competent regarding the TRE exercises. This is already an indicator that they have not grounded and centered themselves securely enough to be teaching these exercises. The process of doing TRE in one's own body is precisely what develops the ground and centeredness within oneself to provide these exercises safely and competently to others. Without this grounding and centered competency, the TRE provider will miss important

cues from the bodies of the people they are attempting to help. Without this training, unsuspecting individuals can have intense emotions activated by these tremors and then feel left alone and abandoned as they struggle to integrate these overwhelming sensations without appropriate guidance and insight.

Instead of helping individuals successfully through their internal traumas, individuals who have not been through the certification process can lead traumatized people into an experience of re-traumatization. This process would cause a greater sense of helplessness, hopelessness and disempowerment. Unfortunately, re-traumatization occurs when untrained individuals attempt to provide services that are beyond their scope of competency. This should be seen as professionally unethical and unfortunately uncaring towards the very individuals they claim they are attempting to help.

Dr David Berceci

2. Curriculum Overview

Outlined below are summaries of certification requirements to become a Certified TRE Provider. These include the minimum requirements as developed by TRE for All, Inc.

Before the final certification session with your primary certification trainer all Certified TRE Provider students need to have basic skills to competently:

- Work with individuals
- Work with groups
- Provide appropriate TRE self-regulating containment techniques and knowledge
- Provide basic TRE interventions techniques

The student will not be able to use TRE in their professional practice or charge a fee for teaching TRE until they are fully certified.

It is recommended that the whole process, from Module 1 to Final Certification, takes 10 to 24 months.

Module 1 Personal TRE® Process

Learn how to safely start and stop natural tremors. Core principles of grounding, self-regulation and avoiding freezing, flooding and dissociation will be taught.

Online or face-to-face, 2 days.

Module 2 Teaching TRE® to Individuals

Learn how to safely teach the TRE to individuals. Deepen your understanding and application of polyvagal theory. Learn how to create safety for people to meet their bodies.

Online or face-to-face, 2 days.

Module 3 Teaching TRE® to Groups

Learn how to facilitate the tremor process in small groups. Develop skills to explain TRE and ground and regulate diverse groups. Learn how to make group interventions to contain and support safety.

Online or face-to-face, 2 days.

Supervision with your Mentor

Supervision is an essential component of the training. Minimum requirements are 4 sessions on your personal process, 4 on teaching individuals and 4 on teaching groups plus 1 final certification sessions. More supervision may be required by your TRE Mentor, depending on your skills and background.

Online or face-to-face, min 13 credits to certify.

Assessment with your Mentor

There are ongoing assessments of your skills and understanding with your TRE Mentor. You submit write ups of your teaching and learning of TRE concepts. Pre M2 and Pre M3 you decide and agree with your mentor on whether to focus more on your personal process before seeking to teach TRE to others.

Online or face-to-face, min 18 completed assessments to certify.

You can submit, update and view all your assessments and supervision online via the Student Tracker App.

<https://trecollege.com/app/>

3. Choosing your TRE Mentor and progression to become a Certified TRE Provider

Supervision can be done with the following:

Primary Certification Trainer

The person who leads your Module 1 is the default trainer who is responsible for overseeing your whole TRE Certification process. The Primary Certification Trainer will do the final certification session with you.

It is possible to change your Primary Certification Trainer, however this needs to be negotiated with the parties concerned.

Certification Trainer or Local Certification Trainer or Certification Trainer Trainee:

The above can support you through the whole TRE Certification process.

Assisting on TRE drop-in groups, attending supervision groups and workshops run by Certification Trainers and Trainees can contribute to supervision credits.

TRE Mentor or TRE Mentor Trainee:

The above can support you through the whole TRE Certification process. A TRE Mentor Trainee will be receiving supervision on the supervision they give to their students. This may mean your supervision sessions are recorded.

After Module 1: Choose a TRE Mentor

TRE Mentor is the term we use for supervisor. Your TRE Mentor is the person with whom you do the bulk of your supervision work.

You can change your TRE Mentor, but once only and it is generally not recommended. You can however get some supervision credits from single supervision sessions or group supervisions with other TRE Mentors. The whole process is overseen by your Primary Certification Trainer - Steve Haines for TRE College courses.

The very strong preference is that you choose one of the TRE Mentors from your Module 1. Email them direct to start the process and make a plan. You can learn more about their background, and get their contact details, here:

<https://trecollege.com/mentors/>

Your contact with your TRE Mentor is an important relationship in the TRE Certification process. You do a

significant amount of your learning under the guidance and feedback of your TRE Mentor.

Students need to be proactive in booking sessions with their TRE Mentor. Set a timetable for achieving the goals of the TRE Certification process.

Including the final certification session, there is a minimum of 13 supervision sessions. The sessions cover your personal experience of TRE, teaching TRE to individuals and teaching TRE to small groups and your understanding of the theory underpinning TRE.

Partial credits as part of supervision

Assisting on TRE open groups, attending supervision groups or workshops run by TRE Mentors can contribute to supervision credits.

Typically attending 2 to 4 of the above events is deemed equivalent to one face to face supervision with your Mentor.

A maximum of 4 face to face supervisions sessions (ie 4 supervision credits) can be replaced by collecting partial credits.

All credits need to be agreed beforehand with the the TRE Mentor. Credits are at the discretion of the TRE Mentor in agreement with the Primary Certification Trainer.

Open groups and supervision groups, but not workshops, can be used as partial credits if run by TRE Mentor Trainees.

Final Certification Session: Book with your Primary Certification Trainer

The Primary Certification Trainer will interview the trainee on their practice and understanding of TRE with individuals and groups.

This will be similar to a supervision session, but with more focus on drawing out the trainee's understanding of TRE and how they would respond in certain situations.

The trainee will need to show:

- They have integrated the learning from one teaching experience prior to proceeding to the next teaching experience
- Demonstrate competency in all the identified areas
- They can provide appropriate TRE self-regulating containment techniques and knowledge
- They can provide basic TRE interventions techniques

Your supervisor will have indicated you are ready to do the final certification session. However, sometimes it becomes clear in the final certification session there are still some areas of understanding and practice that you need to work on before becoming a Certified TRE Provider.

The Primary Certification Trainer has the responsibility to ensure the trainee is competent at the point of certification; to this end, **the trainee may need to have additional sessions and/or fulfil additional requirements to meet certification competency.**

The Primary Certification Trainer will issue the Certified TRE Provider a certificate upon successful completion.

What happens in the final certification session

For the final assessment the Primary Certification Trainer will ask some questions on the theory of TRE, you will be asked how you explain TRE to clients and in the session you will be asked how you might respond to some difficult client scenarios.

There will be space to name some of your strengths and some of the things you still need to improve in terms of supporting people to shake safely.

Towards the end of the session the Primary Certification Trainer will reinforce some central principles about being a Certified TRE Provider.

Register once a year with TRE® for All: Required to be listed on TRE Provider List.

On completion of the above you will be able submit a biography and photo to be listed on the main TRE website. This costs US\$75 per year.

Here is the listing page of worldwide Certified TRE Providers. <http://traumaprevention.com/tre-provider-list/>

TRE® for All makes the following recommendation: **Only use Certified TRE Providers found on the TRE Provider List. If someone claims to be a Certified TRE Provider and is not on this list they may not be a Certified TRE Provider.**

Appendix I: TRE College Curriculum

Module 1 Curriculum

<https://trecollege.com/curriculum/> for easy to use online version

Event	Tag	Comment
Module 1		
Personal TRE® Process	Summary	Learn how to safely start and stop natural tremors. Core principles of grounding, self-regulation and avoiding freezing, flooding and dissociation will be taught. Online or face-to-face, 2 days.
M1 Who Can Attend	Pre Requisites	The two day TRE Module 1 workshop is open to everyone. You can attend to learn about using the tremors to support your own health. You can also attend the workshop as the start of the process to become a Certified TRE® Provider. It is highly recommended you have had at least one personal TRE® session from a Certified TRE Provider prior to the course. To book a session, check here: https://trecollege.com/find-a-provider/
Introduction to TRE and personal tremoring experience	Core Concept	How to do the tension and trauma release exercises. Starting and stopping the tremor process. Cautions and contraindications. 'TRE is you healing you'. History of TRE.
Understanding the tremor response	Core Concept	Tremors are a safe natural body reflex. We shake all the time to optimise muscle control Central pattern governors in spinal cord. Neurology of tremors.
Stress and trauma as it relates to TRE	Core Concept	Anatomy, neurology and physiology of stress and trauma 'If your physiology is stuck you are stuck' 'We do not need to understand and we do not need to remember'
Grounding and Self Regulation	Core Concept	Containment and grounding strategies. Recognising dissociation and the importance of embodiment. Principles of going slow, not doing too much and allowing integration time. Practicing putting the brakes on.
Avoid Freezing, Flooding and Dissociation	Core Concept	Knowing when to stop. Spotting signs of going too fast or too slow. Why 'floating' is generally not good. You do not 'have to do' anything.
Additional TRE Core Concepts	Core Concept	Belief systems and trauma models. Cautions and contraindications. Trusting the self organising, self healing systems of the body.
M1 Learning Outcomes	Outcome	Understanding of anatomy and neurophysiology of stress and trauma as it relates to TRE Knowledge of the key principles of TRE and the importance of embodiment Ability to use containment and grounding strategies for yourself Practice and support to start, allow and stop personal tremoring experiences

Module 2 Curriculum

<https://trecollege.com/curriculum/> for easy to use online version

Event	Tag	Comment
Module 2		
Teaching TRE® to Individuals	Summary	Learn how to safely teach the TRE to individuals. Deepen your understanding and application of polyvagal theory. Learn how to create safety for people to meet their bodies. Online or face-to-face, 2 days.
M2 Who Can Attend	Pre Requisites	Complete Journal Summary 1st 20 hrs. Minimum 20 hours of journaling of own TRE personal process. Minimum 2 personal process TRE sessions facilitated by your Mentor. Pre M2 Trauma Physiology? How does trauma affect the body and our nervous system? Include descriptions of 'fight-or-flight' (mobilisation) response and the 'freeze' (dissociation, immobilisation) response, as you understand them. Complete Pre M2 Agreement with your Mentor and agree whether now is the right time to attend Module 2 to continue to train as a Certified TRE Provider. Recommended gap between modules is 6 weeks to 6 months.
How to safely teach the exercises to individuals	Core Concept	Seven core exercises. Adapting the exercises and variations. Creating safety. Verbal skills to explain TRE, grounding and self regulation.
Introduction to the polyvagal theory	Core Concept	How humans are always checking for safety. Social engagement, mobilising, immobilising. The amazing vagus.
Defense reactions as they relate to TRE	Core Concept	Deepening the understanding of the neurophysiology of 'fight-or-flight' or 'freeze'. Intrinsic networks - an update of the triune brain model. Attachment theory as it relates to embodiment and TRE.
Interventions to support the tremor process	Core Concept	When to intervene - supporting safety, variety, coherence and connection. Observing and being present. Interventions to contain - review and deepening. Interventions to develop tremors. 'Where are the clients on the curve'.
Fascia as it relates to TRE	Core Concept	Observing where people are not shaking. Everything is connected, the 'living matrix' of connective tissues. Transverse diaphragms. Muscles and fascia form 'myofascial meridians'. Fascia as a sense organ, introduction to interoception.
M2 Learning Outcomes	Outcome	Knowledge of polyvagal theory and the importance of safety Skills to identify defense cascades as they relate to TRE Ability to use containment and grounding strategies for others Ability to safely teach the core seven exercises to individuals Practice of explaining; TRE theory, grounding and self-regulation

Module 3 Curriculum

<https://trecollege.com/curriculum/> for easy to use online version

Event	Tag	Comment
Module 3		
Teaching TRE® to Groups	Summary	Learn how to facilitate the tremor process in small groups. Develop skills to explain TRE and ground and regulate diverse groups. Learn how to make group interventions to contain and support safety. Online or face-to-face, 2 days.
M3 Who Can Attend	Pre Requisites	<p>Complete Journal Summary 2nd 20 hrs. Submit your final reflective summary when you have completed 40 personal TRE sessions. You should have completed all your personal process supervision by M3</p> <p>Minimum 2 practice sessions teaching individuals TRE and 2 supervision sessions on teaching individuals with your Mentor. Ideally you will have taught and written up 4 individuals, completed Case Study 1 and had significant supervision on teaching individuals.</p> <p>Pre M3 Tremors? write up: Why are tremors useful? How does shaking change stuck emotions and flashbacks? What is neuroplasticity? Why is it important to be embodied? 250-500 words</p> <p>Pre M3 Reading write up: Summarise insights from essential reading. You should have read 'Areas of Understanding', 'TRE Template', 'Revolutionary Trauma Release Process' and 'Trauma Is Really Strange' as a minimum by M3. Briefly reflect on the essential reading, watching videos and any recommended reading from the book list. What has been the clearest messages you have received from reading about trauma? 250-500 words</p> <p>Complete Pre M3 Agreement with your Mentor and agree whether now is the right time to attend Module 3 to continue to train as a Certified TRE Provider. Recommended gap between modules is 6 weeks to 6 months.</p>
Debrief of individual practice teaching experiences	Core Concept	Catch up on progress of TRE Certification. How has regular TRE practice and teaching of TRE changed you? Articulating how you think TRE works. Answering difficult questions.
Deepening of concepts relevant to TRE	Core Concept	Wider views of trauma - appeasement. Why is embodiment a good thing?
How to run TRE Groups	Core Concept	Expanding your ability to explain core TRE concepts Useful rules to set up at the start of a TRE group Getting people interacting after the shaking process in pairs Keeping it light and fun
TRE interventions for groups	Core Concept	Self touch interventions for clients in groups Refining group instructions on breathing and vocalising Teaching groups to pause and self regulate Teaching groups to orient to the size shape and weight of their bodies Teaching groups to orient to their environment
Working within your scope of practice, knowledge, and competency	Core Concept	Follow up advice When to refer on, hearing difficult stories Ethical awareness Simple TRE - TRE is set of self regulating exercises, not energy work, psychotherapy or a specific spiritual practice Self care and support for Certified TRE Providers
M3 Learning Outcomes	Outcome	<p>Deeper understanding of the neurophysiology of stress and trauma</p> <p>Skills to safely run small TRE Groups</p> <p>Review of core concepts, inc the 'Areas of Awareness in the Practice of TRE®' paper</p> <p>Knowledge and practice of using basic interventions to support TRE for individuals and groups</p> <p>Ethical awareness and ability to working within your scope of practice, knowledge, and competency</p>

Supervision Curriculum Overview

Supervision is paid for time with your TRE Mentor.

<https://trecollege.com/curriculum/> for easy to use online version

Event	Tag	Comment
Supervision		
Supervision with your TRE Mentor	Summary	Supervision is an essential component of the training. Minimum requirements are 4 sessions on your personal process, 4 on teaching individuals and 4 on teaching groups plus 1 final certification sessions. More supervision may be required by your TRE Mentor, depending on your skills and background. Online or face-to-face, min 13 credits to certify.
General Supervision Points	Core Concept	<p>The learning stages are self directed and need organisation and motivation on the part of the TRE Trainee. Your relationship with your TRE Mentor is key. The personal process work is significant and needs to be fully engaged with before moving on to teaching to other individuals. Pre M2 we will ask you to agree a learning plan with your TRE Mentor. It may be recommended you continue to focus on your personal process before seeking to teach TRE to others.</p> <p>The completion of the above minimum requirements does not guarantee you will be certified as a Certified TRE Provider.</p> <p>For people without an existing qualification as a therapist or trainer then the supervision requirement will almost certainly be greater (of the order of a minimum of 4 extra supervision sessions).</p> <p>Please note, TRE events attended prior to Module 1 do not contribute to the certification process.</p>
4 Personal 1 to 1 TRE Sessions	Core Concept	<p>Learning about your own response to doing TRE in 1 to 1 sessions.</p> <p>Demonstrate ability to be grounded.</p> <p>Demonstrate ability to self regulate.</p> <p>Know the signs of freezing, flooding and dissociation.</p> <p>Understand the tremor response and how to 'follow the body'.</p> <p>The trainee needs to participate in a minimum of 4 personal sessions with a supervisor.</p> <p>Extra sessions may be recommended by your TRE Mentor.</p>
4 Supervision Sessions on Teaching Individuals	Core Concept	<p>Learning how to teach TRE to individuals.</p> <p>After Module 2 you will need to teach, video and write up teaching different individual clients.</p> <p>4 new individual clients in single sessions. 2 new individual clients over three sessions each as case studies.</p> <p>Know the TRE Template and competently guide the client through the TRE process in individual sessions.</p> <p>Demonstrate; a basic understanding of 'follow the body' of the client; knowledge of containment and know steps to take; the ability to instruct, guide and educate re self-regulation.</p> <p>Demonstrate; knowledge of appropriate modifications as needed; ability to support safety for the client; ability to competently use basic interventions; how and when to refer to the appropriate professional when needed.</p> <p>Extra sessions maybe recommended by your Mentor.</p>
4 Supervision Sessions on Teaching Groups	Core Concept	<p>Learning how to teach TRE to small groups.</p> <p>After Module 3 you will be supervised through the process of teaching TRE to small groups of between 3 to 8 people.</p> <p>You need to teach and record a minimum of 4 groups and get supervision on each group.</p> <p>Demonstrate; ability to stay present and be responsive to their TRE clients in a group setting.</p> <p>Demonstrate; skill to assess whether or not the TRE client can utilize TRE as a self-help tool.</p> <p>Client handling skills; how to respond to side effects, complaints, transference and counter transference.</p> <p>Extra sessions maybe recommended by your Mentor.</p>

	Event	Tag	Comment
	1 Final Certification Session	Core Concept	<p>Graduation depends on a Final Certification with your Primary Certification Trainer (normally Steve Haines for TRE College).</p> <p>You will be asked some questions on the theory of TRE, how you explain TRE to clients and how you might respond to some difficult client scenarios.</p> <p>Your TRE Mentor indicates you are ready to do Final Certification. However, sometimes it becomes clear there are still some areas of understanding and practice that you need to work on before becoming a Certified TRE Provider. If that is the case then further practice and supervision will be recommended.</p> <p>Your agreement to central principles and ethics about being a Certified TRE Provider will be asked for.</p>

Assessment Curriculum Overview

Assessments are things (journals, write ups of sessions, writing on theory, videos of sessions, agreements) you submit to your TRE Mentor. This table is an overview of the assessment process, for the exact requirements that need to be completed before each stage of the certification process see Appendix 2.

<https://trecollege.com/curriculum/> for easy to use online version

Event	Tag	Comment
Assessment		
Ongoing Assessments with your TRE Mentor	Summary	There are ongoing assessments of your skills and understanding. You submit write ups of your teaching and learning of TRE concepts. Pre M2 you decide and agree with your mentor on whether to focus more on your personal process before seeking to teach TRE to others. Online or face-to-face, min 18 completed assessments to certify.
Journal 40 Hours of TRE Practice	Core Concept	Trainee needs to record at least 20 hours of journaling their personal TRE Pre M2. Trainee needs to complete a record of a total of 40 hours of journaling Pre M3. On completing the journal there may be requests for further journaling from your TRE Mentor due to individual needs. The journaling contributes to the Learning Plan agreed Pre M2.
Pre M2 and Pre M3 Agreements	Core Concept	In conjunction with your TRE Mentor, Pre M2 and Pre M3 you will develop a learning plan to decide whether to continue to focus more on your personal process before seeking to teach TRE to others.
TRE Concepts	Core Concept	There are 4 theory writing pieces based on required reading and watching: Pre M2 - What is the physiology of trauma? 250-500 words. Pre M3 - Why are tremors useful? 250-500 words. Pre M3 - Summarise insights from essential reading. 250-500 words. Pre Final Cert - Summarise TRE theory. 250-500 words.
Videos and Write Ups of Teaching	Core Concept	You will be required to provide videos and write ups of your teaching of individuals and groups. The exact mix and numbers of videos and write ups will be agreed with your Mentor. They should be submitted prior to supervision sessions.
Ongoing Skills Assessment	Core Concept	Throughout the whole of the certification process your TRE Mentor will be supporting you to develop the follow key competencies: Safety: Capacity to lead others through TRE safely. Limits: Understand own personal and professional limitations, and take necessary actions and precautions. Presence: Capacity to stay connected to self and others during the TRE process (groundedness). Regulate: Capacity to identify and respond to specific TRE reactions, including freezing, flooding and dissociation. Self Practice: Maintain a continued TRE self-practice. Knowledge: Understand TRE theory, and be able to apply theory to practice.

Appendix 2: Assessment Timeline Exact Requirements

<https://trecollege.com/app/> for easy to use online version

ID	Category	Tag	Element
Pre M2			
Personal Process	Supervision	Mentor Contact	<p>4 Supervision Sessions on Personal Process: At least 2 to be completed Pre M2. With your TRE Mentor the goal is to support consistent TRE practice, self-regulation skills and awareness.</p> <p>Ideally these will be all completed before the Module 3 hopefully before Module 2. The personal TRE sessions can be done by zoom or face-to-face.</p>
Journal Entry	Assessment	Journal	<p>Keep a TRE Journal. The journal is a reflective diary of your self practice of shaking sessions. The goal is at least 20 TRE sessions Pre M2, and completion of 40 TRE sessions Pre M3 at the latest.</p> <p>Make a journal entry for each session of TRE. Regular journal entries are mostly for your use, but they should be made available for your Mentor to check on your progress.</p> <p>How did you feel before, during, after the shaking? Track your skills of grounding, self-regulation, noticing early signs of distress, avoiding freezing, flooding, dissociating.</p> <p>Are you feeling stuck or are patterns repeating without changing? Are your tremors; strong/gentle, whole body/fragmented, chaotic/coherent, rigid/fluid? Are you trying too hard to break through or release? Can you go slow and shake to connect? Do you feel safe to be with intense feelings?</p>
Journal: Summary 1st 20 hrs	Assessment	Journal	<p>Submit a reflective summary at 20 personal TRE sessions.</p> <p>Your Mentor is interested in your ability to reflect on how you and your tremors change over an extended period of shaking.</p> <p>There may be peaks and troughs, flat periods, struggles and breakthroughs. Notice how your mind can get in the way of trusting the tremors. 250-500 words</p>
Pre M2 Agreement	Assessment	Agreement	<p>Pre M2 Agreement: OK to attend M2. In conjunction with your TRE Mentor, Pre M2 you need agree on if you are ready to attend M2. Sometimes we may recommend you need to focus more on your personal process before seeking to teach TRE to others.</p>
Pre M2: Trauma Physiology Write Up	Assessment	Write Up	<p>What is the physiology of trauma? How does trauma affect the body and our nervous system? Include descriptions of 'fight-or-flight' (stress response, mobilisation) response and the 'freeze' (dissociation, immobilisation) response, as you understand them. Include a description of the autonomic nervous system and the main hormones that are released.</p> <p>250-500 words</p>
Pre M3			
Teach Individuals	Supervision	Mentor Contact	<p>4 Supervision Sessions on Teaching Individuals: At least 2 to be completed Pre M2. Learn the TRE Template. Teaching TRE cannot begin until agreed with your supervisor, after sustained personal TRE experiences, personal 1 to 1 TRE sessions, and attendance of Module 2.</p> <p>Book supervisions to receive feedback as you progress through the requirements of teaching individuals. Do not teach lots of people immediately without layering supervision requirements and learning from the feedback. A typical plan might be teach 2 new 'easy' people (eg friends and family), first supervision, teach 2 more individuals, second supervision, start/complete case study 1, third supervision, start/complete case study 2, fourth supervision.</p> <p>4 Single Sessions: Teach one session of TRE to 4 different individuals. You will need to video most if not all of the sessions and submit the videos and write ups to your supervisor. (N.B. Assessment: Submit 4 short reports on teaching 4 individual clients. Each report 100-250 words.)</p> <p>2 Case Studies: Teach three sessions of TRE to 2 different individuals. You will need to video most if not all of the sessions and submit the videos and write ups to your supervisor. Observe how people progress overtime with the tremors and learn how to support a deepening of the clients TRE experience. Preferably these individual clients will be previously unknown to you. Try to ensure the sessions are no more than 2 weeks apart. (N.B. Assessment: Case Study 1: Write up 3 sessions. 400-600 words. Case Study 2: Write up 3 sessions. 400-600 words.)</p>

Journal: Summary 2nd 20 hrs	Assessment	Journal	Submit a final reflective summary when you have completed 40 personal TRE sessions. How did you negotiate resistance to doing TRE? What was different from your early experiences of TRE? 250-500 words.
Teach Individuals: Write Ups (4 in total)	Assessment	Write Up	Submit 4 short reports on teaching 4 individual clients. Reflect on what you observed in your client, how they responded, your own ability to stay present with your client's process and what you learnt from the teaching practice. Ideally this will be completed before the Module 3. Each report 100-250 words.
Teach Individuals: Case Study 1	Assessment	Write Up	Case Study 1: Write up 3 sessions. After getting feedback on teaching different individuals in single session, teach TRE to an individual client over a series of three sessions. Ideally this will be completed before the Module 3. 400-600 words.
Pre M3: Tremors Write Up	Assessment	Write Up	Why are tremors useful? In your understanding how does shaking change stuck emotions and flashbacks? Why is it important to be help people safely connect to the body and not just talk about what happened? (Think about being hijacked by primitive defence reflexes. Shaking turns on central pattern governors in the spinal cord. There is lots of new sensory information that reboots the threat detection systems so we can think, emot and remember more clearly.) 250-500 words (Check reading list: Pulkanen and Buckley 2020)
Pre M3: Reading Write Up	Assessment	Write Up	Summarise insights from essential reading. You should have read 'Areas of Understanding', 'TRE Template', 'Revolutionary Trauma Release Process' and 'Trauma Is Really Strange' as a minimum by M3. Briefly reflect on the essential reading, watching videos and any recommended reading from the book list. What has been the clearest messages you have received from reading about trauma? 250-500 words
Pre M3 Agreement	Assessment	Agreement	Pre M3 Agreement: OK to attend M3. In conjunction with your TRE Mentor, Pre M3 you need agree on if you are ready to attend M3. Sometimes, attempting to teach TRE to others can reveal hidden anxieties that do not emerge in personal process supervision. Your Mentor may highlight core competencies that would benefit from more supervision and personal development.
Pre Final Cert			
Teach Groups	Supervision	Mentor Contact	4 Supervision Sessions on Teaching Groups: Teach 4 groups of between 3 and 8 people, start after Module 3. Book supervisions to receive feedback as you progress through the requirements of teaching groups. A typical plan is teach one group, first supervision, teach second group, second supervision etc. Try to ensure each group contains at least 2 new people. You will need to video most if not all of the groups and submit the videos and write ups to your supervisor. (N.B. Assessment: Submit 4 short reports on teaching 4 groups. Each report 100-250 words.)
xOther Supervision	Supervision	Mentor Contact	Other Credits agreed with TRE Mentor. There is a credit system to complement TRE Certification supervision sessions. Assisting on TRE open groups, attending supervision groups or workshops run by TRE Mentors can contribute to supervision credits. Partial credits (typically 1/4 Credit, 1/3 Credit, 1/2 Credit) are awarded, for example, after attending a supervision group, assisting on an open group or attending a workshop run by a TRE Mentor. A maximum of 4 supervisions sessions within in the whole TRE Certification Process can be replaced by collecting partial credits. All credits need to be agreed beforehand with your TRE Mentor. Credits are at the discretion of the TRE Mentor in agreement with the Primary Certification Trainer. Open groups (where members are taught TRE®) and supervision groups, but not workshops, can be used as credits if run by TRE Mentor Trainees.
Teach Individuals: Case Study 2	Assessment	Write Up	Case Study 2: Write up 3 sessions. After receiving feedback on Case Study 1, teach TRE to a second individual client over a series of sessions. Ideally this will be completed before the Module 3. 400-600 words.
Teach Groups: Write Ups (4 in total)	Assessment	Write Up	Submit 4 short reports on teaching 4 groups. Reflect on what you observed in your clients, how the whole group responded, your own ability to stay present and what you learnt from the teaching practice. Each report 100-250 words.

Pre Final Cert: TRE Theory Write Up	Assessment	Write Up	Summarise TRE theory. Complete the required reading and watch the required videos. Focus on how you would explain TRE theory to a new client. How do you simply explain grounding, self regulation and avoiding freezing, flooding and dissociation? 250-500 words
xOther Assessment	Assessment	Write Up	Other Assessment agreed with TRE Mentor. Use this option to submit extra assessments agreed with, and recommended by, your TRE Mentor.
General			
xFinal Certification	Supervision	Mentor Contact	Final Certification Session with Primary Certification Trainer. Session covering your knowledge and understanding of TRE. To complete there may be extra requirements as negotiated with Primary Certification Trainer and/or Mentor. Final Certification should be completed between 10 months and 2 years of your Module 1 start date. Certification requires complete payment for all supervision and modules.
M1 Attend	Supervision	Module	Module 1 (2 Days) Personal TRE® Process. To graduate you need to attend both days of a Module 1.
M2 Attend	Supervision	Module	Module 2 (2 Days) Teaching TRE® to Individuals. To graduate you need to attend both days of a Module 2. Recommended gap is within 6 weeks to 6 months of Module 1.
M3 Attend	Supervision	Module	Module 3 (2 Days) Teaching TRE® to Groups. To graduate you need to attend both days of Module 3. Recommended gap is within 6 weeks to 6 months of Module 2.

Appendix 3: Keeping a TRE Journal

Overview

Primarily the value of the journal to keep a record of your experiences so that you can gain insight into your own process. Journals help us notice incremental change, change that is hard to spot with memory alone, when doing therapeutic work.

Please feel free to be creative. We make suggestions on themes and things to record but these are guidelines only.

Secondarily, your journal is a vehicle for your Mentor to get to know you and your process as well assisting you in determining your readiness to begin to teach others.

Make a journal entry for each session of TRE. Regular journal entries are mostly for your use, but they should be made available for your Mentor to check on your progress.

Some themes that can be useful to track in your journaling

- How did you feel before, during, after the shaking?
- Track your sense of embodiment mood, sleep, pain and breath.
- Track your skills of, grounding, self-regulation; noticing early signs of distress, avoiding freezing, flooding, dissociating.
- Are your tremors; strong/gentle, whole body/fragmented, chaotic/coherent, rigid/fluid?
- Are you feeling stuck or are patterns repeating without changing?
- Are you trying too hard to break through or release? Can you go slow and shake to connect?
- Do you feel safe to be with intense feelings?
- Name and notice any resistance to doing TRE: 'I don't need this, this is only for people who are less advanced than me'
- Name emotions, memories and dreams that emerged 'I had an emotional release of crying.' 'I experience this sense of joy and peacefulness.'
- Track how you felt later in the day or the next few days 'I was content for the rest of the day, I felt relaxed and at ease for the rest of the day.' 'I was agitated and could not settle.'

- Include any symptom changes 'I noticed the pain in my neck had eased, I slept well, my jaw pain increased and then subsided.' 'I felt my breath was deeper.'

From the TRE Certificate Elements: Assessment Exact Requirements

You can enter all your journal entries online via the Student Tracker App.

You can also submit your Journal Summaries via the App.

<https://trecollege.com/app/>

Keep a TRE Journal.

The goal is at least 20 TRE sessions Pre M2, and completion of 40 TRE sessions Pre M3 at the latest.

Make a journal entry for each session of TRE. Regular journal entries are mostly for your use, but they should be made available for your Mentor to check on your progress.

Journal Summary 1st 20 hrs. Submit a reflective summary at 20 personal TRE sessions.

Your Mentor is interested in your ability to reflect on how you and your tremors change over an extended period of shaking.

There may be peaks and troughs, flat periods, struggles and breakthroughs. Notice how your mind can get in the way of trusting the tremors. 250-500 words

Journal Summary 2nd 20 hrs. Submit a final reflective summary when you have completed 40 personal TRE sessions.

How did you negotiate resistance to doing TRE? What was different from your early experiences of TRE? 250-500 words

Appendix 4: Pre M2 and Pre M3 Agreements

Overview

Prior to attending Module 2 and Module 3 learning plans should be agreed and reviewed by the TRE Mentor and TRE Student. The strengths and weakness of the student will be recorded and acknowledged by both parties.

Achieving a minimum set of core skills prior to the modules enables deeper learning at the modules.

You can complete your Pre M2 Agreement and Pre M3 Agreement online via the 'Submit Assessment Form' on the Student Tracker App page

<https://trecollege.com/app/>

Pre M2 Agreement

The Pre M2 Agreement confirms readiness to proceed and the skills and learning landmarks that have been achieved prior to Module 2.

Sometimes we may recommend you need to focus more on your personal process before seeking to teach TRE to others.

In Module 2 we assume that students are experienced in using the TRE process and are able to manage their own response to trauma in a grounded and self-regulated manner. In Module 2 there is less holding of personal process. The focus is more on deepening TRE theory and learning to teach individuals.

Not everyone is suited to become a Certified TRE Provider. It is important the TRE Mentors and Certification Trainers do not keep working to certify students who we believe are very unlikely to develop the necessary skills to safely train vulnerable people in TRE.

The Pre M2 Agreement provides a mechanism to give clear feedback for students who have not demonstrated awareness and sufficient skill in response to their personal process. Some students may need to take more time in certification process or, occasionally, be informed TRE College will not be able support them to become a Certified TRE Provider.

Minimum requirements before a student can attend Module 2

- ▶ **Complete Journal Summary 1st 20 hrs.** Minimum 20 hours of journaling of own TRE personal process.
- ▶ Minimum 2 personal process TRE sessions facilitated by your Mentor.
- ▶ **Pre M2 Trauma Physiology?** How does trauma affect the body and our nervous system? Include descriptions of 'fight-or-flight' (mobilisation) response and the 'freeze' (dissociation, immobilisation) response, as you understand them.
- ▶ **Complete Pre M2 Agreement** with your Mentor and agree whether now is the right time to attend Module 2 to continue to train as a Certified TRE Provider.
- ▶ Recommended gap between modules is 6 weeks to 6 months.

Statements that form part of the Pre M2 Agreement

- ▶ I have reflected on my personal process in conjunction with my Mentor. I feel stable enough with my own trauma healing to learn to offer a safe space for others who may struggling and in distress.
- ▶ I have absorbed the content of TRE Certification Manual Appendix 4: Pre M2 Agreement and Pre M3 Agreement
- ▶ I have discussed my resources and strengths and weakness to continue training as a Certified TRE Provider with my Mentor.
- ▶ Whilst acknowledging there is lots to learn at this stage of the training, I feel clear that I can develop my grounding and self regulation skills sufficiently to support people who may have been through significant overwhelming processes to learn TRE.
- ▶ I intend to proactively arrange supervision sessions with my Mentor and complete the certification elements of training to be a Certified TRE Provider.
- ▶ I understand that extra supervision above the minimum requirements may be required at later stages in the TRE Certification Process.

Pre M3 Agreement

In conjunction with your TRE Mentor, Pre M3 you need agree on if you are ready to attend M3.

Sometimes, attempting to teach TRE to others can reveal hidden anxieties that do not emerge in personal process supervision.

Your Mentor may highlight core skills that would benefit from more supervision and personal development.

Minimum requirements before a student can attend Module 3

- ▶ **Complete Journal Summary 2nd 20 hrs.** Submit your final reflective summary when you have completed 40 personal TRE sessions. You should have completed all your personal process supervision by M3
- ▶ Minimum 2 practice sessions teaching individuals TRE and 2 supervision sessions on teaching individuals with your Mentor. Ideally you will have taught and written up 4 individuals, completed Case Study 1 and had significant supervision on teaching individuals.
- ▶ **Pre M3 Tremors? write up: Why are tremors useful?** How does shaking change stuck emotions and flashbacks? What is neuroplasticity? Why is it important to be embodied? 250-500 words
- ▶ **Pre M3 Reading write up: Summarise insights from essential reading.** You should have read 'Areas of Understanding', 'TRE Template', 'Revolutionary Trauma Release Process' and 'Trauma Is Really Strange' as a minimum by M3. Briefly reflect on the essential reading, watching videos and any recommended reading from the book list. What has been the clearest messages you have received from reading about trauma? 250-500 words,
- ▶ **Complete Pre M3 Agreement** with your Mentor and agree whether now is the right time to attend Module 3 to continue to train as a Certified TRE Provider.
- ▶ Recommended gap between modules is 6 weeks to 6 months.

Core skills required

- **Safety:** Capacity to lead others through TRE safely.
- **Limits:** Understand own personal and professional limitations, and take necessary actions and precautions.
- **Presence:** Capacity to stay connected to self and others during the TRE process (groundedness).
- **Regulate:** Capacity to identify and respond to specific TRE reactions, including Freezing, Flooding and Dissociation.
- **Self Practice:** Maintain a continued TRE self-practice.
- **Knowledge:** Understand TRE theory, and be able to apply theory to practice.

When more time is needed

During the personal process part of the certification process it may become clear that complex issues for the TRE student may need to be more fully integrated into their experience before progressing. Most people who become Certified TRE Providers have significant training in other therapeutic models and are licensed in that model.

There is a limit to the amount of individual therapeutic work that can be supported in the TRE certification process. The key elements are the ability to ground and self regulate their own process and the ability to support the grounding and self regulation of clients in individual group settings. Bray (2018 - see Appendices) is a useful document on the process of a trainee (in this case trainee counselor) exploring and honoring their own trauma before working with the trauma of others.

If the TRE Mentor and Primary Certification Trainer for TRE College believe the student will struggle to hold the required grounded presence for future TRE clients the following will apply:

- TRE College will recommend an extended break (likely to be months or years) in the certification process.
- TRE College may suggest some goals to be achieved and possible models of therapeutic support to achieve those goals. It is likely to involve significant engagement with a one to one therapeutic process over a time frame of many months, possibly years.
- TRE College may recommend a cessation of the Certification Process all together. TRE College will notify the student and TRE for All of the reasons for the decision.

Appendix 5: Case Study Guide

Teach two clients for 3 sessions each

Case Study 1: Write up 3 sessions. After getting feedback on teaching different individuals in single session, teach TRE to an individual client over a series of three sessions. 400-600 words.

Case Study 2: Write up 3 sessions. After receiving feedback on Case Study 1, teach TRE to a second individual client over a series of sessions. 400-600 words.

See two new (non-fee paying) practice clients for three sessions each, ideally with the sessions no more than two weeks apart. Write up each session and video each session in agreement with your Mentor (you may not need to video every session).

Client selection

The intention of the case history project is to be able to teach people who you do not know, who may have more complex health needs and who you follow over a series of sessions.

The only conditions which are recommended to avoid are recent traumatic conditions such as a fracture or operation, drug addiction, fragile and life threatening conditions such as a recent cardiovascular accident, terminal illness and someone with a medically diagnosed mental health condition.

Please also do not recruit pregnant women or children under 16. These areas can require considerable experience to treat. If you are in doubt about the suitability of someone as a case history client, please contact your Mentor.

Clinical Highlight: Case Study Notes

Keep it simple. The following simple framework can be used.

First Session

- ▶ Presenting issues
- ▶ Background (other treatments, big events in health history, medications)
- ▶ Assessment (clients goals and needs, providers initial impressions of state of health)
- ▶ Progression of tremors
- ▶ Follow up advice

Follow Up Sessions

- ▶ Client progress report
- ▶ Assessment
- ▶ Progression of tremors

Consider the information that you gather here as a 'point in time', as the history is likely to unfold over the session work.

Major pieces of information frequently arise after the first session. Events happen during a sequence of treatments that change the goals of the teaching.

Make your notes comprehensive, but succinct and to the point.

At the end of the three sessions review your case study notes and write up a 400 to 600 word summary of the clinical process for your client.

Make reference to your initial assessment from session one. Also write your ideas about directions for follow up sessions.

Clinical Highlight: Three simple steps for following the TRE process

Try this simple framework from TRE for All when assessing the tremor process in an individual.

1. What part of the brain/ CNS is activated?

- ▶ Tremoring? Brain stem and spinal cord is activated, this is the core stimulus for change in TRE.
- ▶ Experiencing emotions? Limbic system and neocortex may be getting too involved. Avoid freezing, flooding or dissociating.
- ▶ Having memories and aware of the present moment? Good to be present but not good to overthink. Neocortex may be over involved and trying to control, be careful of lots of questions.

2. What part of the defence cascade is activated?

- ▶ Moving up the curve from calmness to excitement? The ability to tolerate intensity depends on the skill and resources of the client. Sometimes it is good to encourage going into the tremors and intense feelings, sometimes we encourage going much more slowly and putting the brakes on early. The scale of 'no more than 6 out of 10 in terms of intensity' is helpful for anything that feels too much.
- ▶ Moving down the curve from excitement to calmness? There are crescendos and natural pauses in the tremor process, allow time to integrate after more intense bouts of shaking.
- ▶ Coming out of 'freeze' into 'fight-or-flight'? This can be a difficult phase as people meet hidden feelings. Go slow and titrate to ensure self regulation and grounding.

3. How is the body pulsating?

- ▶ Pulsating too strongly or weakly? Can they express variety?
- ▶ Pulsating chaotically or rhythmically? Can you support coherence?
- ▶ Pulsating in segments or full body? Can they move from rigidity to fluidity?

Appendix 6: Past trauma in counselors-in-training: Help or hindrance?

Bray B (2018) *Past trauma in counselors-in-training: Help or hindrance? Counseling Today*, May 20, 2018 <http://bit.ly/2sQ9qCL>

Counselors are not immune to trauma - in fact, far from it. Many practitioners say that personal or familial experience with trauma or mental illness actually spurred them to become professional counselors.

The connection between personal experience and the pull to become a counselor is something that is hard to quantify, but "in my personal experience, I encounter it pretty frequently," says Allison Pow, a licensed professional counselor in North Carolina and adjunct professor at both Wake Forest University and the University of North Carolina at Greensboro. "For a lot of people, past experience draws them into the counseling field, and trauma can play such a pivotal part in someone's life. It's a common thing that we see as supervisors and counselor educators."

Past trauma can be either an impairment or a kind of "benefit" for counselors-in-training, depending on how much the person has worked through and processed the effects of trauma, say Pow and Amber Pope, a licensed mental health counselor and program chair of the clinical mental health counseling program at Hodges University in Fort Myers, Florida.

Past trauma can be either an impairment or a kind of "benefit" for counselors-in-training, depending on how much the person has worked through and processed the effects of trauma

Counselor educators and other professionals in the field who have close contact with counselors-in-training should keep an eye out for red flags that may indicate that a person's past trauma is interfering with their growth as a counselor or, in a worst-case scenario, has the potential to cause harm to clients.

"Just because you've been through trauma doesn't mean you can't become a counselor. You can become a great counselor if [your trauma] is processed correctly," Pope says.

Pow and Pope co-presented a session, "Wounded healers: How to support counselors-in-training who have experienced trauma," at the 2017 ACA Conference & Expo in San Francisco. The term

"trauma" can encompass a wide variety of experiences, from an acute event to years long, developmental trauma, Pow explains.

People who have processed the effects of past trauma - often with the help of a therapist of their own - can become excellent counselors, Pow says. Posttraumatic growth and healing from the experience can foster empathy and strengthen coping skills.

"Going through trauma is a very unique experience [through which] you understand the way your brain works and your body reacts. That is hard for someone to understand who hasn't gone through that," Pow explains. "I have had some students who were very resilient because they have been forced to cope [in traumatic situations] in the past."

"The reason a lot of people become very, very good counselors is their life experience," Pow adds.

However, people who haven't fully processed the trauma in their backgrounds can run into trouble as professional counselors. For example, in client sessions, they risk becoming triggered by topics that clients bring up and may be unable to regulate their own emotions or other behaviors in response. These reactions can harm the delicate balance of trust between practitioner and client.

"They may unwittingly be using their role as a counselor to work through their own unprocessed material or to recapitulate an unhealthy power dynamic to feel that they're in control," Pow says. "Control is often something that people seek after going through trauma. It may come from a lack of self-awareness."

"They may unwittingly be using their role as a counselor to work through their own unprocessed material or to recapitulate an unhealthy power dynamic to feel that they're in control,"

Red flags

Interactions with classmates and colleagues might be one of the best indicators of whether counselors-in-training have a trauma history that still needs to be worked through. During moments of vulnerability, do they become aggressive or reactive or express other strong emotions? In general, a lack of self-awareness, such as oversharing in class or being unaware of how the people around them are feeling, can be an indicator of unprocessed trauma, says Pow, who has a private practice in Greensboro, North Carolina.

Also watch for attachment issues or signs of avoidance, such as skipping classes or evading one-on-one contact with a professor or authority figures, Pope says. It can also be indicative of a trauma background if students do not generally have themselves together, including missing assignments or being late to class repeatedly, Pope says.

Other indicators can include:

- **Poor boundary keeping:** This may manifest as oversharing, attention-seeking or disruptive behavior in the classroom, or an unhealthy preoccupation with relationships with classmates or colleagues.
- **Low self-confidence:** Students with unresolved trauma may demonstrate low belief in themselves regardless of past successes. They may feel like they can “never do enough,” Pope explains. These students may lack motivation or even self-sabotage, such as missing a deadline even though they are capable of meeting it.
- **Rigidity in thinking:** If students aren’t open to receiving feedback and unwilling to take constructive criticism, it can be a major indicator of past trauma that hasn’t been resolved. This attitude can stem from a black-and-white way of thinking in which the student categorizes things as “all good” or “all bad” with no in between, Pope says.

Everyone has bad days now and then that can set them off. However, if a student is repeatedly unable to regulate their emotions, such as becoming reactive or upset in class, it is a red flag, Pope says.

“When a student is so set in their values or way of thinking that they try and impose it on others, that can stem from trauma. If they can’t become more flexible in their thinking process or relationships with others, then they’re going to have a difficult time with clients,” she explains.

When it’s time to intervene

It is beneficial, for any number of reasons, for counselor educators to get to know and connect with the students in their program, Pope says. If a particular student seems to be struggling with challenges that could keep them from becoming a proficient counselor - such as issues related to unresolved trauma - it is better to intervene sooner rather than later.

Be prevention-focused instead of reactionary, Pope suggests. The longer a student continues in a graduate counseling program, the harder it will be to check their behavior or make decisions about their future.

“Don’t let students waste time and money if they’re not going to be a good fit,” she says.

Counselor educators who identify students raising red flags should pull them aside after class or ask them to stop by the counselor educator’s office, Pope advises. The first interaction with the student should be kept informal and light. Let them know that you have noticed some patterns and indicators in their behavior that require some attention, and ask them what supports they need to help them make improvements, she says. If appropriate, other professors or colleagues who know the student can sit in on this initial informal meeting to offer support, Pope says.

“We’re very open, telling students that we [their professors] have all attended or are attending counseling, and that it’s important to be as healthy as you can be, [to] take care of yourself mentally and emotionally,”

Check in with the student frequently during class breaks, supervision meetings and other opportunities. Ask how the student is doing and how they are practicing self-care. This conveys to the student that the professor wants them to succeed and grow, Pope says.

Pope emphasizes that this method should be applied only to counseling students who haven’t committed an egregious offense or intentionally gone against the ACA Code of Ethics. In those cases, a swifter and more formal response is necessary.

If a student does not begin to change their behavior after a first informal meeting, consider meeting with the counselor-in-training again to create a formal written behavior agreement. Spell out which behaviors aren’t acceptable, why those behaviors aren’t acceptable and what they need to do to continue in the counseling program. Be specific and include a timeline of when the expectations must be met, Pope advises.

If the student meets the requirements in the behavior agreement, they should be allowed to continue on with graduate school. If not, suggest that they take a semester or other time off to get the help they need, or leave the program entirely.

“When a student is given feedback and continues in their behavior patterns and doesn’t make any changes, that’s showing me that the student isn’t ready to change or do what they need to do to grow professionally,” Pope says.

Throughout the process, Pope says, she would recommend that the student attend counseling. There is some debate within counselor education as to whether it is ethical to require students to attend personal counseling. In the case of recommending a student to personal counseling, a counselor educator can request the student to provide proof, in the form of written letters from a provider, that they are attending therapy sessions and making progress to demonstrate their willingness to comply with their professors' recommendation.

"We're very open, telling students that we [their professors] have all attended or are attending counseling, and that it's important to be as healthy as you can be, [to] take care of yourself mentally and emotionally," Pope says.

Although sometimes uncomfortable, this process is also an opportunity for counselor educators to model what a healthy professional relationship should look like, Pope notes. It shows students that you can give critical feedback while caring and maintaining empathy.

"You can give suggestions and guidance while keeping professional boundaries. They may not have had that [example] in their life before," Pope says.

"In my classes, I make a point of being very transparent with my expectations and predictable. I have a standard of which behaviors I respond to and which I don't," Pow agrees. "For a student who has gone through trauma, it's not our job to be their counselor. But a lot of times their lives haven't been predictable, and they haven't had a safe base. We can be that predictable, safe base. We can talk openly about their struggles, getting help and that it's not a bad thing that you've had some challenges in your life."

"For a student who has gone through trauma, it's not our job to be their counselor. But a lot of times their lives haven't been predictable, and they haven't had a safe base. We can be that predictable, safe base. We can talk openly about their struggles, getting help and that it's not a bad thing that you've had some challenges in your life."

Gatekeepers and guides

Counselor educators must strike a fine balance between acting as gatekeepers for the profession and serving as mentors and guides for those who need extra support, Pope says.

"When it comes to student trauma and challenges, for me, an ideal situation is when I can have enough conversations with a student so they can come to their own conclusions on whether the field is right for them or not," Pow says. "Part of effective trauma treatment is creating choice and putting decision-making back into the person's hands. That may be the choice to take some time off and return to the program. Emphasize where they have agency in things."

It's OK for a student to come into a graduate counseling program with unresolved trauma issues. They just have to be willing to work on it, self-process and accept help, Pow says. Students who are open to self-reflection and constructive feedback can experience a tremendous amount of growth, she says. "It's unreasonable for us to expect, as educators, that people are going to come into these [graduate] programs having processed everything that has happened to them and be completely self-aware," she affirms.

Processing and rising above trauma builds skills that are the hallmarks of a good counselor, including a strong sense of self-awareness, empathy and sensitivity. Counselors who have successfully processed their past trauma can become models for clients struggling with similar issues, Pope says.

"If you heal from a trauma, you really have to engage with the most vulnerable parts of yourself. It's a depth that people who haven't been through trauma may not fully understand," Pope says. "That's what creates really great counselors - [to be able to] engage with others at that level of vulnerability and intimacy. Knowing that going through something so challenging, you can become more whole, and in turn become a safe place for others. As a counselor, you're better able to serve your clients."

If you liked this article, try another from Counseling Today: Managing resistant clients

<https://ct.counseling.org/2010/02/managing-resistant-clients/>

Appendix 7: Transference and Countertransference

Transference in psychotherapy

Transference is a term that has come out of psychotherapy to define what takes place when the client responds to the therapist as a key figure in their history. Basically it is redirection of feelings and desires to another person. This typically happens as the therapeutic process deepens and early childhood experiences are emerging. It can come out in many ways but in simple terms the client behaves like the therapist is a parent figure or someone they have an unresolved relationship with and the interaction becomes coloured by it until the client resolves it.

Most of this is unconscious material that the client is not fully in relationship with or even partially in relationship with. A psychotherapist notices the behaviour of the client towards them to determine if the client is in transference. As touch therapists we can experience this dynamic very powerfully at a somatic level because of the highly empathetic contact we have with the client's physiology.

You can start to experience unusual felt sense patterns that don't feel familiar to your system, or emotions and thoughts that are unusual. These are almost certainly induced by the client's transference state. As the client starts to access held experiences the affects can be felt by the therapist. Sometimes this can become highly charged and difficult for the therapist as well as confusing.

Transference has generated a wealth of research that illuminates how people tend to repeat relationship patterns from the past in the present. In therapy transference is often manifested as an erotic attraction towards a therapist, but can be seen in many other forms such as rage, hatred, mistrust, parentification, dependence, or even placing the therapist in a god-like or guru status.

Clinical Highlight: Examples of transference

- ▶ You meet someone at a party who reminds you of a favourite aunt and you find yourself feeling warmly towards this new acquaintance.
- ▶ A client who has difficulty depending on others may find themselves feeling resentful, jealous, or angry towards their therapist without realising there is a connection between these feelings and the therapist's upcoming vacation.
- ▶ A client who fears disapproval and rejection notices that they suddenly find themselves worried about judgment or criticism from their therapist when they start to talk about a certain topic or feel a particular feeling.
- ▶ A perpetually single client prone to distrusting people may begin to view the therapist with suspicion as their relationship deepens.
- ▶ A client who struggles with anger and hostility may find themselves similarly struggling with anger and hostility toward the therapist.

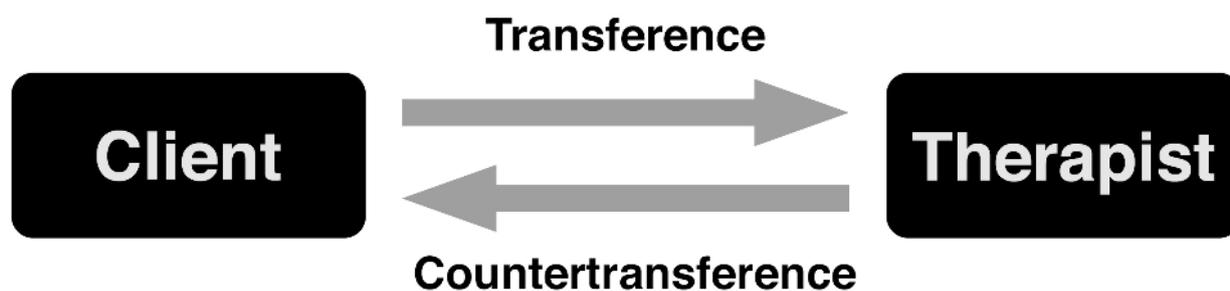


Fig A6.1 Simple overview of transference and countertransference

Body centred countertransference

TRE Providers generate a powerful empathetic relational field that often involves the TRE Provider experiencing the physical state of the client during the treatment.

Also known as somatic countertransference, it can incorporate the therapist's gut feelings, as well as changes to breathing, heart rate and to muscle tension.. Here's a list of commonly reported symptoms (Egan J. and Carr A. 2008 and Booth et al 2010):

- Sleepiness
- Muscle Tension
- Yawning
- Unexpected shift in body
- Tearfulness
- Headache
- Stomach disturbance
- Throat constriction
- Dizziness
- Aches in joints
- Nausea
- Numbness
- Sexual arousal

Working with boundaries

Counter-transference is often most powerfully felt with clients who are holding early difficult unresolved experiences in their body. Here's a list of responses to this:

- The most important thing is to recognise what is happening as it happens. With experience you start to notice these transference patterns taking place in your system and recognise them as coming from the client and not your own system. (It's always good to not assume automatically that body-feelings always involve somatic resonance to the client, as opposed to being produced from your own feelings/experiences).
- The tradition of being a TRE Provider is to be in relationship with the client's system in a neutral way. This can really help with mitigating these affects. Being in a grounded state will allow you to not be over empathetic to the client's system.
- It helps enormously for your client to become aware of these patterns in their own system. So helping guide them to into felt sense awareness and come into relationship with unresolved patterns and their experiences brings about an internal shift

resulting in a more inclusive physiology, one that isn't partitioned.

- Naming what you are experiencing to the client can be a powerful way of opening a dialogue around the transference. Saying it in a neutral, non judgemental way is the art of dialogue in TRE. Keeping verbal interchange oriented to felt sense can generate a powerful tool for accessing held trauma affects.
- Helping your client connect with feelings of health in their body can greatly reduce these resonances. Particularly useful is for the client to open up to feelings of fluidity in their body. The TRE Provider can help this by staying in relationship to their health and ability to self regulate. The tendency in sessions is for the client to draw the TRE Provider in to a tissue dynamic in their own system. The embodied non-judgmental presence of the TRE Provider is one of the most powerful healing forces in the TRE process.

Appendix 8: Book List

<https://trecollege.com/book-list/> for an easy to use online version (with extra links for purchasing options)

	Short Title	Tag	Reference	Comment
Essential				
	TRE Areas of Understanding	PDF	Berceli (2016) Areas of Understanding and Awareness in the Practice of TRE. TRE for All, Inc	Official TRE for All, Inc guide to core concepts relevant to TRE
	TRE Template	PDF	Berceli D (2018) TRE® Template. TRE for All, Inc	Official TRE for All, Inc in-depth guide to teaching the TRE exercises
	TRE College Module 1 Manual	PDF	Haines (2020) Module 1 (2 Days): Fundamentals of Theory and Practice of TRE. TRE College	Module specific manual
	TRE College Module 2 Manual	PDF	Haines (2020) Module 2 (2 Days): Teaching TRE to Individuals. TRE College	Module specific manual
	TRE College Module 3 Manual	PDF	Haines (2020) Module 3 (2 Days): Teaching TRE to Groups. TRE College	Module specific manual
	Revolutionary Trauma Release Process	Book	Berceli D (2008) Revolutionary Trauma Release Process: Transcend Your Toughest Times Paperback. Namaste Publishing.	The best introduction to TRE by far. A really simple, clear and deep exploration of trauma and tremors.
	Shake It Off Naturally	Book	Berceli D (2015) Shake It Off Naturally: Reduce Stress, Anxiety, and Tension with [TRE]. CreateSpace Independent Publishing Platform	Good, if slightly uneven, book edited by Dr David Berceli. Wide ranging contributions from TRE providers (inc Steve Haines) from all over the world.
	Trauma Is Really Strange	Book	Haines S (2016) Trauma Is Really Strange. London: Jessica Kingsley Publishers.	Short and sweet comic book introduction to Trauma by Steve Haines, founder of TRE College.
	Shake It Off Naturally DVD	Video	Berceli D (2015) Shake It Off Naturally: Reduce Stress, Anxiety, and Tension with [TRE]. Jonas Nordstrom DVD	Useful video of TRE exercises and theory put together by Jonas Nordstrom, long term TRE Certification Trainer in Sweden, and Dr David Berceli.
	TRE® Modifications	Video	Berceli D and Phillips D (2018) TRE® Modifications Parts 1, 2 and 3. TRE for All, Inc	Video series on modifying TRE for various groups and needs by Donna Phillips (ex chair of TRE for All, Inc) and Dr David Berceli
Recommended				
	Embodied safety and bodily stabilization in the treatment of complex trauma	PDF	Punkanen M and Buckley T (2020) Embodied safety and bodily stabilization in the treatment of complex trauma. European Journal of Trauma & Dissociation	Excellent paper exploring embodiment and trauma. Summarises the important models in trauma and gives practical examples of grounding that are very relevant to TRE. Highly recommended.
	Pain Is Really Strange	Book	Haines S (2015) Pain Is Really Strange. London: Jessica Kingsley Publishers.	Short and sweet comic book introduction to Pain by Steve Haines, founder of TRE College. Pain and Trauma are fundamentally about the perception of safety.
	Anxiety Is Really Strange	Book	Haines S (2018) Anxiety Is Really Strange. London: Jessica Kingsley Publishers.	Highly commended by the British Medical Association. Short and sweet comic book introduction to Anxiety by Steve Haines, founder of TRE College.
	Touch Is Really Strange	Book	Haines S (2021) Touch Is Really Strange. London: Jessica Kingsley Publishers.	New introduction to trauma informed touch by Steve Haines, founder of TRE College. Exploring the power of slow touch and inward touch (interception) for bodyworkers.

Short Title	Tag	Reference	Comment
In An Unspoken Voice	Book	Levine P. (2010) In An Unspoken Voice: How the Body Releases Trauma and Restores Goodness. Berkeley, CA: North Atlantic Books.	Levine's best book - he develops the themes from the earlier Waking the Tiger (also highly recommended).
The Pocket Guide to the Polyvagal Theory	Book	Porges S (2017) The Pocket Guide to the Polyvagal Theory: The Transformative Power of Feeling Safe. W. W. Norton & Company	Dr Stephen Porges is hugely influential in the world of trauma. His early writing is quite technical, this is the easiest of his books. He is prolific on social media and we will give you easy access articles to get the essentials of polyvagal theory.
The Body Keeps The Score	Book	van der Kolk B (2014) The Body Keeps The Score: Brain, mind, and body in the healing of trauma. New York, Viking.	Classic book on trauma. A big read but if you are at all interested in trauma very important